

REGISTRATION REQUIREMENTS FOR

Registered Child Care Family Homes



ARKANSAS DEPARTMENT OF HUMAN SERVICES
DIVISION OF CHILD CARE AND EARLY CHILDHOOD EDUCATION
CHILD CARE LICENSING UNIT
P. O. BOX 1437, SLOT S150
LITTLE ROCK, ARKANSAS 72203-1437
(501) 682-8590



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Registration Requirements for Registered Child Care Family Homes

100 DEPARTMENT RESPONSIBILITY

101 Responsibilities and Requirements

1. The Division of Child Care and Early Childhood Education (referred to hereafter as the Division) under the Department of Human Services is directly responsible for the inspection and evaluation of all Registered Homes.
2. The Division has the power to establish rules, regulations, and standards for licensing/registration and operation of child care facilities. This includes all powers with respect to granting, revocation, denial, and suspension of licenses and registrations. Information regarding the appeal process is available upon request.
3. The Division works in coordination with local and state Health Departments, Fire Departments, City Planning or Zoning departments and the Boiler Division of the Department of Labor.
4. 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 registered homes with any city or county that requests this information.
5. The Child Care Licensing Unit will notify the applicable federal agency at any time they become aware of or are advised of violations of any of the following or similar laws. The owner should be aware of applicable federal laws which may affect the operation of the facility, such as, but not limited to:
 - a. Americans with Disabilities Act (ADA).
 - b. Environmental Protection Agency (EPA) regulations to ensure that any renovation or repair work on a home, child care facility, or school that was constructed prior to 1978 shall be completed by a contractor that is certified by the Environmental Protection Agency (EPA), when the repairs and/or renovations consist of any or all of the following: the repair or renovation disturbs six (6) or more square feet of the interior, the repair or renovation disturbs twenty-five (25) or more square feet of the exterior, and/or the repair or renovation involves removing a window.
 - c. Federal civil rights laws state that a facility may not discriminate on the basis of race, color, sex, religion, national origin, physical or mental handicap, or veteran status.
6. The Registrant shall maintain Child Care Liability insurance and comply with the following requirements:
 - a. Prior to approval of an application, the applicant shall provide verification of the required

coverage to the Licensing Specialist and provide subsequent verification when requested. (Homes licensed prior to the effective date of this revision shall have ninety (90) days to comply with this requirement.)

b. Maintain the minimum amount of coverage as follows:

Registered Capacity of Home	Minimum Child Care Liability Coverage Required
1 – 5	\$ 100,000 per occurrence

102 General Requirements

1. To determine a recommendation for registration, the applicant’s home shall be reviewed by a Child Care Licensing Specialist to determine that the home is in substantial compliance with the requirements. (**Clarification:** In addition to Child Care Licensing staff having access to all areas of care, they must also be given access to the home’s storage, and any other rooms or spaces not used for care, to ensure there are no possible hazards.)
2. Substantial Compliance means compliance with all essential standards necessary to protect the health, safety and welfare of the children attending the registered home. Essential standards include but are not limited to those relating to issues involving fire, health, safety, nutrition, and behavior management.

103 Definition and Application

There are three (3) types of registered homes as follows:

1. Registered Child Care Family Home: a situation in which five (5) or less children are cared for in the caregiver’s own residence or in some other suitable family type residence.
2. Relative Child Care Family Home: a situation in which five (5) or less children are cared for by a relative of the child(ren). The relationship must be that of a grandparent, great-grandparent, aunt, uncle, sibling (residing out of the home). The registered relative may provide the child care either in his/her home or the home of the child(ren). Proof of relationship must be provided. The following must be provided to verify proof of relationship:
 - a. the child(ren)’s birth certificate(s)
 - b. the parent’s birth certificate
 - c. marriage license of the parent (if parent’s last name has changed)
 - d. marriage license of the caregiver (if last name has changed)
 - e. birth certificate of the caregiver (if the application is for an aunt or uncle)
3. In-Home Child Care Provider: an individual selected by the family to provide the day care to five (5) or less children in the child(ren)’s own home. The In-Home Registration is not valid for child care provided outside the child(ren)’s own home.

4. There shall be no more than one registration issued per home/structure. (This does not apply to situations such as duplexes where two registrations could be issued to two separate applicants.) An individual shall be eligible to hold only one registration, which shall be issued for one specified location.
5. Home with only one caregiver shall limit care to no more than two shifts (18 hours) per 24 hour period. Homes offering 24 hour care shall provide a schedule verifying that they have made provisions for secondary caregiver to provide relief for one shift. (Alternative compliance may be requested by caregivers who provide 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 registration requirements and to the number and ages of children in care during the third shift.
6. The holder(s) of the registration shall be the primary caregiver(s) and at least one shall be present and responsible for children during hours of care and shall not be otherwise employed during the hours of care. (If a qualified secondary caregiver is present, the primary caregiver may be absent for reasons related to the operation of the child care business, such as attending required training, and for brief and/or occasional absences relating to personal business or personal time off.)
7. If at any time care is provided to six or more children from more than one family, the law requires the provider to be licensed. The caregiver's own preschool children shall be considered when determining the need for a license or registration. The caregiver's own school age children are not considered when determining the need for a license or registration. Other children in the home who are not accompanied by a parent are considered as being in care whether pay is received for the care or not.
8. Any home that has not provided care to children for a period of one year shall have the registration closed unless a written request is made by the registrant stating why closure should not take place.
9. The primary caregiver in a Registered Home shall submit the following to complete the application process:
 - a. A completed and signed application provided by the Division
 - b. Diagram of the home indicating rooms to be used by children in care and the location of exit doors.
 - c. A Health Card on applicant, other caregivers and any adult(s) in addition to the caregiver(s) present in the home on a regular basis while children are in care.
 - d. Zoning approval, if applicable, shall be provided by new applicants for license and by existing homes requesting increase in licensing capacity
 - e. A signed Authorization for Release of Confidential Information/Child Maltreatment Central Registry Check Form. Everyone living in the home age 18 and older must complete and sign this form. A check or money order for \$10.00 made out to Department of Human Services must be attached to each form. Children under age 18 only need to be listed where applicable. This form must be notarized.

