

**Minimum Licensing
Requirements For**

***Child Care
Family Homes***

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Foreword

LICENSING AUTHORITY

"The Child Care Facility Licensing Act", Act 20-78-210-220, as amended, is the legal authority under which the Division of Child Care and Early Childhood Education prescribes minimum standards for a variety of child care facilities under the Act.

Department Responsibility

The Division of Child Care and Early Childhood Education (referred to hereafter as the Division) under the Department of Health and Human Services is directly responsible for the inspection and evaluation of all licensed homes as defined in Section 101 of the Minimum Licensing Requirements for Child Care Family Homes.

The Division has the power to establish rules, regulations, and standards for licensing and operation of child care facilities. This includes all powers with respect to granting, revocation, denial, and suspension of licenses. Decisions regarding special situations shall be made on an individual basis by the Division. Information regarding an appeal process is available upon request.

The owner should be aware of any applicable city or county zoning ordinances or codes or neighborhood covenants which may limit the number of children in care or impose additional safety requirements. The Division will share information on the location and status of licensed homes or applications for a license with any city or county that requests this information.

The owner should be aware of applicable federal laws which may affect the operation of the facility. Child care programs are among the public accommodations that must comply with the Americans with Disabilities Act. (ADA).

Under federal civil rights laws, a facility may not discriminate on the basis of race, color, sex, religion, national origin, physical or mental handicap, or veteran status.

The Child Care Licensing Unit will notify the applicable federal agency at any time they become aware of, or are advised of violations of, the federal Civil Rights Act or the Americans with Disabilities Act.

Laws relevant to the operation of child care facilities are available upon request.

Application of Requirements

In determining a recommendation for licensing the home shall be reviewed by a Child Care Licensing Specialist to determine that the home is in substantial compliance with the requirements.

Substantial Compliance means compliance with all essential standards necessary to protect the health, safety and welfare of the children attending the Child Care Family Home. Essential standards include but are not limited to those relating to issues involving fire, health, safety, nutrition, behavior guidance, staff/child ratio and space.

LICENSING PROCEDURE

1. Any applicant applying for a home license may contact the local Division Office or Child Care Licensing Specialist to obtain information and/or the necessary application and related forms.
2. Upon receipt of a signed application the Child Care Licensing Specialist shall schedule an appointment to inspect, evaluate, and make a recommendation for consideration of license to the Division.
3. The Child Care Licensing Specialist shall make unscheduled visits throughout the year to determine continued compliance with standards and to offer consultation and technical assistance.
4. The license as issued shall apply only to the home's location at the time of licensing. The licensee shall notify the Child Care Licensing Specialist's office of a change of location or ownership at which time a new study shall be conducted. Upon issuance of a license, the license shall remain in effect as long as compliance is maintained with the Minimum Licensing Requirements for Child Care Family Homes.
5. If the Division Staff (CCLS) finds that an applicant meets the licensing requirements for a Child Care Family Home or has a reasonable expectation of correcting deficiencies in a reasonable time, the Child Care Licensing Specialist may recommend a provisional license for operation of a child care facility to the Division. The provisional license shall be in effect for a reasonable period, not to exceed twelve (12) months. This time frame shall be specified in the provisional license. A written list of deficiencies shall be provided the applicant at the time of issuance of a provisional license. A Licensing Specialist has sixty (60) days to submit a recommendation to the Division for a provisional license.
6. Upon final determination by the Division of a suspension of a license, the Division shall specify in the suspension order the period of the suspension. (The suspension of a license may range from one (1) month to a maximum of twelve (12) months. The license may be reinstated at such time as the Division finds that the terms of the suspension order have been met).

The Division may revoke a license when any of the following situations occur:

- a. The facility fails to maintain substantial compliance with licensing requirements.
- b. The facility fails or refuses to correct cited deficiencies in a timely manner.
- c. The facility fails to insure the health, safety and welfare of children in care.

The revocation of a license nullifies and cancels the license. At the time of a final determination of revocation of the license by the Division, the Division shall specify in the revocation letter the terms of the revocation. The licensee shall not be eligible to reapply for a license for a minimum of one year or longer, if specified in the revocation order. Related parties shall not be eligible to apply for a license for the same specified period. (Related parties are defined as immediate family members, members of Board of Directors, persons or entities associated or affiliated with, or which share common ownership, control, or common board members or which have control of or is controlled by the licensee. An immediate family member is defined as a spouse, step and in-law relationships, a child, a natural or adoptive parent, a sibling, a grandparent, a grandchild or a son or daughter-in-law.) Applicants who are denied a license or registration due to this requirement may appeal the denial to the Child Care Appeal Review Panel. Homes wishing to be re-licensed must submit a new application for licensure for review and approval by the Division. Approval must be obtained and a new license issued before the home provides care to a licensable number of children.

ALTERNATIVE COMPLIANCE

1. The Division may grant alternative compliance with the Minimum Licensing Requirements for Child Care Family Homes if the Division determines that the alternative form of compliance offers equal protection of health, safety and welfare to children and meets the basic intent of the requirement for which the alternative compliance is sought.
2. The Division shall consider all requests for alternative compliance with the Licensing Requirements except those requirements which are enforced by the Department of Health, Local Fire Marshal or State Fire Marshal's Office.
3. To request alternative compliance, the following procedure shall be initiated by the person responsible for the operation of the home:
 - a. The applicant/licensee shall submit the request for alternative compliance in writing.
 - b. The request shall include:
 - The specific standard for which alternative compliance is sought;
 - An explanation of how the alternative form of compliance is equal to or exceeds the stated requirement
 - Full justification and description of what the alternative compliance method will be and the method by which the facility will carry out this plan to be able

to continue to provide for the health, safety, and welfare of children as intended by the requirement; and

-The applicant/licensee shall provide clear and supportive evidence, and upon request of the Division, an expert's opinion on the effect to the health, safety and welfare of children and how it will protect through the alternative means of compliance

4. A separate written request shall be submitted for each requirement for which alternative compliance is sought. The approved alternative compliance is effective for the duration of the license unless a shorter time frame is requested or approved.
5. The granting of alternative compliance for a requirement shall in no way constitute a precedent. If an alternative means of complying with the requirement is granted by the Division and the facility fails to implement satisfactorily this alternate means, the original requirement for which alternative compliance was sought shall become immediately enforceable.
6. The Division shall have the right to obtain an expert opinion to corroborate expert opinions provided by the applicant/licensee.
7. The Division reserves the right to deny requests for alternative compliance when it finds that such request does not adequately protect the health, safety and welfare of children and does not meet the intent of the requirements.
8. All requests for alternative compliance shall be answered in writing by the Division.

LICENSE FEE

1. A Child Care Family Home shall be assessed a license fee of \$15.00 per year.
2. Upon review and determination by the Child Care Licensing Specialist of a licensing recommendation to be presented to the Division, the Child Care Licensing Specialist shall issue a Notice of License Fee Due to the home.
3. The Division shall not issue a license unless the required license fee has been paid.
4. A copy of the license fee notice shall be submitted at the time of licensure recommendation.
5. A second notice of license fee due will be sent to homes failing to submit the required license fee (Notice of License Fee Past Due). This notice will be sent twenty (20) days after the initial notice of fee due. Failure to submit a license fee within twenty (20) days of the receipt of the past due notice will result in action to suspend the license until such time as the fee is paid.
6. Refunds of license fees paid are made only when the Division does not approve issuance of a license. There shall be no refunds of license fees paid upon Division action to revoke

or suspend a license or for closure of a facility.

100 DEFINITION AND APPLICATION

101 Definition

1. A Child Care Family Home is defined as a situation in which children are cared for in a caregiver's own family residence or in some other suitable family type residence. There shall be no more than one license issued per home/structure. (This does not apply to situations such as a duplex where two licenses could be issued to two separate applicants.)
2. A home requires licensing when one (1) or more persons care for six (6) or more children, from more than one (1) family at the same time. A maximum of sixteen (16) children may be cared for with a Child Care Family Home license.
3. An individual shall be eligible to hold only one license, which shall be issued for one location. The holder(s) of the license shall be considered the primary caregiver(s) and shall be present and responsible for children during hours of care. At least one of the licensees (primary caregivers) shall be present at all times children are in care and shall not be otherwise employed during the hours of care.
4. If a qualified secondary caregiver is present, the primary caregiver may be absent for reasons related to the operation of the childcare business such as attending required training, and for brief and/or occasional absences relating to personal business or personal time off.
5. The caregiver's own preschool children shall be considered when determining the need for a license. The caregiver's own school age children are not considered when determining the need for a license. Other children in the home who are not accompanied by a parent, whether pay is received for care or not, are considered in determining the need for a license and will be counted in the ratio after a license is obtained.
6. A Child Care Family Home, which is not required to be licensed by this definition, may voluntarily choose to apply for a license or for registration with the Voluntary Registry.
7. Any home that has not provided care to children for a period of one year shall have the license closed unless a written request is made by the licensee stating why closure should not take place.

