



Early Learning Coalition of the Nature Coast
Serving Citrus – Dixie – Gilchrist – Levy – Sumter Counties

HEALTH AND SAFETY ASSESSMENTS

Family Child Care Homes

Frequently Asked Questions

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FAMILY CHILD CARE HOMES

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INTRODUCTION

The Coalition recognizes that children must be cared for and educated in early learning environments which are healthy and safe in order for them to have the opportunity to grow to their highest potential. Some School Readiness providers hold licenses issued by the Department of Children and Families, and as such, are held accountable to the standards developed by the State of Florida. These programs include licensed child care facilities and licensed family child care homes. Oversight of these early learning programs is provided by DCF Child Care Licensing staff.

The Coalition also allows non-licensed, legally operating early education and care providers to offer the School Readiness program. These non-licensed provider types include license-exempt child care facilities and registered or informal family child care homes. In order to document the health and safety of those facilities, the Board has adopted the ELCNC-24 Health and Safety Assessments. The tool was designed to hold non-licensed providers to the same minimum standards developed by the State of Florida for early learning environments.

The Coalition's Board developed the Health and Safety Assessment to closely mirror the requirements of the Department of Children and Families' Licensing Standards. State regulations of the child care industry can be found in Florida Statutes Sections 402.26 – 402.319 and in the Florida Administrative Code Chapters 65C-20 (Family Day Care Standards and Large Family Child Care Homes) and 65C-22 (Child Care Standards). These documents may be updated by the Florida Legislature, and when this occurs, the Coalition's Health and Safety Assessment is revised to match any new requirements, to the greatest extent possible.

The Coalition's Early Learning Program Operating Procedure (ELPOP) outlines the requirements and processes for the implementation of the ELCNC-24 Health and Safety Assessments on both potential and existing School Readiness providers. The information can be reviewed in Chapter 3, Section 3.13. The ELPOP and the ELCNC-24 Health and Safety Assessments are available on the Coalition's website at www.elc-naturecoast.org. ELPOP Chapter 3, Section 3.13 states:

3.13 Health and Safety Assessments

- A. The Coalition recognizes that on-going health and safety assessments are crucial for the health and safety of children. The Health and Safety assessment instrument is designed to assess the general health and safety of subsidized child care arrangements and to help providers recognize unsafe conditions and if necessary to improve their child care environments.
- B. The Coalition will conduct health and safety pre-assessments of potential School Readiness providers, utilizing the appropriate ELCNC-24 Health and Safety Pre-Assessment/Assessment and the guidelines stated below:
 1. The Health and Safety Pre-Assessment is designed to review the health and safety standards of potential School Readiness providers that are interested in entering into an agreement to provide School Readiness services. Potential providers must successfully meet all of the requirements in the Health and Safety Assessment prior to execution of a School Readiness contract.

2. When a potential School Readiness provider is identified, Coalition staff will set up a meeting with the site director and review the Health and Safety Assessment process. Coalition staff will provide technical assistance as needed to assist the provider in preparing for the assessment. When the potential provider feels ready for the assessment, the provider will notify the Coalition. After notification, Coalition staff must conduct the assessment within two weeks.
 3. The observer will state the purpose of the visit to the program representative and greet all staff.
 4. The observer will observe all classrooms that are interested in providing School Readiness services; however, no more than six (6) classrooms will be observed in one day.
 5. After all indicators are completed the observer will review the document with the program representative. If all indicators are met the program will be considered ready to enter into a School Readiness contract. The provider must have the opportunity to execute the contract within thirty (30) days.
 6. If all indicators are not met the observer and provider will develop a technical assistance plan. The plan will include a timeline (not to exceed thirty (30) days) for the activity established in the corrective action plan and the date for the observer to conduct an assessment of the completed corrective action plan. If the program successfully implements all activities in the corrective action plan the program will be considered ready to enter into a School Readiness contract. If the program does not meet all of the activity listed in the corrective action plan the observer will continue to work with the provider until all indicators are met.
 7. The observer will provide the owner/director with a copy of the completed assessment and if necessary the corrective action plan within seven (7) days of the visit.
 8. Licensed Family Child Care Homes and Licensed Centers who have been inspected by the local licensing department within the last six (6) months may be exempt from the Health and Safety Pre-Assessment process. The Coalition must collect a copy of the licensing department's inspection of the provider. If the provider met all of the indicators listed on the licensing department's inspection the provider will be considered ready to enter into a subsidized child care contract. If the provider did not meet all of the indicators the observer may conduct an additional assessment or develop a corrective action plan in compliance with the above.
- C. The Coalition must conduct unannounced on-going health and safety assessments on all School Readiness providers at a minimum of twice per year or as often as deemed necessary by the Coalition. Inspections conducted by the local licensing authority within the last six (6) months may be utilized as an assessment to meet this requirement.
1. If a provider fails to meet any indicator during on-going health and safety assessments (or licensing inspection) the provider must be placed on a corrective action plan. The Coalition

must follow the School Readiness Agreement Termination and Reinstatement policies described earlier.