- f. Criminal Record Check Form(s). Everyone in the home age 18 and older must complete a form. A check or money order for \$19.25 payable to the Arkansas State Police or ASP must be attached to each form. The form(s) must be notarized.
- g. The registrant's Social Security Number or TIN (Tax Identification Number) shall be listed on the application. (A TIN number can be obtained by calling 1-900-546-3920 or by sending a SS-4 to the Internal Revenue Service, Memphis, Tennessee 37501. It takes approximately 4 weeks to receive the TIN.)
- h. Boiler inspection, or verification that inspection has been scheduled
- i. Verification of Child Care Liability insurance (if Child Care Liability Insurance cannot be obtained before application, it must be obtained with proof provided to the Child Care Licensing Unit before care of children can be provided)

104 Registration Procedure

1. Any applicant applying for Registration may contact the local Division Office or Child Care Licensing Specialist to obtain information and/or the necessary application and related forms.
2. A pre-application consultation meeting shall be required for all applicants for registration prior to approval of the application. This meeting shall be offered prior to or within thirty (30) days of receipt of the application.
3. 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 registration of the Division.
4. The Child Care Licensing Specialist shall make unscheduled visits throughout the year to determine continued compliance of standards and to offer consultation and technical assistance.
5. The registration, as issued, shall apply only to the home's location at the time of registration. The registrant shall notify the Child Care Licensing Specialist's office of any change of location or ownership at which time a new study shall be conducted. Upon issuance of a registration, the registration shall remain in effect as long as compliance is maintained.
6. New Provisional Registration-If the Licensing Specialist finds that an applicant for a registered home meets the registration requirements or has a reasonable expectation of correcting deficiencies within specified time frames, the Child Care Licensing Specialist may recommend a new provisional registration to the Division. The new provisional registration shall be in effect for a period of time, not to exceed twelve (12) months. This time frame shall be specified in the provisional registration. (The Licensing Specialist has sixty (60) days to submit a recommendation to the Division for a provisional registration.)
7. Regular Registration- The Child Care Licensing Specialist will recommend a regular registration when the home has demonstrated substantial compliance, or when an existing registrant with a regular registration relocates their home and their past demonstrates a substantial level of compliance.

8. Probationary Provisional Registration- The Licensing Unit may issue a Probationary Provisional registration when the Home is not maintaining substantial compliance due to deficiencies which are so numerous, frequent or severe as to potentially jeopardize the health, safety, and welfare of children. The home and the Licensing Unit shall have a corrective action plan in place addressing the issues.

Based on the level of compliance during the period of the Probationary Provisional Registration the Licensing Unit may:

- a. Issue a Regular registration
 - b. Suspend a registration
 - c. Revoke a registration
9. Suspension or Revocation of Registration-At the time of a final determination by the Division of revocation or suspension of a registration, the Division shall specify in the letter the period and terms of the action. A revocation of a registration shall be set for no less than one (1) year but may be for a longer term as established by the Division. Related parties shall not be eligible to apply for registration for the same specified period. (Related parties are defined as immediate family members, members of Board of Directors, person 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 registrant. 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.) The revocation of a registration places that registration in a null and void status. At the completion of the terms of revocation, homes wishing to be re-registered must submit a new application for registration for review and approval by the Division.

105 Appeal of Registration Actions

1. A registrant or applicant for registration may request to appeal any of the following registration actions:
 - a. Adverse registration actions (revocation of the registration or denial of an application for registration.
 - b. Founded registered complaints
 - c. Cited noncompliance with the published standards
2. 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 registration actions must be mailed within ten (10) calendar days of the receipt of the notice of the adverse action. Requests to appeal registration 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 registrant or applicant for registration 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 registrant or applicant for registration, 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.)

106 Alternative Compliance

1. The Division may grant alternative compliance with the Minimum Standards Required for Registered Child Care 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 requirements for which the registrant is making the request.
2. The Division shall consider all requests for alternative compliance with the Registration requirements except those requirements which are enforced by the Department of Health, Local Fire Marshall or State Fire Marshall's Office.
3. To request alternative compliance, the following procedures shall be initiated by the person responsible for the operation of the facility:
 - a. The applicant/registrant 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 compliance is equal to, or exceeds, the 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.
 - The applicant/registrant shall provide clear and supportive evidence, and upon request of the Division, an expert's opinion of the effects of 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 registration, 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 alternative 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 that provided by the applicant/registrant.

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 requirement.
8. All requests for alternative compliance shall be answered in writing by the Division.

107 Registration Investigations and Inspections

1. Child Care Licensing staff shall have access to Registered 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 registration.** (Clarification: In addition to Child Care Licensing staff having access to all areas of care, they must also be given access to any other rooms or spaces not used for care, to ensure there are no possible hazards.)

108 Child Maltreatment 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 Department of Human Services, must be attached to each notarized form.)
 - a. Each applicant At application and every two years thereafter
 - b. All household members who are at least 18 years of age At application, upon residency, and every two years thereafter
 - c. Staff members and applicants for employment in a registered 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
 - e. Therapist or other persons who have routine contact with children Within 10 days of the time they begin to provide services or begin to participate in home activities 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 deny the applicant or revoke the registration.
3. All caregiver(s) are mandated reporters under the Child Maltreatment Act. The caregiver

shall notify the Child Maltreatment Hot Line number at 1-800-482-5964 when there is reason to believe that a child has been abused or neglected. (AR Code Annotated 12-12-501 et seq.) These reports of child maltreatment shall include all allegations made to the registrant by parents, staff members or the general public. The registrant should call the Child Care Licensing Specialist 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 registrant 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 Registered 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 registration.

109 Criminal Record Checks

1. The following person shall be required to have their background reviewed through Criminal Records check conducted by the Arkansas State Police: (A check or money order for \$22.00, payable to The Child Care Provider Fund, must be attached to each notarized form.)
 - a. Each applicant 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. Staff and applicants for employment in a registered home Within 10 days of hire and every 5 years thereafter
 - d. Volunteers who have routine contact with children Within 10 days of hire and every 5 years thereafter
 - e. Therapist or other persons who have supervisory control, disciplinary control over children or have routine contact with children Within 10 days of the time they begin to provide services or begin to participate in home activities and every 5 years thereafter
2. Criminal records will be returned to the division for review. Any charge/convictions listed in this section (Section 110) that are returned will be considered regardless of whether the record is expunged, pardoned or otherwise sealed.