102 Application

The primary caregiver in the home shall submit the following to complete the application process:

1. A completed and signed application on a form provided by the Division, including a diagram of the home.

2. Fire and health approval (where applicable).
3. Effective July 1, 2006, verification of city zoning and/or other city requirements, if applicable, shall be provided by any new applicants for a license and by existing homes requesting increases in the license capacity. (Please be advised that lists of applicants for a home license will be provided to any city that requests this information.)
4. Verification of all required criminal background checks and child maltreatment central registry checks being initiated.
5. All caregiver's names shall be included on the application for the license.
6. A pre-application consultation meeting shall be required for all applicants for a license prior to the approval of the application. This meeting shall be offered within thirty (30) days of receipt of the application.

103 Appeal of Licensing Actions

A licensee or applicant for license may request an appeal of any of the following licensing actions:

- Adverse licensing actions (revocation or suspension of a license, conversion to a provisional license or denial of an application for license)
- Founded licensing complaints
- Denials of alternative compliance requests
- Cited noncompliance with the published standards

An appeal may be initiated on any of the above actions by requesting an appeal in writing to the Licensing Specialist or Licensing Supervisory Staff. Requests to appeal adverse licensing actions must be mailed within ten (10) calendar days of the receipt of the notice of the adverse action. Requests to appeal licensing actions, other than adverse, must be mailed within twenty (20) calendar days from receipt of the notification of the action. The request to appeal shall include a statement of the action(s) taken by the Division and the reason(s) the licensee or applicant for license disagrees with that action. The request to appeal will be reviewed by the Licensing Supervisor and the Licensing Administrator. If the appeal is not resolved to the satisfaction of the licensee or applicant for license, the matter will be referred to the Child Care Appeal Review Panel for hearing. **(Additional information regarding the appeal procedures and the Child Care Appeal Review Panel is available on request.)**

104 Licensing Investigations

Child Care Licensing staff shall have access to licensed homes for the purpose of conducting inspections, reviews, and complaint investigations. Denial of access to the home or denial of the right to interview children in care or other individuals present during hours of care may result in adverse action against the license.

105 Child Maltreatment Record Checks

1. The following persons shall be required to have their background reviewed through an Arkansas Child Maltreatment Central Registry Check: (A check or money order for \$10.00, payable to Central Registry, must be attached to each notarized form).
 - a. Each applicant to own or operate a licensed home at application and every two years thereafter
 - b. All household members who are at least 18 years of age application, upon residency, and every two years thereafter
 - c. Employees and applicants for employment in a licensed home at application or within 10 days of hire and every two years thereafter
 - d. All volunteers who have access to children in the home at application and every two years thereafter
2. The Division has the authority to review and consider each true (founded) report of child maltreatment received from the Central Registry. The Division shall retain the authority to:
 - a. Deny an applicant
 - b. Require corrective action
 - c. Take appropriate adverse action against the license
3. All caregiver(s) are mandated reporters under the Child Abuse law. The caregiver(s) shall notify the Child Maltreatment Hot Line number at 1-800-482-5964 when there is a reason to believe that a child has been abused or neglected. (AR Code Annotated 12-12-501 et seq.) **(Clarification** – These reports of child maltreatment shall include all allegations made to the licensee by parents, staff members or the general public. The licensee should call Child Care Licensing for guidance if there is any question about whether or not the Hot Line should be called regarding any situation where potential child maltreatment is involved.)
4. If a complaint of child maltreatment is filed against any employee or persons in the home, the Child Care Licensing Unit shall evaluate the risk to children and determine the suitability of the persons to supervise, be left alone with children or remain in the home during hours of care until the allegations have been determined true or unsubstantiated.
5. The Child Care Family Home operator, any employees or other persons in the Home who have had a true report of child maltreatment shall follow the corrective action plan approved by the Child Care Licensing Unit. Corrective action measures may vary from relevant training to reassignment or termination. Failure to comply with corrective action plans can constitute grounds for adverse action against the license.

106 Criminal Record Checks

1. The following persons shall be required to have their background reviewed through criminal records check conducted by the Arkansas State Police:
 - a. Each applicant to own or operate a licensed home at application and every 5 years thereafter
 - b. All household members who are 18 years of age or older at application; upon residency and every 5 years thereafter
 - c. Employees and applicants for employment in a licensed home within 10 days of hire and every 5 years thereafter
 - d. Volunteers who have supervisory/disciplinary control over children within 10 days and every 5 years thereafter
2. The following persons shall apply to the Identification Bureau of the Arkansas State Police for a nationwide criminal records check, to be conducted by the FBI, which shall include a fingerprint check: (The individual is responsible for the \$24.00 cost of the nationwide check.)
 - a. Each applicant to own or operate a licensed home initial application only
 - b. Each employee who has not been a resident of the State of Arkansas for the six preceding years within 10 days of hire
 - c. Volunteers who have supervisory or disciplinary control over children, or are left alone with children if the person has not been a resident of Arkansas for 6 years
3. No person shall be eligible to be a child care facility owner, operator, employee or be present when children are in care if that person has pleaded guilty, or been found guilty, of any of the following offenses:
 1. Capital murder
 2. 1st/2nd degree murder
 3. Manslaughter
 4. 1st/2nd degree battery
 5. Aggravated assault
 6. 1st degree terroristic threatening
 7. Kidnapping
 8. 1st degree false imprisonment
 9. Permanent detention or restraint

10. 1st/2nd degree rape or carnal abuse
 11. 1st/2nd degree sexual abuse
 12. 1st/2nd degree violation of a minor
 13. Incest
 14. 1st degree endangering of a minor
 15. Permitting child abuse
 16. Engaging children in sexually explicit conduct for use in a visual or print medium, transportation of minors for prohibited sexual conduct, use of a child or consent to use a child in sexual performance, by producing, directing or promoting sexual performance by a child
 17. Criminal attempt, criminal solicitation or criminal conspiracy to commit any of the above named offenses
 18. Distribution to minors [of any controlled substance]
 19. Manufacture, delivery, or possession with intent to deliver, or manufacture any controlled substance
 20. Carnal abuse in the third degree
 21. Sexual solicitation of a child
 22. Pandering or possessing visual or print medium depicting sexually explicit conduct involving a child
 23. Negligent homicide
 24. Assault in the first degree
 25. Coercion
 26. Sexual misconduct
 27. Public sexual indecency
 28. Indecent exposure
 29. Endangering the welfare of a minor in the second degree
 30. Any felony or misdemeanor involving violence or sexual misconduct
4. Any person who has pled guilty, nolo contendere, or who has been found guilty of any one of the offenses listed above may apply to the Division to demonstrate rehabilitation, if more than five (5) years have passed since the person was convicted and they have completed their sentence. (confinement, parole, or probation) The Division is authorized to determine whether rehabilitation is sufficient for the person to be a child care owner, operator, or employee.

200 ADMINISTRATION

1. All employee, children and home records shall be kept and made available to the Child Care Licensing Unit on request.
2. Falsification of any document or the submission of false information to the Child Care Licensing Unit, or any other unit of the Division, may constitute grounds for revocation of the license. (Falsification means the submission of untrue information, whether by statement or omission.)
3. All applicable health and fire regulations shall be met (see Section 302.2).

4. The home shall not exceed its licensed capacity at any time (see Section 302.2).
5. The caregiver shall provide prudent supervision of all staff and other persons in the home, and is responsible for the health, welfare, and safety of the children in care.
6. Parents shall be informed in writing upon enrollment of their child that children may be subject to interviews by licensing staff, child maltreatment investigators and/or law enforcement officials for the purpose of determining licensing compliance or for investigative purposes. (Child interviews do not require parental notice or consent.)
7. The facility shall provide a copy of the list of Kindergarten Readiness Skills, prepared by the Arkansas Department of Education, to the parents of all three (3) and four (4) year old children enrolled. (Act 825 of 2003) A statement, signed by the parent that they have received a copy of the list, shall be maintained in the child's record.

300 PERSONNEL

301 Caregiver Qualifications and Responsibilities

1. The primary caregiver shall be twenty-one (21) years or older. A secondary caregiver shall be age eighteen (18) years or older.
2. Primary caregivers, newly licensed after November 1, 2002, shall have a high school diploma or GED or shall obtain one of the following within the first year of licensure; a GED, a Caregiver Certificate or a Specialist Certificate. Secondary caregivers who are left alone with children shall be able to read and write well enough to keep required records, read the licensing requirements and administer medication.
3. The primary caregiver shall not be otherwise employed during the time he/she is responsible for children in the home. Employment at other times shall not affect the quality of care given the children. When two persons are listed as joint holders of the license and are both primary caregivers, at least one shall be present in the home while children are in care. (Also refer to paragraph number 4, section 101.1.)
4. A caregiver shall not use profanity or speak in an abusive manner when children are present. The caregiver shall also cooperate with licensing staff during licensing monitor visits.
5. The caregiver shall have a person who would be able to care for the children in the event of an emergency.
6. All caregivers who work directly with children shall obtain at least ten (10) hours of in-service training or outside workshop training each year in continuing early childhood education. This training shall be approved by the Division (Act 584 of 1993).
7. At least one (1) caregiver who is trained in infant and child cardiopulmonary resuscitation (CPR) shall be present within the confines of the home while children are in care. Adult CPR is also required if school age children are in care. **Certification shall be current.**

8. All caregivers shall provide a tuberculin test annually. All caregivers shall be physically and emotionally able to care for children.
9. Child Care Licensing may require a physician's statement for any caregiver anytime behavioral or physical indicators warrant.
10. Staff shall not engage in behavior that could be viewed as sexual or as dangerous, exploitative or physically harmful to children.
11. No caregiver shall consume or be under the influence of illegal drugs. (A drug test may be required if there is reasonable cause to suspect violation of this requirement and the issue cannot otherwise be resolved.) No caregiver shall consume or be under the influence of alcohol while delivering care. No caregiver shall consume or be under the influence of medications (prescription or non-prescription), which impair his/her ability to provide care.
12. Newly licensed caregivers shall attend Family Child Care Provider Training within the first six (6) months of being licensed.
13. The licensee shall notify the Licensing Unit within five (5) calendar days of any change in the person(s) designated as secondary caregivers.

Caregiver to Child Ratio by Age

<i>Adult Caregiver(s)</i>	<i>Number of Children</i>	<i>Ages of Children</i>
302.1 ONE	A. 3-6	0-up (no more than 3 under 2 years)
	B. 7	0-up (no more than 2 under 2 years)
	C. 8	0-up (no more than 1 under 2 years)
	D. 9	2-up (no more than 3 between 2 & 3 years)
	E. 10	3-up
302.2 TWO	A. 3-6	0-up
	B. 7	0-up (no more than 4 under 2 years)
	C. 8	0-up (no more than 4 under 2 years)
	D. 9	0-up (no more than 4 under 2 years)
	E. 10-14	0-up (no more than 4 under 2 years)
	F. 15-16	0-up (no more than 2 under 2 years)
302.3 THREE	A. 7	0-up (no more than 5 under 2 years)
	B. 8	0-up (no more than 5 under 2 years)
	C. 9	0-up (no more than 5 under 2 years)
	D. 10-14	0-up (no more than 5 under 2 years)
	E. 15-16	0-up (no more than 4 under 2 years)

302.4 FIRE INSPECTION IS MANDATORY FOR HOMES LICENSED FOR ELEVEN (11) OR MORE CHILDREN. (SECTION 1101.1) HEALTH INSPECTION (FOOD SERVICE) IS MANDATORY FOR HOMES LICENSED FOR ELEVEN (11) OR MORE CHILDREN. (SECTION 701.1)

- 302.5.** The caregiver shall be responsible for children in care at all times and shall exercise prudent supervision.
- a. When a caregiver is not in the same room with children the children shall be frequently observed and the caregiver shall remain close enough to easily hear them.
 - b. Doors to rooms where children are sleeping or playing within the home shall remain open and sleeping children shall be visually monitored and periodically checked to insure they are breathing normally.
 - c. The caregiver shall be present on the outdoor play area at all times when any children under age five are present. The caregiver may allow children, ages five (5) and up, to be on the outdoor play area without the caregiver being present as long as the caregiver visually observes the children at least every five (5) minutes and remains in a section of the home where he/she can hear and see the children and can reach them quickly in case of an emergency.
- 302.6** The caregiver shall not leave children unattended in the kitchen area of the home while any cooking is occurring. Ironing shall not occur in the presence of the children.
- 302.7** The primary caregiver's own preschool children shall be included in the caregiver/child ratio. The primary caregiver's own school age children are not considered in the ratio.
- 302.8** A licensed home may care for two (2) school age children for a short time not to exceed a total of three (3) hours per day before and/or after a school day. These two (2) children shall not be counted in the caregiver to child ratio. School age children who are in care at times other than before and/or after a school day shall be included in the caregiver to child ratio. These same two (2) children may stay all day in care and not be counted in the ratio due to emergency school closings, such as inclement weather. The home's capacity shall not be exceeded other than the above stated exemptions. If the attendance exceeds ten (10), fire approval is required.
- 302.9** Additional staff provisions shall be made for enrollment of children with disabilities who require individual attention.

302.10 Infants

1. Homes specializing in infant care shall maintain a 1:3 ratio.
2. Homes specializing in infant care shall have a Fire Department inspection and approval.

303 Adults in the Home

1. The caregiver(s) shall provide a clear statement regarding the presence of any other adults eighteen (18) years of age and above who remain in the home during any hours in which care is being given. Such persons shall not present a threat to the safety or welfare of children.
2. The home shall have additional staff when there are persons in the home who require

constant or routine care.

3. Any adult(s) in addition to the caregiver(s) present in the home on a regular basis while children are in care shall provide an annual tuberculin test verifying that the adult is free from TB.

400 PROGRAM AND ACTIVITIES

401 Program

1. There shall be a written daily schedule, available for review by parents and Licensing staff, which includes age-appropriate activities.
2. The caregiver(s) shall not engage in activities or experiences which may be damaging to children's self esteem and positive self-image.
3. There shall be an opportunity for a supervised rest period that shall not be scheduled to exceed two (2) hours.
4. There shall be a total of at least one hour of outdoor play per day in suitable weather. **(Recommended precautions** - When the heat index is forecast to be 90 degrees or above, outdoor play should be scheduled during early morning hours or the length of time spent outdoors should be reduced to avoid heat stress. If outdoor play occurs during the hotter part of the day, children should have shaded areas, an ample supply of water and should be monitored closely for signs of heat stress. During winter months on days when temperatures are extremely cold, the time scheduled for outdoor play should be reduced or suspended, depending on the temperature and other weather conditions.)
5. Indoor activity equipment shall be adequate for the number and ages of children in the home to meet their physical and developmental needs.
6. Children shall have a variety of toys, books, and creative materials. This includes equipment for:
 - a. Large muscle activities (such as climbing and running)
 - b. Manipulative activities (such as things done with the hands)

401.10 Infants and Toddlers: Additional Program Requirements

1. Infants shall be carefully supervised at all times.
2. Stimulation shall be given to an infant in a variety of ways. Caregivers shall offer nurturing, responsive care in addition to the routine care of diapering and feeding.
3. Infants shall be taken outside for a period of time every day, unless prevented by weather or special medical reasons.

4. If a child falls asleep while in a walker, swing, high chair, etc., that child shall be placed in appropriate sleep equipment (see Section 901).
5. Infants and toddlers shall have clean, safe, washable toys. Toys or materials used by younger children shall not be small enough to be swallowed.

401.20 School Age Children: Additional Program Requirements

1. School age children shall be provided with a choice of indoor and outdoor activities.
2. A quiet time and a private place with appropriate equipment shall be provided for one (1) person activities, including resting or homework. (A supervised rest period as required by 401.2 does not apply to school-age children.)
3. Permission from parents shall be on file for school age children to leave the home.
 - a. School age children who leave the home to participate in classes, clubs, or other activities shall have written permission from the parents naming the activity, time of leaving and returning and method of transportation to the activity.
 - b. Permission for regularly scheduled activities such as scouting may be given for the entire school term.

401.30 Evening and Night Care: Additional Program Requirements

Night care is defined as any care provided after midnight.

1. The caregiver shall remain awake at all times children are in care. (Alternative compliance may be requested to allow the caregiver to sleep after the children are in bed for the night. For this request to be approved, consideration will be given to the overall level of licensing compliance, the use of motion detectors and/or other alarms to alert the caregiver if children leave the sleeping area, the ages, numbers and sex of the children in overnight care and written notification to parents that the caregiver will be sleeping during overnight care).
2. There shall be a plan for evacuating children to safety in case of fire or emergency.
3. Children arriving in the daylight hours shall have outdoor play, weather permitting. Older children shall have time for reading or doing homework during the school year.
4. Homes with only one caregiver shall limit care to no more than two (2) shifts (18 hours) per twenty-four (24) hour period. Homes offering twenty-four (24) hour care shall provide a schedule verifying that they have made provisions for a secondary caregiver to provide relief care for one shift. (Alternative compliance may be requested by caregivers who provide twenty-four (24) hour care and who do not have a secondary caregiver. For this request to be approved, consideration will be given to the overall level of compliance with the licensing requirements and to the number and ages of children in care during the third shift.)