3. No person shall be eligible to be a child care facility owner, operator, or employee if that person has pled guilty, or been found guilty, of any of the following offenses by any court in the State of Arkansas, any similar offense by a court in another state or any similar offense by a federal court. The following offenses are permanently prohibited:

01. Abuse of an endangered or impaired person, if felony	§5-28-103
02. Arson	§5-38-301
03. Capital Murder	§5-10-101
04. Endangering the Welfare of an Incompetent person- 1 st degree	§5-27-201
05. Kidnapping	§5-11-102
06. Murder in the First degree	§5-10-102
07. Murder in the Second degree	§5-10-103
08. Rape	§5-14-103
09. Sexual Assault in the First degree	§5-14-124
10. Sexual Assault in the Second degree	§5-14-125

4. No person shall be eligible to be a child care facility owner, operator, or employee if that person has pled guilty, or been found guilty, of any of the following offenses by any court in the State of Arkansas, any similar offense by a court in another state or any similar offense by a federal court. The following offenses are prohibited:

01. Criminal Attempt to commit any offenses in MLR Section 100.110	§5-3-201
02. Criminal Complicity to commit any offenses in MLR Section 100.110	§5-3-202
03. Criminal Conspiracy to commit any offenses in MLR Section 100.110	§5-3-401
04. Criminal Solicitation to commit any offenses in MLR Section 100.110	§5-3-301
05. Assault in the First, Second, or Third degree	§5-13-205 - §5-13-207
06. Assault, Aggravated	§5-13-204
07. Assault, Aggravated on a Family or Household Member	§5-26-306
08. Battery in the First, Second, or Third Degree	§5-13-201 - §5-13-203
09. Breaking or Entering	§5-39-202
10. Burglary	§5-39-201
11. Coercion	§5-13-208
12. Computer Crimes Against Minors	§5-27-601 et. seq.
13. Contributing to the Delinquency of a Juvenile	§5-27-220
14. Contributing to the Delinquency of a Minor	§5-27-209
15. Criminal Impersonation	§5-3-208
16. Criminal Use of a Prohibited Weapon	§5-73-104
17. Death Threats Concerning a School Employee or Students	§5-17-101
18. Domestic Battery in the First, Second, or Third Degree	§5-26-303 - §5-26-305
19. Employing or Consenting to the Use of a Child in a Sexual Performance	§5-27-402
20. Endangering the Welfare of a Minor in the First or Second Degree	§5-27-205 and §5-27-206
21. Endangering the Welfare of an Incompetent Person in the First or Second Degree	§5-27-201 and §5-27-202
22. Engaging Children in Sexually Explicit Conduct for Use in Visual or Print Media	§5-27-303

23. False Imprisonment in the First or Second Degree	§5-11-103 and §5-11-104
24. Felony Abuse of an Endangered or Impaired Person	§5-28-103
25. Felony Interference with a Law Enforcement Officer	§5-54-104
26. Felony Violation of the Uniform Controlled Substance Act	§5-64-101 - §5-64-508 et. seq.
27. Financial Identity Fraud	§5-37-227
28. Forgery	§5-37-201
29. Incest	§5-26-202
30. Interference with Court Ordered Custody	§5-26-502
31. Interference with Visitation	§5-26-501
32. Introduction of Controlled Substance into Body of Another Person	§5-13-210
33. Manslaughter	§5-10-104
34. Negligent Homicide	§5-10-105
35. Obscene Performance at a Live Public Show	§5-68-305
36. Offense of Cruelty to Animals	§5-62-103
37. Offense of Aggravated Cruelty to Dog, Cat, or Horse	§5-62-104
38. Pandering or Possessing Visual or Print Medium Depicting Sexually Explicit Conduct Involving a Child	§5-27-304
39. Patronizing a Prostitute	§5-70-103
40. Permanent Detention or Restraint	§5-11-106
41. Permitting Abuse of a Minor	§5-27-221
42. Producing, Directing, or Promoting a Sexual Performance by a Child	§5-27-403
43. Promoting Obscene Materials	§5-68-303
44. Promoting Obscene Performance	§5-68-304
45. Promoting Prostitution in the First, Second, or Third Degree	§5-70-104 - §5-70-106
46. Prostitution	§5-70-102
47. Public Display of Obscenity	§5-68-205
48. Resisting Arrest	§5-54-103
49. Robbery	§5-12-102
50. Robbery (Aggravated Robbery)	§5-12-103
51. Sexual Offense (any)	§5-14-101 et. seq.
52. Simultaneous Possession of Drugs and Firearms	§5-74-106
53. Soliciting Money or Property from Incompetents	§5-27-229
54. Stalking	§5-71-229
55. Terroristic Act	§5-13-310
56. Terroristic Threatening	§5-13-301
57. Theft by Receiving	§5-36-106
58. Theft of Property	§5-36-103
59. Theft of Services	§5-36-104
60. Transportation of Minors for Prohibited Sexual Conduct	§5-27-305
61. Unlawful Discharge of a Firearm from a Vehicle	§5-74-107
62. Voyeurism	§5-16-102

5. Any person who has pled guilty, nolo contendere, or who has been found guilty of any one of the offenses listed above (Section 110.6), may not work in child care unless:
- a. The date of the conviction, plea of guilty or nolo contendere for a misdemeanor offense is at least five (5) years from the date of the request for the criminal history records check

and there have been no criminal convictions or pleas of guilty or nolo contendere of any type or nature during the five (5) year period preceding the background check request.

- b. The date of the conviction, plea of guilty or nolo contendere for a felony offense is at least ten (10) years from the date of the request for the criminal history records check and there have been no criminal convictions or pleas of guilty or nolo contendere of any type or nature during the ten (10) year period preceding the background check request.

5. Anyone employed in a licensed center, COE center, licensed child care family home or a registered child care family home prior to 9/1/2009 with a clear background check history may remain eligible for employment unless the employee had a conviction, plead guilty, or plead nolo contendere to an offense listed in the above section (Section 110.6) since 9/1/2009.

200 ADMINISTRATION

201 Administrative Procedures

1. 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.)
2. Required records shall be kept and made available to the Child Care Licensing Unit on request.
3. 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 registration. (Falsification means the submission of untrue information, whether by statement or omission.)
4. All applicable health and fire regulations shall be met.
5. The registered home shall not care for more than 5 children at any time including their own pre-school children.
6. The caregiver shall provide prudent supervision of the other persons in the Registered Home, and is responsible for the health, welfare, and safety of the children in care.
7. The caregiver shall provide a copy of the list of Kindergarten Readiness skills, prepared by the Arkansas Department of Education, to parents of all three and four 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.
8. The caregiver shall not release a child to anyone whom is not immediately recognized as the

child's parent or as someone on the authorized pick-up list unless:

- a. The individual can provide an official picture ID AND
- b. The person in charge can match the ID to the individual named on the child's data sheet

9. Verification of permission for persons not on the authorized shall be obtained by the caregiver by calling the parent, at a number listed in the child's record. The caregiver shall view an official picture ID of the individual to verify identity.