5. Evening meals shall be served. The home shall ensure that children spending the night are served breakfast.
6. Drinking water shall be available to children during the night.
7. Bathing facilities shall be available. Hot water shall be available. Children shall not take baths together or share the same bath water. Tubs or showers shall be cleaned after each use. Children shall be given fresh washcloths and towels. Preschool children shall never be left alone when bathing. Privacy shall be ensured for school age children.
8. Children in night care shall be given a bed or cot with mattress or pad and a pillow.
 - a. If linens become soiled, they shall be changed. Protective mattress covers shall be used and washed at least weekly.
 - b. Each child's bed or cot shall have a cover available.
 - c. Beds or cots shall be arranged at least one foot apart.

500 BEHAVIOR GUIDANCE

1. Use of behavior guidance shall show that the caregiver understands each child's needs and shall promote self-discipline and good behavior.
2. Acceptable behavior guidance techniques include:
 - a. Look for appropriate behavior and reinforce the children with praise and encouragement when they are behaving well.
 - b. Remind the children on a daily basis of the rules by using clear positive statements of how they are expected to behave rather than what they are not supposed to do.
 - c. Attempt to ignore minor inappropriate behaviors and concentrate on what the child is doing properly.
 - d. Use brief supervised separation from the group only when the child does not respond to a verbal command which instructs the child as to how he or she is supposed to behave.
 - e. When a misbehaving child begins to behave appropriately, encourage and praise small positive steps rather than waiting until the child has behaved for a long period of time.
 - f. Attend to the children who are behaving appropriately and other children will follow their example in order to obtain your attention.
 - g. When the entire group is behaving well, reward them with an activity they enjoy.
3. Physical punishment shall not be administered to children.
4. The length of time a child is placed in time-out shall not exceed one minute per year of the child's age.

5. The following activities are unacceptable as behavior guidance measures and shall not be used. These include but are not limited to:
 - a. Shaming, humiliating, frightening, physically or mentally harming children
 - b. Labeling children negatively
 - c. Associating punishment with rest, toilet training or illness
 - d. Denying food (lunch or snacks) as punishment or punishing children for not eating
 - e. Restraints (Restraining a child briefly by holding the child is allowed when the child's actions place the child or others at risk of injury.)
 - f. Harsh treatment
 - g. Washing mouth with soap
 - h. Taping or obstructing child's mouth
 - i. Placing unpleasant or painful tasting substances in mouth, on lips, etc.
 - j. Verbal abuse/abusive language
 - k. Isolation without supervision
 - l. Placing child in dark areas
 - m. Inflicting physical pain, hitting, slapping, pinching, pulling hair, kicking, twisting arm, biting or biting back, spitting, swatting, etc.
 - n. Yelling (This does not include a raised voice level to protect a child from the risk of harm).
 - o. Forced physical activity such as running laps, doing push-ups, etc. (This does not include planned physical education activities that are not punitive in nature)
6. Behavior charts, if used, should be used to encourage positive behavior. Behavior charts shall record only the child's behavior for the current day and shall not be punitive. (Behavior charts used to record only positive behavior may be maintained on a weekly basis.) The child's age and level of understanding should be considered when using behavior charts.

500.10 Infant and Toddler

Time out shall not be used with children under the age of two (2). The only acceptable form of behavior guidance with infants and toddlers shall be redirection. (Brief separation from the group is acceptable when the child's behavior places the child, or others, at risk of harm. The child may be placed in a supervised area away from the group or in a crib or playpen while the caregiver attends to the situation. Example: A child who has bitten another child would be removed from the group, briefly, while the caregiver attends to the bitten child.)

600 RECORDS

1. All employee, child and home records shall be kept and made available to the Child Care Licensing Unit on request. All required records shall be maintained for three (3) years. (This includes records on children no longer enrolled.)
2. Licensing compliance forms (DCC-521) shall be maintained at the facility for three (3) years. The facility shall advise parents in writing that the compliance forms are available for review upon request.

601 Children's Records

Enrollment information shall be obtained for each child before admission.

1. Identifying and Personal Data shall include:

- a. Child's name, birth date, home address, and telephone number
- b. Name and addresses of the parents and telephone numbers where the parents can be reached while the child is in care
- c. Date of enrollment in facility
- d. Name, address and phone number of person to be contacted if parents cannot be reached
- e. A written behavior guidance policy provided to parents, with a copy signed by the parents and retained by the caregiver

2. Medical Records shall include:

- a. The name, address and telephone number of the child's physician or emergency medical care facility
- b. Pertinent past medical history on the child and any change in health
- c. Child's unusual food needs such as special formulas, diabetic diet, or food allergies
- d. Notes of special problems (such as allergies to medication or sunburn sensitivity) or needs as indicated by the parents
- e. An authorized record of up-to-date immunizations or documentation of a religious or medical exemption from the Arkansas Department of Health (The caregiver shall maintain a roster of children who have not completed the minimum immunization requirements. A current immunization schedule is provided as an insert in this publication.)
- f. Written record of accidents/injuries

3. Permissions and Agreements will be signed by the parents and caregiver(s):

- a. Consent for emergency medical care and transportation for such care which shall accompany children who are transported to and from the home
- b. Other transportation permission, if any, including routine and special field trips
- c. Permission to participate in water activities, if any
- d. Signed statement by the parent stating who is authorized to pick up the child

602 Caregiver Records

1. Caregiver records shall contain the following:

- a. An employee application for secondary caregivers, including name, date of birth, address and telephone number
- b. TB skin test

- c. Documentation of training for continuing education
- d. Documentation of the initiation of all required background checks and results obtained.

603 Facility Records

- 1. Fire Department approval, if applicable
- 2. Arkansas State Department of Health approval, if applicable
- 3. Record of routine emergency drills, including date, time of day, length of drill and number of children participating
- 4. Pet vaccinations
- 5. Attendance records on all children

FOOD SERVICE AND NUTRITION

701 Food Service

- 1. A home licensed for eleven (11) or more children, if food is prepared for the children in the home, shall provide a current verification of approval by the Arkansas Department of Health, Sanitation Services.
- 2. All licensed homes shall meet the following:
 - a. All food shall be safe and stored properly to prevent spoiling
 - b. Shall have refrigerator with thermometer visible and shall be maintained at forty (40) degrees or below. (Freezer thermometer shall be maintained at zero (0) degrees or below)
 - c. Food shall not be stored under sinks
 - d. Food shall be stored in original container or in a closed container
 - e. Chemicals and toxins shall not be stored in food storage area
 - f. All medicines shall be stored separately from food at all times
- 3. All food and drink shall be prepared, distributed and served under sanitary conditions and the following shall be met:
 - a. Caregivers shall wash hands before preparing food
 - b. There shall be a two-compartment sink with hot and cold running water
 - c. Individual drinking glasses or disposable cups shall be provided
 - d. All surfaces shall be kept sanitary
 - e. Food left uncovered or handled shall not be reused
 - f. When dishes are washed by hand, they shall be sanitized with a bleach solution
 - g. Drinking water and water used for the preparation of formula shall not come from the hot water supply. (Water from hot water systems may contain higher levels of

lead and other substances which could be harmful to small children.)

702 Nutrition

1. Breakfast, if served, lunch and evening meals shall each meet current U.S. Department of Agriculture guidelines, including portion size. (See Appendix A) If sack lunches are utilized, the home shall ensure that these also meet U.S. Department of Agriculture guidelines by supplementing the lunches if necessary. Milk shall be served to each child during the day. Exceptions may be made for children who suffer allergies to milk.
2. Breakfast shall be made available to children who arrive before 7:00 a.m. Breakfast may be served to all children rather than a morning snack provided there is no more than three (3) hours between breakfast and lunch.
3. Midmorning and mid-afternoon snacks shall be provided to all children and shall meet current U.S. Department of Agriculture guidelines (See Appendix A).
4. All children in care during evening hours shall be offered an evening snack. Children in care during evening hours shall be served supper and children spending the night shall be served breakfast unless provided by parent or school.
5. Children shall not be forced to eat.

702.10 Infant and Toddlers

1. The routine use of baby food, bottles and formula shall be agreed upon by the caregiver and parent. Instructions regarding special needs for food, bottles and formula, such as food allergies, shall be obtained in writing from the parent and followed by the caregiver (See Appendix B).
2. Feedings for all children up to twelve (12) months of age shall be documented by the caregiver and available for review by the parent. This documentation shall continue for all children older than twelve (12) months of age who are still being given bottles.
3. Children shall not share the same bottle. A sanitary method of cleaning baby bottles shall be practiced. Baby bottles shall be properly refrigerated.
4. Infant feeding schedules shall be flexible and adapted to each infant's needs.
5. The solid foods fed to an infant shall be determined by the child's parent (s).
6. Infants under six (6) months of age shall be held while being fed. Bottles shall not be propped. Infants six (6) months of age or older shall be held if needed.
7. Infants no longer held for feeding shall either sit in low chairs at low tables or in infant seats with trays, or in high chairs with wide bases. Safety straps shall be used with high chairs.

800 BUILDINGS AND GROUNDS

801 Buildings

1. The home's building, grounds, and equipment shall be clean, kept in good repair, and maintained as needed to protect the health and safety of the children. If the home has sustained structural damage the caregiver shall immediately notify the Child Care Licensing Specialist.
2. There shall be at least thirty-five (35) square feet of usable indoor space for each child in the home. This area shall not include kitchens, bathrooms, hallways or closets.
3. The home shall have a working telephone.
4. Light, heating, cooling, and ventilation of the home shall be adequate for safety and comfort.
5. Windows and/or doors used for ventilation shall be screened.
6. Manufactured homes, licensed as Child Care Family Homes, shall be tied down and under-pinned as required by the Arkansas Manufactured Home Commission. The home shall obtain an inspection and approval from the Arkansas Manufactured Home Commission prior to being licensed.
7. An annual fire approval shall be obtained on all manufactured homes licensed as Child Care Family Homes.

802 Grounds

To provide the safest possible playground environment, you are encouraged to meet Consumer Product Safety Commission's guidelines listed in their "Handbook for Public Playground Safety". However, the following are minimum requirements and shall be met.

Please note that these requirements do not mandate the use of any large and/or permanently anchored pieces of playground equipment that require fall zones. Numerous options for suitable playground environments are available and acceptable. For information on playground options, contact your Licensing Specialist.

803 Layout and Design

1. The play area shall be enclosed and provide at least seventy-five (75) square feet per child present on the playground at any time.
2. There shall be an outside exit from the play area.

3. The area shall be well drained.
4. There shall be equipment and activities appropriate for the ages and number of children using the playground.
5. Children shall be supervised by an adult caregiver when outdoors. (See section 302.5.)

804 General Hazards

1. The area shall be free of hazards or potentially hazardous objects.
2. Equipment which is designed to be anchored shall be properly anchored so that the anchoring devices are below ground level.
3. Sand for playing shall be kept safe and clean.
4. Paint on equipment shall be lead free.
5. All fasteners, including S-hooks, shall be securely tightened or closed.
6. There shall be no sharp points, corners, edges, or splinters.
7. The only trampolines allowed shall be mini-tramps used under direct supervision.
8. To prevent entrapment, there shall be no opening(s) between any interior opposing surfaces between 3.5 and 9 inches. (Openings in equipment that might allow a child's body to pass through, but not their head.) Ground bounded openings are exempt.
9. Balance beams higher than twelve (12) inches shall have fall zones.

805 Slides

Slides shall not have any spaces or gaps between the platforms and the slide surface.

806 Swings

1. The following swings shall not be used for any ages:
 - a. Multi-occupancy swings designed to hold more than one (1) child, except tire swings
 - b. Animal figure swings
 - c. Free swinging ropes (Tarzan ropes)
 - d. Swinging exercise rings
 - e. Trapeze bars
2. There shall be no wood or metal swing seats.

3. Toddler swings shall provide support on all sides if seat is above twelve (12) inches from the ground.

807 Climbing Equipment

1. Free standing arch climbers exceeding four (4) feet in height shall not be used for preschoolers.
2. Flexible grid climbing devices, such as rope or chain ladders, climbing ropes, etc., shall be securely anchored at both ends.
3. Preschoolers shall not use sliding poles.
4. Sliding poles shall have no protruding welds or seams along the sliding surface, and the pole shall not change directions.

808 Merry-Go-Rounds

1. The only merry-go-rounds allowed are portable merry-go-rounds not designed to be anchored and they shall have handgrips or other secure means of holding on.

809 Seesaws

1. Seesaws without spring centering devices shall have shock absorbing materials, such as partial tires embedded in the ground underneath the seats or secured to the underside of the seats.
2. Hand holds shall be provided for both hands at each seating position and shall not turn when grasped.

810 Fall Zone/Surfacing

1. There shall be fall zones and surfacing under and around equipment that is over 24 inches in height at the highest accessible point. (The highest accessible point is defined as the surface on the piece of equipment where children would sit or stand when the equipment is being used as intended.) Swings require fall zones and surfacing regardless of height. (Toddler swings equipped with safety straps are exempt from this requirement, provided their use is closely supervised.)
2. Fall zones shall extend a minimum of 6 feet in all directions (unless otherwise specified) from the perimeter of the equipment. Exceptions may be granted for structures that have protective barriers in place.
 - a. Structures over 2 feet and under 3 ½ feet at the highest accessible point shall have a minimum surfacing material depth of 6 inches.
 - b. Structures 3 ½ feet up to 5 feet at the highest accessible point shall have a minimum surfacing material depth of 9 inches. (Shredded tires or other

shredded or chopped rubber products shall have a minimum depth of 6 inches.)

- c. Structures 5 feet and taller at the highest accessible point shall have a minimum surfacing material depth of 12 inches. (Shredded tires or other shredded or chopped rubber products shall have a minimum depth of 6 inches.)

3. Shock absorbent material such as sand, pea gravel, wood chips, wood mulch, shredded tires, etc. shall be used in fall zone areas under and around playground equipment which requires a fall zone.

(When purchasing gravel, care should be taken to insure that the gravel is actually pea gravel that is smooth and rounded and not crushed rock or sharp gravel. Crushed rock and sharp gravel will not be approved.)

Pea gravel used for fall zones shall not be over ½ inch in diameter.

4. Hard surface materials such as asphalt and concrete, shall not be used as base surfaces in the fall zones except under commercial matting or other systems/products designed to be installed over hard surfaces.
5. **SLIDES:** The fall zone for slides measuring six (6) feet or over, measured from the platform to the ground shall extend ten (10) feet from the exit end of the slide. Fall zones for slides measuring less than six (6) feet from the platform to the ground shall extend six (6) feet from the exit end of the slide.
6. **SWINGS:** The fall zone for single-axis swings (standard swings) (except toddler swings) shall extend to the front and the rear of the swing a minimum distance of two times the height of the pivot point (where the chain attaches to the frame) above the playing surface. The fall zone for toddler swings shall extend to the front and rear of the swing a minimum of two (2) times the distance from the pivot point to the swing seat. (Note exemption listed in #1 above.) Fall zones shall also extend six (6) feet to the sides of the swing set.
7. **SWINGS:** The fall zones for multi-axis swings (such as tire swings or others with three or more suspending chains) shall extend in all directions a minimum of six (6) feet plus the height of the suspending rod or chain.
8. Fall zones shall be free of obstacles onto which children may fall.

900 SLEEPING AND TOILETING ARRANGEMENTS

901 Sleeping Arrangements

1. Each child under twelve (12) months of age shall have a separate well-constructed baby bed or play pen with a waterproof mattress or pad which shall be clean, dry, and in good condition. Sheets and covers are required and shall be kept clean and dry. Bassinets shall not be used.

2. Waterbeds shall not be used for sleeping children under the age of two (2) years.
3. The following guidelines shall also be required for cribs:
 - a. Cribs that have end panels with decorative cutout areas shall not be used
 - b. Mattresses shall fit snugly in the crib. The space between crib and mattress shall measure no more than 1 inch.
 - c. Corner posts shall be the same height as end panels.
 - d. End panels shall extend below mattress at the lowest position of the mattress.
 - e. Baby beds shall have slats no greater than 2 3/8 inches apart .
4. Each child twelve (12) months of age or older shall have a cot, bed, pallet, or mat which shall be placed at least one foot apart. Sheets and covers are required. Bedding shall be of washable material and shall be kept clean. If mats or pallets are used on floors, floors shall be clean, warm, dry and draft free. Any mat or pallet less than two (2) inches thick shall be placed on carpet.
5. Doors in rooms where children are sleeping shall remain open.

Recommendation: Care should be taken to insure that loose bedding material, such as pillows, blankets, etc., are kept away from the faces of sleeping infants. Infants should be placed on their backs to sleep unless there is a medical reason not to do so. These precautions are intended to lessen the risk of suffocation and Sudden Infant Death Syndrome.