300 PERSONNEL

301 Caregiver Qualifications and Responsibilities

1. The registered home primary caregiver shall be **18** years or older.
2. The caregiver shall be able to read and write well enough to keep required records.
3. The 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.
4. The caregiver shall not use profanity or speak in an abusive manner when children are present. The caregiver shall also cooperate with licensing staff during regular 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. Newly registered home providers shall attend Family Child Care Provider Training within the first six months of being registered.
7. The registrant shall notify the Licensing Unit within five (5) calendar days of any change in the person(s) designated as secondary caregivers.
8. The caregiver shall obtain at least **15** hours of training each year in a continuing early childhood education, which is approved by the Division (Act 584 of 1993).

Topics appropriate for continuing early education shall include, but are not limited to the following:

- a. Child growth and development
- b. Nutrition and food service
- c. Parent communication and involvement
- d. Curriculum and curriculum development
- e. Developmentally appropriate practice and learning environments
- f. Behavior management

- g. Emergency care and first aid
 - h. Administration and management of early childhood program
9. The caregiver must be certified by the American Heart Association or the American Red Cross in infant/child cardiopulmonary resuscitation (CPR) and First Aid. Adult CPR is also required if school-age children are in care, or documentation that the current certification covers the ages of children in care. Infant/Child/Adult CPR certification will also be accepted from the AR Department of Labor, with documentation they conducted the course. All certifications shall be current.
10. The caregiver shall provide a tuberculin test annually. The caregiver shall be physically and emotionally able to care for children.
11. Child Care Licensing may require a physician's statement for the caregiver anytime behavioral or physical indicators warrant.
12. The caregiver shall not engage in behavior that could be viewed as sexual or as dangerous, exploitative or physically harmful to children.
13. The caregiver shall not consume or be under the influence of illegal drugs. The caregiver shall not consume or be under the influence of alcohol while delivering care. The caregiver shall not consume or be under the influence of medications (prescription or non-prescription), which may impair his/her ability to provide care.
14. At no time shall children be left unsupervised.
15. Additional staff provisions shall be made for enrollment of children with disabilities who require individual attention.

302 Adults in the Registered Home

- 1. The caregiver(s) shall provide a clear statement regarding the presence of any other adults 18 years of age and above who reside in the home. Any adult, residents or visitors shall not present a threat to the safety or welfare of children.
- 2. A Registered 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, when children are in care, shall provide an annual tuberculin test verifying that the adult is free from TB.

303 Supervision

- 1. The caregiver shall be responsible for children in care at all times and shall exercise prudent supervision.

2. 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.
3. 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.
4. The caregiver shall be present on the outdoor play area at all times when any children under the age of five (5) are present. Children ages five (5) and up may use the outdoor play area without the caregiver being present as long as the caregiver visually observes the children at least every five minutes and remains in a section of the home where she (he) can hear and see the children and can reach them quickly in case of an emergency.
5. 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.

400 PROGRAM AND ACTIVITIES

401 Program Requirements

1. There shall be a daily schedule, which includes age-appropriate activities.
2. There shall be an opportunity for a supervised rest period that:
 - a. Does not exceed two (2) hours.
 - b. Does not force children to remain on cot or mat if they do not fall asleep, and allows them to participate in a quiet activity that does not disturb the children who are asleep.
3. **Staff shall not cover the faces of sleeping children with blankets or other bedding.**
4. There shall be a total of at least one (1) hour of outdoor play per day in suitable weather. When making a determination if children should play outside, staff shall consider the following environmental factors:
 - a. When the heat index is forecast to be ninety (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.
 - b. When outdoor play occurs during the hotter part of the day, children should have shaded area, an ample supply of water and should be monitored closely for signs of heat stress.
 - c. When outdoor play occurs during the winter months and 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

Registered 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/Gross Motor activities (such as climbing and running)
 - b. Manipulative/Fine Motor activities (such as things done with the hands: puzzles, drawing, modeling clay)
7. The use of television, DVD, video cassette viewing and computer/video games and other screen time activities shall meet the following requirements:
 - a. Shall be limited to programs which are age-appropriate (programs should have educational value)
 - b. Shall not exceed one (1) hour daily per child or group of children. Children shall not be required to participate in screen time activities and shall be offered other choices. (Viewing time may be extended for special events or occasions such as a current event, holiday or birthday celebration or for the occasional viewing of age appropriate movies or other programs that may exceed one hour in length.)
 - c. Computer learning periods for children below age 5 may not exceed two (2) hours a day per child or group of children

402 Infant & Toddler Program Requirements

1. Infants shall be carefully supervised at all times.
2. Stimulation shall be given to infants in a variety of ways. Caregivers shall hold children, and 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.
5. Infants (children 12 months and below) shall be placed flat on their backs to sleep to lessen the risk of suffocation and Sudden Infant Death Syndrome. (If a child rolls over on his/her own, the facility is not required to reposition the child.) If there is a medical reason a child cannot sleep on his/her back, then a signed statement from the child's physician must be in the file stating that a different sleep position is indicated.
5. Infants' sleep space (e.g. crib) shall be free of loose bedding. If light blanket is necessary, it should be kept at or below the mid-chest area of the child. Staff shall not cover the faces of infants.

6. Pillows (including nursing or “boppy” pillows), bumpers/bumper pads, and stuffed animals shall not be placed in cribs.
7. Infants and toddlers shall have clean, safe, washable toys. Toys or materials used by younger children shall not be small enough to be swallowed.
8. Safety straps shall be used on all equipment originally manufactured with safety straps.

403 School Age Children Program Requirements

1. The school age child 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-person activities, including resting or homework. A supervised rest period does not apply to school-age children.
3. Permission of parents shall be on file for school age children to leave the Home.
 - a. School age children who leave the Registered 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 regular activities such as scouting may be given for the entire school term.

404 Evening & Night Care Program Requirements

Night care is 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 the children leave the sleeping area, the ages and number 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. Evening meals shall be served. The home shall ensure that children spending the night are served breakfast.
5. Drinking water shall be available to children during the night.
6. 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.

7. 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
8. Homes with only one caregiver shall limit care to no more than two shifts (18 hours) per 24 hour period. Homes offering 24 hour care shall provide a schedule verifying that they have made provisions for a secondary caregiver to provide relief for one shift. (Alternative Compliance may be requested by caregivers who provide 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 registration requirements and to the number and ages of children in care during the third shift.