902 Toileting Arrangements

1. At least one (1) commode and one (1) sink shall be made available for the children's use. Potty seats may be used by the younger children if emptied, cleaned and disinfected after each use. Potty seats shall be located in the bathroom only.
2. Toilet tissue shall be located within reach of the children when toileting.
3. Individual cloth towels or paper towels shall be available for each child.
4. Caregiver's and children's hands shall be washed with liquid soap before meals, after toileting, after each diaper change, and as needed.
5. The home shall use a diaper-changing surface that is sanitized after each use.
6. Soiled or wet diapers shall be removed, disposed of properly, and replaced with clean, dry diapers. The caregiver shall ensure that children are properly cleaned and dried.

903 Toilet Learning

1. The caregiver shall assist children in toilet routine and hygiene practices.

2. The following methods shall not be used in toilet learning:
 - a. Placing the child on toilet or potty chair for prolonged time periods
 - b. Using harsh language
 - c. Punishing or berating in any way for soiling clothing
 - d. Using physical force to place child on a toilet or potty chair against their will
 - e. Leaving child unsupervised on toilet

1000 HEALTH

1001 General

1. The home shall have an adequate supply of water that meets the Arkansas Health Department standards for drinking water.
2. Water shall always be available to the children.
3. Garbage shall be kept in a closed container out of children's reach.
4. All garbage, soiled diapers and trash shall be removed from the home daily and grounds at least once a week.
5. The home shall be free of insects and rodents.
6. Waste and sewage disposal and toilet facilities shall be safe and sanitary. The Health Department may be consulted for its recommendation.
7. Smoking should be limited to hours when children are not in care. The home shall disclose to parents whether smoking occurs in areas where children are in care.
8. First-aid materials are required and shall be kept out of reach of children. A first aid kit containing medications shall be locked. The first-aid materials shall include:
 - a. Adhesive band-aids (various sizes)
 - b. Scissors
 - c. Sterile gauze squares
 - d. Roll of gauze bandages
 - e. Adhesive tape
 - f. Antiseptic
 - g. Thermometer
 - h. Tweezers
 - i. Disposable gloves
9. There shall be no adult in the home who poses a health risk to children in care.

1002 Children's Health

1. No child shall be admitted who has a contagious or infectious disease. Parents and guardians shall be notified to pick up the child if the child exhibits any of the symptoms listed below:
 - a. Fever: a body temperature of 101 degrees or greater (Recommendation: Infants, six months of age or under, who have a temperature of 100 degrees or greater should be excluded)
 - b. Diarrhea: three (3) or more watery stools in a twenty-four (24)-hour period
 - c. Vomiting: vomiting on two or more occasions within the past twenty-four (24) hour period
 - d. Rash: body rashes, not obviously associated with diapering, heat or allergic reactions to medications
 - e. Sore throat: if associated with fever or swollen glands in the neck
 - f. Severe coughing: episodes of coughing which may lead to repeated gagging, vomiting or difficulty breathing
 - g. Pink eye: pink or red eye(s) which may be swollen with white or yellow discharge, until on antibiotics for twenty-four (24) hours
 - h. Untreated scabies, head lice or the presence of nits: (may return after first treatment and removal of nits)
 - i. Multiple sores inside mouth with drooling: unless health care provider determines the condition is non-infectious
 - j. Ringworm: a fungal infection of the scalp or skin: may return after evaluation and under treatment by a health care provider
 - k. Impetigo: may return twenty-four (24) hours after treatment is initiated
2. Illness in the home shall be handled to protect all children in care.
3. In case of critical illness or injury, and if the parents cannot be reached, the physician named by the parent shall be called. If necessary, the child shall be taken to the nearest emergency room. Injuries that require the attention of medical personnel shall be reported to the parent immediately.
4. In case of critical illness or serious injury that requires the attention of medical personnel the Child Care Licensing Specialist shall be notified within one business day.
5. The caregiver shall notify the child's parents of significant events that affect the children. This shall include, but not be limited to:
 - a. Cases of serious contagious disease
 - b. Any injury incurred by a child
6. The communicable diseases listed in Appendix B, whether suspected in a child or adult, shall be reported within twenty-four (24) hours to either the local County Health Unit or the toll free Reporting System (800-482-8888). Immediate notification is recommended

for the following:

- a. Hepatitis
- b. Rash illness (including MEASLES & RUBELLA)
- c. WHOOPING COUGH (Pertussis)
- d. MENINGITIS
- e. MUMPS
- f. Tuberculosis
- g. Salmonellas (including typhoid)
- h. E-coli

7. Reporting data should include:

- a. The reporter's name, location and phone number
- b. The name of the disease reported and the date of onset
- c. The patient's name, address, phone number, age, sex and race (Please spell the patient's name)
- d. The attending physician's name, location and phone number
- e. Any pertinent clinical and laboratory information used in the diagnosis (Please give the laboratory name)
- f. Any treatment information, if known

8. Within fifteen (15) days of enrollment of a child, the home shall verify that the child has been immunized as required by Arkansas Department of Health or the child cannot remain in care. (Arkansas Code 20-78-206 as amended by Act 870 of 1997. (A current immunization schedule is provided as an insert in this publication).

9. Children shall be protected from overexposure to the sun. Sunscreen shall be used if needed and as directed by the parent. Suntan lotions and/or sunscreens used for infant/toddlers and pre-school children shall be kept out of the children's reach and shall be administered only with written parental permission. (Blanket permission may be obtained annually.)

1003 Medications

1. Prescription medicine shall be in the original container and labeled with the child's name, a recent date, instructions, and the physician's name.
2. All non-prescription medicine (except aspirin substitutes, such as ibuprofen and acetaminophen) shall be labeled with the child's name and dated.
3. All medicines shall be given a child only with the written permission of the child's parent(s) or guardian.
4. Medicines shall be kept in a locked area. Medicine shall be kept out of the reach of the children when dispensing.
5. Medication shall be disposed of when a child withdraws from care or when the

medication is out of date.

1004 Phone Numbers Required:

The following numbers shall be available in the immediate area of the telephone:

1. Ambulance service or emergency medical services
2. Police or sheriff's department
3. Fire department
4. Poison Control Center - 1-800-376-4766
5. Child Abuse Hotline Number - 1-800-482-5964
6. The physicians named by the parents
7. The Child Care Licensing Unit Central Office number: (501) 682-8590
or toll free 1-800-445-3316
8. Home and business numbers of the parents

1005 Pets

Pets with which children have contact shall receive vaccinations as required by law. Verification of vaccinations administered by a licensed veterinarian shall be maintained. Any pet that constitutes a threat to the welfare and safety of the children shall be kept in a confined area which prevents any contact with the children.

1100 FIRE AND SAFETY

1101 Safety

1. Licensed homes shall maintain a log of all child products recall and safety notices issued by the Attorney General's Office and shall post or otherwise make these notices available for parents to review. The licensee shall certify, on an annual basis, that these notices have been maintained and reviewed and that any identified items have been removed from the facility. Forms for self-certification will be provided by the Licensing Specialist and shall be submitted annually. (Act 1313 of 2001)
2. Electrical outlets shall be guarded. Protective caps, if used, shall be large enough to prevent swallowing.
3. Indoor or outdoor cooling or heating units shall have guards or barriers when necessary. All outdoor electrical boxes, gas lines, and exposed electrical cords shall be enclosed.

4. Stairways shall be well lighted and guarded as needed.
5. Dangerous equipment and/or objects shall be stored away from areas used by the children.
6. All detergents and cleaning supplies shall be kept out of the reach of children. (This does not include hand soap in children's or staff bathrooms.) Supplies used for children's activities shall be carefully supervised.
7. All poisonous substances shall be kept in a locked area.
8. Guns shall be unloaded. Guns, other weapons, and ammunition shall be stored in a locked area in the home.
9. Tanks, ponds, swimming pools, open wells, drainage ditches and sewage drainpipes shall be fenced if located within the play area.
10. Home swimming pools shall not be used by children in care unless permission is obtained from Child Care Licensing through an alternative compliance request. This request must include written approval from the Arkansas Department of Health for the use of the pool by children in care. (Home swimming pools used by children in care are considered semi-private pools by the Department of Health and approval for these pools requires inspection during the construction phase. Obtaining approval for existing pools is usually not possible.)
11. Wading pools shall not be used by children under two (2) years of age.
12. Alcoholic beverages shall be kept out of reach of children.

1102 Fire

Please note that National Fire Safety Code 101 does not allow the use of basements or floors above ground level by children, first grade and younger, unless there is a ground level exit. Waivers or exceptions to this code must be obtained in writing from the State Fire Marshal's Office prior to using these spaces.

1. A home caring for eleven (11) or more children at any time (this does include school age children not counted in the ratio) shall provide verification of an approved annual Fire Department inspection.
2. The caregiver shall have a written policy and procedure for fire and tornado drills. All caregivers shall know all emergency plans. Any specific information on area hazards and approved safety procedures, (e.g., Earthquake drills, Nuclear Plant accident evacuation, Toxic Chemical Spill evacuation, etc.) should be obtained from the State Office of Emergency Services.
3. One (1) fire drill **AND** one (1) tornado drill shall be conducted on a monthly basis and

- documented, noting the date, time of day, number of children, and length of time taken to reach safety.
4. A fire extinguisher with a minimum of five (5) lb. ABC rating shall be installed in the kitchen area of the home and shall be properly maintained. Caregivers shall know how to operate the extinguisher.
 5. A working smoke detector shall be installed near the kitchen area and in children's sleeping areas.
 6. The home shall be maintained to be free from fire hazards at all times. The Child Care Licensing Specialist shall consult with the local Fire Department or the State Fire Marshal when it appears hazards exist.
 7. The structure and use of the home shall permit easy entry and exit and shall comply with the following:
 - a. A home with more than one (1) level shall have second exits on all levels used by children
 - b. A home shall have at least two (2) exits to the outside located on different sides of the home
 - c. Doors opening to the outdoors shall be constructed so the children can open them easily from the inside
 - d. Doors between rooms in the exit route shall not be locked while children are in the home
 - e. Doors and pathways shall be clear of equipment that blocks the movement of children and caregiver(s)
 8. Wood-burning stoves, gas logs, fireplaces, open flame space heaters, hot water heaters, floor furnaces or other sources of heat shall be guarded and/or vented when necessary for the protection of the children.
 9. Cooking stoves or ovens shall not be used as a heating source in the home.
 10. Portable heaters shall not be placed within reach of children and shall be approved UL listed products.
 11. The licensee shall notify the Child Care Licensing Specialist of any fires causing damage to the home. This notification shall be made no later than the end of the following working day.

1102 Transportation

The requirements in this section apply to all transportation provided by the licensee, including transportation provided by any person on behalf of the licensee, regardless of whether the person is employed by the licensee. The requirements in this section are not limited to routinely scheduled transportation. Periodic transportation, such as a parent requesting that their child be picked up at school due to the parent's work schedule or other conflicts, is also covered by these requirements, whether a fee is charged for this service or not.

1. Any person transporting children shall be at least eighteen (18) years of age and have a valid driver's license as required by state law.
2. The vehicle shall be licensed, insured and maintained in proper working condition.
3. The driver may be counted in the staff/child ratio, but shall not be the only adult present when more than ten (10) children age three (3) and above are transported.
4. Any child transported in a passenger automobile, van or pick-up truck, who is less than six (6) years old and weighs less than sixty (60) pounds, shall be restrained in a child passenger safety seat. Any child who is at least six (6) years old, or weighs at least sixty (60) pounds, must be restrained by a safety belt or any other approved safety devices. { Act 470 of 2001 }.
5. The loading and unloading of children from vehicles shall be conducted in a safe manner.
6. There shall be a seating space and an individual, appropriate restraint system provided for each child being transported.
7. Rosters listing the date, names and ages of all children being transported as well as the name of the driver and any other staff member on the vehicle shall be maintained. These rosters shall be used to check children on and off the vehicle when they are picked up and dropped off at home, school, etc. and when they arrive at and leave the licensed home. Transportation rosters shall be kept by the facility and available for review for one (1) year.
8. To insure that no children are left on the vehicle, the driver or a staff member must walk through the vehicle and physically check each seat before leaving the vehicle. The transportation roster must be signed by the driver, or staff who conducts the walk through inspection, documenting that all children have exited the vehicle.
9. To insure that children have safely arrived in the appropriate classroom, the transportation roster shall be reviewed by the Director or designee and compared with classroom attendance records. The Director or designee shall sign off on the transportation roster to verify that all children have safely transitioned from the vehicle to the classroom.
10. Any vehicles designed or used to transport more than seven (7) passengers and

one (1) driver must have approved child safety alarm devices installed. These devices must be properly maintained in working order at all times.

Vehicles in service at licensed facilities prior to July 1, 2005, shall have the alarm installed by a qualified technician or mechanic no later than December 31, 2005. On or after July 1, 2005, all vehicles at newly licensed facilities and newly acquired vehicles at existing facilities shall have a child safety alarm installed before placing the vehicle in service.

The Child Care Licensing Unit shall maintain a list of approved alarm systems.

Clarification –

- The alarm system shall be installed so that the driver must walk to the very back of the vehicle to reach the switch that deactivates the alarm. Alarm switches installed in locations that do not require the driver to walk to the back of the vehicle and view all seating areas will not be acceptable.
- The alarm systems may be installed by any certified technician or mechanic employed by a recognized electronics or automotive business in accordance with the device manufacturer's recommendations.
- The time delay from activation of the alarm until the alarm sounds shall be no longer than one minute. **Any of the following three options are acceptable to meet the intent of Act 1979 when children are being delivered at the facility. Other options must be approved by the Licensing Unit.**

Options

1. Unload all of the children, walk through the vehicle to ensure that no children remain on board and deactivate the alarm. (This option will only work if you are able to unload all children in less than one minute.)
2. Upon arrival, have one staff member immediately walk through the vehicle to deactivate the alarm system. That staff member will remain near the alarm switch at the back of the vehicle until all children have been unloaded to ensure that no child is left on board. (This option will require at least two staff members, one to supervise the children and one to remain inside the vehicle.)
3. Upon arrival, deactivate the alarm and unload the children. Immediately after unloading, start the vehicle and move it to a different location for final parking. (This will reactivate the alarm and require a final walk through.)

1103.10 Infants and Toddlers

1. A vehicle transporting children under the age of thirty-six (36) months shall maintain a ratio of one (1) adult to three (3) children.

APPENDIX A
U.S. DEPARTMENT OF AGRICULTURE
CHILD CARE MEAL PATTERN

Children age 12 and up may be served adult-size portions based on the greater food needs of older children, but shall be served not less than the minimum quantities specified in this section for children age 6 through 12 years. For purposes of the requirements outlined in this paragraph, a cup means a standard measuring cup.

Bread, pasta or noodle products, and cereal grains shall be whole grain or enriched; cornbread, biscuits, rolls, muffins, etc. shall be made with whole grain or enriched meal or flour; cereal shall be whole grain or enriched or fortified.

Breakfast	Children 1 and 2 years	Children 3 through 5 years	Children 6 through 12 years
Milk, fluid Juice or fruit or vegetable Bread, bread alternate**** and/or cereal enriched or whole grain Bread or Cereal: Cold dry or Hot cooked	½ cup (4 ounces) 1/4 cup ½ slice (1/2 ounce) ¼ cup* ¼ CLIP	¾ cup (6 ounces) ½ cup ½ slice (1/2 ounce) 1/3 cup** ¼ cup	1 cup (8 ounces) ½ cup 1 slice (1 ounce) ¾ cup*** ½ cup
AM or PM snack (supplement)			
(select 2 of these 4 components) Milk, fluid Meat or meat alternate Juice or fruit or vegetable Bread, bread alternate**** and/or cereal enriched or whole (grain) Bread or Cereal: Cold dry or hot cooked	½ cup (4 ounces) ½ ounce ½ cup ½ slice (1/2 ounce) ¼ cup* ¼ cup	½ Cup (4 ounces) ½ ounce 1/3 cup ½ slice (1/2 ounce) 1/3 cup** ¼ cup	1 cup (8 ounces) 1 ounce ¾ cup 1 slice (1 ounce) ¾ cup*** ½ cup
Lunch or Supper			
Milk, fluid Meat or meat alternate (lean meat or poultry or fish) Cheese Egg Cooked dry beans or peas Peanut butter Yogurt (plain or flavored) (Or an equivalent quantity of any combination of the above meat/meat alternates) Vegetable and/or fruit (total of two or more) Bread or bread alternate**** enriched or whole grain	½ CLIP (4 ounces) 1 ounce 1 ounce 1 large egg ¼ cup 2 tbsps. ½ Cup ¼ cup 1/2 slice (1/2 ounce)	¾ cup (6 ounces) 1 " ounces 1 1/2 ounces 1 large egg 3/8 cup 3 tbsps. ½ cup ½ Slice (1/2 ounce)	1 cup (8 ounces) 2 ounces 2 ounces 1 large egg ½ cup 4 tbsps. 1 cup ¾ cup 1 slice (1 ounce)

* ¼ cup (volume) or 1/3 ounce (weight)

** 1/3 cup (volume) Or ½ ounce (weight)

*** ¾ Cup (volume) or 1 ounce (weight)

****Refer to Food Buying Guide "Grains and Breads" for equivalent quantities

(CASA-1)

APPENDIX B
U. S. DEPARTMENT OF AGRICULTURE
INFANT CARE MEAL PATTERN

Meals served to infants ages birth through, 11 months must meet the requirements described in this meal pattern. Foods included in the infant meal must be of a texture and a consistency that are appropriate for the age of the infant being served. Either breast milk or iron-fortified infant formula must be served for the entire first year.