500 BEHAVIOR GUIDANCE

501 Behavior Guidance Requirements

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.
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 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. 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.)
 - b. Washing mouth with soap
 - c. Taping or obstructing a child's mouth
 - d. Placing unpleasant or painful tasting substances in mouth, on lips, etc.
 - e. Profane or abusive language
 - f. Isolation without supervision
 - g. Placing child in dark area
 - h. Inflicting physical pain, hitting, pinching, pulling hair, slapping, kicking, twisting arms, biting or biting back, spitting, swatting, etc.
 - i. Yelling (This does not include a raised voice level to gain a child's attention to protect the child from risk of harm.)
 - j. Forcing physical activity, such as running laps, doing push-ups, etc. (This does not include planned group physical education activities that are not punitive in nature.)
 - k. Associating punishment with rest, toilet training or illness
 - l. Denying food (lunch or snacks) as punishment or punishing children for not eating
 - m. Shaming, humiliating, frightening, physically or mentally harming children or labeling children
 - n. Covering the faces of children with blankets or similar items
 - o. Labeling children negatively
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.

502 Infant & Toddler Behavior Guidance Requirements

1. 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

601 Home Records

1. All employees, 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 3 years. (This

includes records on children no longer enrolled.)

- a. Licensing/registration Compliance Form(s) (DCC-521) shall be maintained at the home for 3 years. The caregiver shall advise parents in writing that the compliance forms are available for review upon request.
- b. Verification of Child Care Liability insurance
- c. Fire department approval, if required by local fire department, state fire code or requested by the Child Care Licensing Unit due to possible hazards.
- d. Arkansas State Department of Health approval, if applicable
- e. Verification of annual approval by the Boiler Inspector Division of the Department of Labor
- f. Record of emergency drills
- g. Plans and procedures of Emergency Preparedness
- h. Pet vaccinations
- i. Attendance records on all children
- j. Transportation rosters, if applicable
- k. Verification of commercial vehicle insurance coverage

602 Children's Records

1. Enrollment information shall be obtained for each child before admission. (Sample enrollment forms may be obtained from your Licensing Specialist.)
2. 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. The caregiver shall provide a written discipline policy to parents, with a copy signed by the parents and retained by the caregiver
 - f. Any legal documentation that has been given to the facility, by the parent or legal guardian, regarding the care of the child
3. 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, medical or philosophical 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
- g. Any medical documentation that has been given to the facility, by the parent or legal guardian, regarding the care of the child

4. 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 statements by the parents stating who is authorized to pick up the child.

603 Caregiver Records

1. Caregiver records shall contain the following:

- a. TB skin test
- b. Documentation of training for continuing education (**Clarification:** Training hours will be counted on a calendar year basis or by the home's operating schedule if they do not operate year round.)
- c. Documentation of the initiation of all required background checks and results obtained
- d. Verification of required transportation training and a current copy of the driver's license for caregiver(s) who transports children

700 NUTRITION

701 Nutrition Requirements

1. The registered home shall meet the following:

- a. All food shall be safe and stored properly to prevent spoiling.
- b. There shall be a thermometer in the refrigerator that is visible and maintained at 40 degrees or below. Freezer thermometers shall be maintained at 0 degrees or below. All freezers shall be inaccessible to children.
- c. Food shall not be stored under sinks.
- d. Food shall be stored in original container or in a closed container.
- e. Chemical and toxins shall not be stored in food storage area.
- f. All medicines shall be stored separately from food at all times.

2. 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 sink with hot and cold running water.
 - c. Individual drinking glasses or disposable cups shall be provided.
 - d. All counter tops and other food preparation surfaces shall be kept clear of clutter and in a sanitary condition.
 - 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 that could be harmful to small children.)
3. 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.
 4. Breakfast shall be made available to children who arrive before 7:00am. Breakfast may be served to all children rather than a morning snack, provided there is no more than 3 hours between breakfast and lunch.
 5. Midmorning and mid-afternoon snacks shall be provided to all children and shall meet current U.S. Department of Agriculture guidelines.
 6. All children in care during 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).
 7. Children shall not be forced to eat.

702 Infant & Toddler Nutrition Requirements

1. The routine use of baby food, bottles and formula shall be agreed upon by the caregiver and parent (Appendix B). 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.
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 months of age shall be held while being fed. Bottles shall not be propped. Infants six months of age or older shall be held if needed.
7. Infants no longer held for feedings shall either sit in low chairs at low tables or in infant seats with trays, or in high chairs with wide bases and safety straps shall be used.

800 BUILDING

801 Building Requirements

1. The Registered Family 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. Department of Labor, Boiler Inspection Division requirements shall be met. All water heaters and any other boilers in licensed child care settings shall be inspected on an annual basis and/or upon installation. Verification that initial inspection or proof of attempt to set up initial inspection, shall be completed within six (6) months of licensure. Scheduling and completion of annual inspections will be the responsibility of the Department of Labor, however, the facility is responsible for cooperating and keeping documentation of such inspection on file for review. (AR Code §20-23-101 et. seq.)
3. The Registered Family Home shall have a working telephone on site all hours children are in care. The registrant shall provide the phone number to the Licensing Unit and to the parents. (This phone may be a cell phone if the phone stays operable, stays at the facility during all hours of care, and is the phone number provided to the Licensing Unit and the parents.)
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, registered as Registered Child Care Family Home shall be tied down and under-pinned as required by the Arkansas Manufactured Home Commission. The Registered Child Care Family Home shall obtain an inspection and approval from the Arkansas Manufactured Home Commission prior to registration.
7. An annual fire approval shall be obtained on all manufactured homes that are registered.

900 GROUNDS

Recommendation: To provide the safest possible playground environment, you are encouraged to meet Consumer Product Safety Commission's guidelines listed in the "Handbook for Public Playground Safety."

Because public playgrounds and other play environments away from the facility may not meet acceptable safety standards, staff should provide close supervision and not allow children to use any equipment that appears unsafe (eg: broken equipment, sharp objects, strangulations hazards, etc.).

901 Ground Requirements

1. The playground shall be fenced or enclosed, if necessary (if close to ponds, traffic, or other hazards.)
2. Children shall be supervised at all times when outdoors by someone at least 18 years of age. (See Regulation 303.4).
3. The play area shall be maintained in good order and free of potentially hazardous items.
4. Playground equipment shall be securely anchored.