Age	Breakfast	Lunch or Supper	Snack
Birth through 3 months	4-6 fluid ounces breast milk* or formula**	4-6 fluid ounces breast milk* or formula**	4-6 fluid ounces breast milk* or formula**
4 months through 7 months	4-8 fluid ounces breast milk* or formula** 0-3 tablespoons infant Cereal***	4-8 fluid ounces breast milk* or formula** and 0-3 tablespoons infant cereal*** and 0-3 tablespoons fruit Or vegetable or both	4-6 fluid ounces breast milk* or formula**
8 months up to first birthday	6-8 fluid ounces breast milk* or formula** and 2-4 tablespoons infant cereal and 1-4 tablespoons fruit and/or vegetable or both	6-8 fluid ounces breast milk* or formula** and 2-4 tablespoons infant cereal*** and/or 1-4 tablespoons meat, fish poultry, egg yolk, or cooked dry beans or peas, or ½ -2 ounces cheese, or 1-4 tablespoons cottage cheese. cheese food. or cheese spread and 1-4 tablespoons fruit or vegetable or both	2-4 fluid ounces breast milk or formula** or fruit juice**** and 0- 1/2 slice bread or 0-2 crackers*****

* It is recommended that breast milk be served in place of formula from birth through 11 months. For some breastfed infants who regularly consume less than the minimum amount of breast milk per feeding, a serving of less than the minimum amount of breast milk may be offered, with additional breast milk offered if the infant is still hungry

** Iron-fortified infant formula

*** Iron-fortified dry infant cereal

**** Full-strength fruit juice

*****Made from whole-grain or enriched meal or flour

(CASA-1)

APPENDIX C: LIST OF REPORTABLE DISEASES

The following are the more common reportable diseases, which occur with moderate frequency in Arkansas:

gonorrhea	salmonellosis (including typhoid)
hepatitis (A, B, Non-A, Non-B unspecified and results of serologies)	shigellosis
rash illnesses (including *MEASLES, & RUBELLA)	syphilis
*WHOOPING COUGH (pertussis)	MUMPS
	tuberculosis
	MENINGITIS

The following are less common reportable diseases that occur with low frequency in Arkansas:

*AIDS (Acquired Immune Deficiency Syndrome)	*Leprosy
Amebiasis	*Leptospirosis
ANTHRAX	*Lyme Disease
*Aseptic Meningitis	Lymphogranuloma Venereum
Blastomycosis	*Malaria
BOTULISM	*Meningitis, <u>Hemophilus</u> Influenza Type B
*Brucellosis	
Campylobacter Enteritis	*Meningococcal infection
Chancroid	Mumps
CHOLERA	Pesticide Poisoning
Coccidioidomycosis	PLAGUE
*Congenital Rubella Syndrome	*POLIOMYELITIS
DIPHTHERIA	*Psittacosis (Ornithosis)
Encephalitis (all types)	Q Fever
FOOD POISONINGS (all types)	RABIES
Giardiasis	*Relapsing Fever
Gonococcal Ophthalmia	*Reyes Syndrome
Granuloma Inguinale	Rheumatic Fever
*Guillain-Barre Syndrome	*Rocky Mountain Spotted Fever
Histoplasmosis	SMALL POX
HIV (Human Immune Deficiency Virus by name & address)	*Tetanus
**Influenza	*Toxic Shock Syndrome
*Kawasaki Disease	Toxoplasmosis
*Legionellosis	*Trichinosis
	*Tularemia
	TYPHUS FEVER/YELLOW FEVER

*The reporting physician will be contacted for additional information.

**Individual cases to be reported only when laboratory testing has determined the viral type.

The diseases in capital letters are to be brought to the immediate attention of the State

Epidemiologist when suspected.

Reporting data shall include:

- a) Names & location of reporting person
- b) Disease or suspected disease and date of onset
- c) Name, age, sex, address and phone number of patient (please spell patient's name)
- d) Name of patient's physician

The following diseases are also of public health importance and should be reported whenever there is an unusual incidence or outbreak (including seasonal). It is necessary to report: (1) physician's name and location (2) the suspected disease (3) the number of cases and interval during which the cases were seen:

Acute respiratory disease	Hospital acquired infections
Chicken pox	Infectious Mononucleosis
Conjunctivitis	Influenza (estimate number)
Dermatophytosis (ringworm)	Pediculosis
Enteropathogenic E. Coli Diarrhea	Pleurodynia
Epidemic Diarrhea of unknown cause	Pneumonia (bacterial, Mycoplasma, viral)
Gastroenteritis	Staphylococcal-Infections
Herpangina	Streptococcal Infections

The following occupational disease also shall be reported:

Asbestosis	Mesothelioma
Silicosis	Coal Workers Pneumoconiosis
Byssinosis	

FOR FURTHER ASSISTANCE CONTACT THE LOCAL COUNTY HEALTH UNIT.

CHILD CARE IMMUNIZATION REQUIREMENTS
 Recommended by Arkansas Department of Health and Required by the
 Department of Human Services, Division of Child Care and Earl Childhood Education, Licensing Division

Age	DtaP DTP/DT	Polio	H b	Hepatitis B	MMR ****	Varicella
0-2 months	None	None	None	None 1-2 <u>poss ble</u>)	None	None
3-4 months	1 dose	1 dose	1 dose	1 dose 2 doses <u>poss ble</u>)	None	None
5-6 months	2 doses OR 1 dose within last 2 months	2 doses OR 1 dose within last 2 months	2 doses OR 1 dose within last 2 months	2 doses OR 1 dose within last 2 months	None	None
7-12 months	3 doses OR 1 dose within last 2 months	2-3 doses OR 1 dose within last 2 months	2-3 doses OR 1 dose within last 2 months	2 doses OR 1 dose within last 2 months	None	None
13-15 months	3 doses OR 1 dose within last 2 months	2-3 doses OR 1 dose within last 2 months	2-3 doses OR 1 dose within last 2 months	2 doses OR 1 dose within last 2 months	None (1 dose poss ble)	None (1 dose poss ble OR History of disease)
16-18 months	3 doses OR 1 dose within last 2 months	2-3 doses OR 1 dose within last 2 months	3-4 doses with last dose on/after 1 st birthday	2 doses OR 1 dose within last 2 months	1 dose	None (1 dose poss ble OR History of disease)
19-48 months	4 doses OR 3 rd dose within last 6 months OR 1 dose within last 2 months	3 doses OR 1 dose within last 2 months	3-4 doses with last dose on/after 1 st Birthday or 1 Dose on/after 15 months	3 doses***** OR 2 doses with 3 rd dose due 5 months after 2 nd dose OR 1 dose within last 2 months (Child must be at least 24 weeks of age for 3rd dose)	1 dose	1 dose OR History of disease
49-72 months	5 doses* OR 4 th dose within last 6 months* OR 1 dose within last 2 months OR 3 doses with last dose on/after 4 th birthday	4 doses*** OR 1 dose within last 2 months OR 3 doses with last dose on/after 4 th birthday	3-4 doses with last dose on/after 1 st birthday OR 1 dose on/after 15 months of age (not required on/after 5 th birthday)			

FOOTNOTES:

- * 5th DtaP/DTP/DT (Pre-school dose) must be given on/after the 4th birthday and may be given at anytime from 49 to 72 months of age
- ** Interval between 4th DtaP/DTP/DT and 5th DtaP/DTP/DT should be at least 6 months
- *** If 3rd polio primary dose administered on/after the child's 4th birthday, no pre-school dose needed The 4th polio may be given anytime from 49 to 72 months of age
- **** 3rd dose of Hepatitis B should be given at least 4 months after 1st dose and child must be at least 6 months of age (All 2nd doses of Hepatitis B vaccine given earlier than 6 months of age before 6/21/96 are valid doses)
- ***** MMR must be given on/after the child's 1st birthday
- ***** All children are required to have received a dose of varicella (chickenpox) vaccine on or after their 1st birthday or a history of disease obtained from the parent/guardian or a physician documented in the child's file