1000 SLEEPING ARRANGEMENTS

1001 Sleeping Arrangement Requirements

1. All manufacturer guidelines shall be followed for furniture and equipment that is used by, or around, children.
2. Any cribs or playpens that have been identified as unsafe, or have been subject to recall as defined by the Consumer Products Safety Commission (CPSC) guidelines or law, shall be removed or repaired as indicated.
3. 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.
4. Waterbeds shall not be used for sleeping children under the age of two (2) years.
5. 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
 - c. The space between crib and mattress shall measure no more than 1 inch
 - d. Corner post shall be the same height as end panels
 - e. End panels shall extend below mattress at the lowest position of the mattress
 - f. Baby beds shall have slats no greater than 2^{3/8}” apart

6. 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.
7. Doors in rooms where children are sleeping shall remain open.
8. Children shall not nap on waterbeds, beanbags, or thick rugs.
9. Playpens or cribs shall not be placed near dangling cords.

1100 HEALTH

1101 General Health Requirements

1. The Registered Home shall have an adequate supply of water that meets the standards for drinking water of the Arkansas Health Department. Bottled water is also acceptable. Water shall always be available to the children.
2. The Registered Home shall follow any health or medical care plans and/or medical documentation as provided by the child's physician, parent, or guardian.
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 from the grounds at least once a week.
5. The home shall be free of insects and rodents.
6. Waste and sewage disposal and toilets facilities shall be safe and sanitary. The Health Department may be consulted for its recommendation.
7. Registered Homes shall comply with the Clean Indoor Air Act of 2006. Smoking in a child care family home is prohibited at all times. This includes:
 - a. All areas of the home, regardless of whether children are in care (includes time periods such as nights, weekends, holidays, etc., also includes office areas or other areas of the facility that share the same ventilation systems)
 - b. Outdoor play area
 - c. Other outdoor areas when children are present on those areas
 - d. In any vehicle used to transport children, whether children are present in the vehicle or not

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.

1102 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 if the child exhibits any of the symptoms listed below:
 - a. **Fever:** A body temperature of 101 or greater. (Recommendation: Infants, six months of age or under, who have a temperature of 100 or greater, should be excluded from care.)
 - b. **Diarrhea:** three (3) or more watery stools in a 24-hour period.
 - c. **Vomiting:** Vomiting on two or more occasions within the past 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 24 hours
 - h. **Untreated Scabies, Head Lice or the presence of nits:** (Note: may return after the first treatment and removal of nits.)
 - i. **Multiple sores inside mouth with drooling:** unless health care provider determines the condition is non-infectious
 - j. **Ring Worm:** of the scalp or skin, may return after evaluation and under treatment by a health care provider
 - k. **Impetigo:** May return 24 hours after treatment is initiated
2. Illness in the Registered 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 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 parent of significant events that affect the children. This shall include, but not be limited to:
 - a. Cases of serious contagious disease shall be reported to the parents of all the children in care
 - b. Any injury incurred by a child
6. The communicable diseases listed in Appendix C, whether suspected in a child or adult, shall be reported within 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 shall include:
 - a. The reporter's name, location and phone number
 - b. The name of the disease reported and the onset date
 - c. The patient's name, address, phone number, age, sex, and the 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 15 days of enrollment of a child, the Registration Home provider 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 preschool children shall be kept out of the children's reach and shall be administered only with written parental permission. School age children may apply sunscreen to themselves with supervision. A blanket permission may be obtained annually.

1103 Toilet Arrangements

1. At least one (1) commode and one (1) sink shall be made available for the children's use. Potty chairs may be used by the younger children if emptied, cleaned and disinfected after each use. Potty chairs 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 registered family home shall use a diaper changing surface that is sanitized after each use.
6. Children shall always be attended during diapering.
7. Soiled or wet diapers shall be removed, disposed of properly, and replaced with clean, dry diapers. The caregiver shall insure that children are properly cleaned and dried.
8. The caregiver shall assist children in toilet routine and hygiene practices.
9. 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

1104 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 to 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.

1105 Phone Numbers Required

1. The following numbers shall be available in the immediate area of the telephone:
 - a. Ambulance service or emergency medical services
 - b. Police or sheriff's department
 - c. Fire department
 - d. Poison Control Center 1-800-376-4766
 - e. Child Abuse Hotline Number 1-800-482-5964
 - f. The physicians named by the parents
 - g. The Child Care Licensing Central Office number: 501-682-8590 or toll free 1-800-445-3316
 - h. Home and business numbers of parents

1106 Pets

1. 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.

1200 SAFETY

It is suggested that the home have an evacuation crib or equivalent that could be used for the safe evacuation of infants.

1201 Safety Requirements

1. The registered child care family home shall have a written plan detailing the procedures to follow in the event of emergencies (fires, floods, tornadoes, utility disruptions, bomb threats, etc.) (Act 801 of 2009). The plan and procedures are required for emergencies that could cause structural damage to the facility, be identified as a threat by the Arkansas Department of Emergency Management or pose a health and/or safety hazard to the children and staff.
2. The written plan shall include the following information:
 - a. Designated relocation site and evacuation route
 - b. Procedures for notifying parents of relocation
 - c. Procedures for ensuring family reunification
 - d. Procedures to address the needs of individual children, including children with special needs
 - e. Procedures and documentation for annual training of staff regarding the plan and possible

and/or grounds. If phone service is not available, notification shall be as soon as service is restored or available.

10. Registered homes shall maintain a log of all child product recall and safety notices issued by CPSC or distributed the Attorney General's Office and shall post or otherwise make these notices available for parents to review. The holder of the registration shall certify, on an annual basis that these notices have been maintained, reviewed and that any identified items have been removed from the home. Forms for self-certification will be provided by the Licensing Specialist and shall be submitted annually. (Act 1313 of 2001)
10. Electrical outlets shall be guarded. Protective caps, if used, shall be large enough to prevent swallowing.
11. 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.
12. Stairways shall be well lighted and guarded as needed.
13. Dangerous equipment and/or objects shall be stored away from areas used by the children.
14. All detergent and cleaning supplies shall be kept out of the reach of children. (This does not include hand soap in children's or staff bathroom.) Supplies used for children's activities shall be carefully supervised.
15. All poisonous substances shall be kept in a locked area.
16. Guns shall be unloaded. Guns, other weapons, and ammunition shall be stored in a locked area in the home.
17. Illegal drugs/paraphernalia shall not be in any part of the facility or on the premises, regardless if children are present or not.
18. Tanks, ponds, swimming pools, open wells, drainage ditches and sewage drainpipes shall be fenced if located within the play area.
19. 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.)
20. Wading pools shall not be used by children under two years of age. Water sprinklers are acceptable.
21. Alcoholic beverages shall be kept out of reach of children.

1202 Fire Requirements

The 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.

1. A fire extinguisher with a minimum of 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.
2. A working smoke detector shall be installed near the kitchen area and in children's sleeping areas.
3. 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.
4. The structure and use of the home shall permit easy entry and exit and shall comply with the following:
 - a. A Registered Home with more than one level shall have second exits on all levels used by children
 - b. A Registered Home shall have at least two 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)
5. Wood burning stoves, or gas logs, fireplaces, open flame space heaters, water heaters, floor furnaces or other sources of heat shall be guarded and/or vented when necessary for the protection of the children. **Portable fuel heaters shall not be used.**
6. Cooking stoves or ovens shall not be used as a heating source in the home.
7. Portable heaters shall not be placed within reach of children and shall be approved UL listed products.
8. The providers 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.

1300 TRANSPORTATION

1301 Transportation Requirements

1. The requirement in this section apply to all transportation provided by the registrant, 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.
2. Caregivers transporting children shall meet the following requirements:
 - a. Be at least twenty-one (21) years old or the minimum age required by the Licensee's commercial auto insurance
 - b. Hold a current valid driver's license or commercial driver's license as required by state law, and a readable copy shall be maintained in the employee's record
 - c. Successfully completed the training course in Driver Safety that is offered by the Division prior to transporting children. Verification of the completed course in Driver Safety shall be maintained in the employee's record.
3. The vehicle(s) used for the transportation of children shall be in compliance with Arkansas state laws on transportation of children.
4. Vehicles shall be licensed and maintained in proper working condition.
5. Commercial insurance coverage shall be maintained for any vehicle used for transportation by the facility. Verification of commercial insurance coverage shall be provided to the Licensing Specialist prior to transportation of children. (Facilities licensed prior to the effective date of these regulations shall obtain required coverage within ninety (90) days.) Required coverage amounts to be maintained are:
 - a. Minimum coverage of \$100,000 Combined Single Limit (CSL)
 - b. Minimum coverage of \$100,000 for both Uninsured Motorist (UM) and Under Insured Motorist (UIM)
 - c. Minimum coverage of \$5,000 Personal Injury Protection (PIP) for each passenger (based on the number of passengers the vehicle is manufactured to transport)
6. The vehicle shall be licensed, insured and maintained in proper working condition.
7. Any child transported in a passenger automobile, van or pick-up truck, who is less than six (6) years old or 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)

Child passenger safety seats shall be used in accordance with manufacturer's guidelines.

8. Loading and unloading of children from vehicles shall be conducted in a safe manner.
9. There shall be a seating space and an individual, appropriate restraint system provided for each child being transported.
10. 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 registered home. Transportation rosters shall be kept by the Home and available for review for one (1) year.
11. 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 conducted the walk through inspection, documenting that all children have exited the vehicle.
12. To insure that children have safely arrived in the home, the transportation roster shall be reviewed by the Registrant and compared with attendance records. The Registrant shall sign off on the transportation roster to verify that all children have safely transitioned from the vehicle to the classroom.
13. 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.)

1302 Infant & Toddler Transportation Requirements

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.

1400 SPECIAL NEEDS

Individuals with Disabilities Education Act (IDEA):

- It is a law ensuring services to children with disabilities throughout the nation. IDEA governs how states and public agencies provide early intervention, special education and related services to eligible infants, toddlers, children and youth with disabilities.
- It defines a child with Special Needs as:
 - A child determined eligible for special services under the Individual with Disabilities Education Act (IDEA) for whom a current IFSP (Individual Family Service Plan) or IEP (Individual Education Plan) exists and/or
 - A child whose physical condition has lasted or is expected to last at least two (2) years as diagnosed by a licensed medical or psychological examiner
- It is specified in Public Law 108-466 §635.16 A-B (IDEA as reauthorized) as:
 - Children with disabilities including children in public or private institutions or other care facilities are educated to the maximum extent appropriate with children who are not disabled.

- o Special classes, separate schooling or other removal of children with disabilities from the regular educational environment occurs only when the nature or severity of the disability of the child is such that the child is not achieving a satisfactory education in a regular class that provides supplementary aids and services.

1401 Special Needs Requirements

1. All child care facilities shall comply with all applicable provisions as specified in IDEA:
 - a. The facility shall enroll children with special needs without regard to disability. (Programs are required to provide space and care for a child who can be placed in their facility with existing services, as well as added supports from special educational services, and as long as the health and safety of the child can be met.)
 - b. Staff shall provide care in the general classroom with children who are not disabled
 - c. The facility shall assist in facilitation of services required to meet the “special needs” of children in the center or in the classroom as specified on the individualized education/individual family service plan.
 - d. Facility staff (regular classroom staff) shall be a partner in the IFSP/IEP plan process
 - e. The facility shall allow service providers who are representatives of DHS, DDS or ADE access to the facility to provide special services as prescribed on the plan to enable the plan to be implemented in the classroom (natural/ least restrictive environment).
 - f. The facility shall not charge special service providers for space, accept “gratuities”, or payment for allowing special service providers to provide services in their facility.
 - g. The facility is not required to “displace” children or staff to make space available to special service providers.
 - h. In order for a special service provider to provide special services in the facility, the IFSP/IEP planning team under the authority of the Arkansas Department of Education and/or the Arkansas Department of Human Services, Developmental Disabilities Services, shall identify the needed special services on the IFSP/IEP.
 - i. Classroom staff shall reinforce the specified goals and objectives as part of the daily routine of the classroom.

1402 Infant & Toddler Special Needs Requirements

1. To the maximum extent appropriate, children ages 0 – 2 shall participate in early intervention services provided in “natural environments.”
2. When infants and toddlers cannot achieve satisfactory results from early intervention services in a natural environment, the provision of early intervention services shall occur in other appropriate settings as determined by the parent and the Individualized Family Service Team.

APPENDIX C

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) ¼ cup ½ slice (½ ounce) ¼ cup* ¼ cup	¾ cup (6 ounces) ½ cup ½ slice (½ 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 (½ ounce) ¼ cup* ¼ cup	½ cup (4 ounces) ½ ounce ½ cup ½ slice (½ 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 cup (4 ounces) 1 ounce 1 ounce 1 large egg ¼ cup 2 tbsp ½ cup ¼ cup ½ slice (½ ounce)	¾ cup (6 ounces) 1 ounce 1 ounce 1 large egg 3/8 cup 3 tbsp ¾ cup ½ cup ½ Slice (½ ounce)	1 cup (8 ounces) 2 ounces 2 ounces 1 large egg ½ cup 4 tbsp 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	shigellosis
unspecified and results of serologies)	syphilis
rash illnesses (including *MEASLES,	MUMPS
& RUBELLA)	tuberculosis
*WHOOPING COUGH (pertussis)	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	*Meningococcal infection
Campylobacter Enteritis	Mumps
Chancroid	Pesticide Poisoning
CHOLERA	PLAGUE
Coccidioidomycosis	*POLIOMYELITIS
*Congenital Rubella Syndrome	*Psittacosis (Ornithosis)
DIPHTHERIA	Q Fever
Encephalitis (all types)	RABIES
FOOD POISONINGS (all types)	*Relapsing Fever
Giardiasis	*Reyes Syndrome
Gonococcal Ophthalmia	Rheumatic Fever
Granuloma Inguinale	*Rocky Mountain Spotted Fever
*Guillain-Barre Syndrome	SMALL POX
Histoplasmosis	*Tetanus
HIV (Human Immune Deficiency Virus by name & address)	*Toxic Shock Syndrome
**Influenza	Toxoplasmosis
*Kawasaki Disease	*Trichinosis
*Legionellosis	*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.

APPENDIX D: DISASTER/EMERGENCY PREPAREDNESS

DISASTER/EMERGENCY NUMBERS	CONTACT/TOWN	TELEPHONE NUMBER
AMBULANCE		
APPLIANCE REPAIR		
BUILDING INSPECTOR		
CHILD ABUSE HOT LINE		1-800-482-5964
CHILD CARE LICENSING UNIT	Little Rock	1-800-445-3316 or 501-682-8590
CLEANING/MAINTENANCE		
ELECTRIC COMPANY		
ELECTRICIAN		
EMERGENCY CHILD LOCATOR		1-866-908-9572
FACILITY DIRECTOR		
FIRE DEPARTMENT		
FIRE DEPARTMENT (Non-Emergency)		
GAS COMPANY		
GLASS COMPANY		
HEALTH DEPARTMENT (Local)		
HEATING/AIR CONDITIONING		
INSURANCE AGENT AND POLICY NUMBER		
LICENSING SPECIALIST		
LOCKS		
NATIONAL EMERGENCY FAMILY REGISTRY AND LOCATOR		1-800-588-9822
PLUMBER		
POISON CONTROL		1-800-376-4766
POLICE		
POLICE (Local Non-Emergency)		
RED CROSS (Local)		
SHERIFF		
TRASH REMOVAL		
WATER DEPARTMENT		

Child Care Immunization Requirements

Recommended by Arkansas Department of Health and

Required by the Department of Human Services, Division of Child Care and Early Childhood, Licensing Division

AGE	DTaP DTP/DT	POLIO	Hib **	HEPATITIS B	MMR ****	VARICELLA ****	PNEUMOCOCCAL **
1-2 Months	None	None	None	None (1-2 doses possible)	None	None	None
3-4 Months	1 dose	1 dose	1 dose	1 dose (1-2 doses possible)	None	None	1 dose
5-6 Months	2 doses OR 1 dose within last 8 weeks	2 doses OR 1 dose within last 8 weeks	2 doses OR 1 dose within last 8 weeks	2 doses OR 1 dose within last 8 weeks	None	None	2 doses OR 1 dose within last 8 weeks
7-12 Months	3 doses OR 1 dose within last 8 weeks	2 doses OR 1 dose within last 8 weeks (3 doses possible)	2-3 doses OR 1 dose within last 8 weeks	2 doses OR 1 dose within last 8 weeks (3 doses possible)	None	None	2-3 doses OR 1 dose within last 8 weeks
13-15 Months	3 doses OR 1 dose within last 8 weeks	2 doses OR 1 dose within last 8 weeks (3 doses possible)	2-3 doses OR 1 dose within last 8 weeks (4 doses possible)	2 doses OR 1 dose within last 8 weeks (3 doses possible)	None (1 dose possible)	None (1 dose possible)	2-3 doses OR 1 dose within last 8 weeks (4 doses possible)
16-18 Months	3 doses or 1 dose within last 8 weeks	2 doses or 1 dose within last 8 weeks (3 doses possible)	3-4 doses with last dose on/after 1st birthday OR 2 doses if first dose is administered at age 12 - 14 months and doses are at least 8 weeks apart OR 1 dose on/after 15 months of age if no prior doses	2 doses OR 1 dose within the last 8 weeks (3 doses possible)	1 dose	1 dose	3-4 doses with last dose must be on/after 1st birthday OR 2 doses on/after 1st birthday
19-48 months	4 doses OR 3rd dose within last 6 months OR 1 dose within last 8 weeks	3 doses OR 1 dose within last 8 weeks	3-4 doses with last dose on/after 1st birthday OR 2 doses if first dose is administered at age 12 - 14 months and doses are at least 8 weeks apart OR 1 dose on/after 15 months of age if no prior doses	3 doses *** OR 1 dose within last 8 weeks	1 dose	1 dose	3-4 doses with last dose must be on/after 1st birthday OR 1 dose on/after 24 months of age if no prior doses OR 2 doses on/after 1st birthday
49-72 Months	5 doses * OR 4th dose within last 6 months OR 1 dose within last 8 weeks OR 4 doses with last dose on/after 4th birthday	4 doses OR 1 dose within last 8 weeks OR 3 doses with last dose on/after 4th birthday	3-4 doses with last dose on/after 1st birthday OR 2 doses if first dose is administered at age 12 - 14 months and doses are at least 8 weeks apart OR 1 dose on/after 15 months of age if no prior doses Not required on/after 5th birthday	3 doses *** OR 1 dose within the last 8 weeks	1 dose	1 dose	3-4 doses with last dose on/after 1st birthday OR 1 dose on/after 24 months of age if no prior doses OR 2 doses on/after 1st birthday Not required on/after 5th birthday

* **5th DTaP/DTP/DT** (Pre-school dose) must be given on/after the child's 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.

** **For Hib and Pneumococcal**, children receiving the first dose of vaccine at age 7 months or older require fewer doses to complete the series.

*** **3rd dose of hepatitis B** should be given at least 8 weeks after the 2nd dose, at least 16 weeks after the 1st dose, and it should not be administered before the child is 24 weeks of age.

**** **MMR and Varicella** vaccine must be given on/after the child's first birthday.