2. If the local licensing authority fails to conduct an inspection on a licensed site within the six (6) month time frame, Coalition staff will visit the site to conduct the health and safety assessment inspection.
3. If an out of county provider does not have any Nature Coast School Readiness children enrolled, the Coalition health and safety assessment inspection requirement will be suspended. If at any time a parent wishes to enroll a Nature Coast School Readiness child in the facility, Coalition staff will conduct a health and safety assessment PRIOR to the child attending the program.
4. If an in-county provider does not have any Nature Coast School Readiness children enrolled and the contract has been placed on in-active status, the Coalition health and safety assessment inspection requirement will be suspended. If at any time a parent wishes to enroll a School Readiness child at the facility, Coalition staff will conduct a health and safety inspection PRIOR to the child attending the program, unless the most recent inspection has been completed satisfactorily during the previous six (6) months.

There may be a variety of consequences to School Readiness providers that do not adhere to the requirements of the Health and Safety Assessment. Those requirements are also outlined in the Early Learning Program Operating Procedures, Chapter 3, Section 3.1 (C)(1)(g), which states:

3.1 General Services

C. School Readiness Provider Agreement Termination and Reinstatement Procedure:

1. School Readiness providers are required to maintain compliance with a variety of mandates, as outlined in the School Readiness Provider Agreement & Attachments. Consequences of non-compliance may range from being placed on at-risk status, probationary status, or contract termination. This document is designed to help providers to better understand the consequences of non-compliance in a variety of areas, as well as how to go about addressing non-compliance issues.

At-risk status indicates to a School Readiness provider that attention is needed in this area. The duration of the at-risk status may vary. There are no immediate consequences to being placed on at-risk status.

Probationary status indicates that a School Readiness provider is in a state of serious non-compliance. The duration of the probationary status may vary. The consequences of probationary status include:

- o The School Readiness program is ineligible to participate in any Coalition grant opportunities, such as the Accreditation Mini Grant Program, the Inclusion Grant Program, the Provider Recruitment/Expansion Program, and the Quality Initiatives Mini Grant Program, as well as any other grant programs that may be implemented.

- o The School Readiness program's owner is ineligible to participate in the Professional Development Reimbursement Program and the Teacher Incentive Payment (TIP) Program.

Immediate termination of a School Readiness Provider Agreement may occur if a condition or situation exists that poses imminent danger to children of injury or death. This condition or situation may be identified by the Coalition, the Department of Children & Families, and/or a law enforcement agency. Also, immediate termination will occur if the School Readiness provider fails to submit appropriate insurance and licensing documentation, as outlined in the School Readiness provider agreement and attachments.

g. Health and Safety Issues – Non-licensed Providers

School Readiness providers are required to maintain early learning environments which are safe and healthy for the children in attendance. Compliance is monitored by the Coalition utilizing the approved Health and Safety Checklist, which mirrors Department of Children and Families Child Care Licensing requirements as stated in Florida law. The Coalition will conduct at least two inspections each fiscal year of all non-licensed providers. Providers are required to comply with 100% of the applicable items on the checklist. If non-compliances are noted, providers are required to comply with any corrective action plans developed by the Coalition staff conducting the inspection. Corrective action periods will be established by the inspector as appropriate to the identified non-compliance area.

The ELCNC-22 School Readiness Provider Non-Compliance Report will be submitted by the Program Manager or designee.

Consequences of non-compliance with this requirement are:

At-risk status	Probationary status	Termination
<p>At-risk status does not apply to this area of non-compliance.</p> <p>NOTE: Non-compliance issues which pose imminent danger to a child will result in the immediate termination of the School Readiness provider agreement.</p>	<p>If the follow up inspection shows continued non-compliance, probationary status will be imposed. The provider will remain on probation until the next regularly scheduled inspection. If compliance is achieved at that time, the probationary status will be lifted. If compliance is not achieved, another corrective action plan must be developed and implemented.</p> <p>NOTE: Non-compliance issues which pose imminent danger to a child will result in the immediate termination of the School Readiness provider agreement.</p>	<p>If a provider remains on probationary status for health and safety issues for two full inspection cycles, the Coalition will consider termination of the agreement for the health and well-being of children.</p> <p>NOTE: Non-compliance issues which pose imminent danger to a child will result in the immediate termination of the School Readiness provider agreement.</p>

In an effort to assist School Readiness providers and program directors with developing an understanding of the Health and Safety Assessment, this Frequently Asked Questions document has been developed. Most of the clarification is derived from the State of Florida requirements for early childhood environments. Providers should also reference the most current state child care requirements, available at the Department of Children and Families website at www.myflorida.com/childcare. Additional questions can be referred to the Coalition's Program Managers at the local offices of the Coalition.

Health & Safety Assessment (Pre-Assessment)
Family Child Care Homes

STAFFING REQUIREMENTS

Item #1: Owner/Occupant – What are the requirements to operate a family child care home?

The operator must be at least eighteen (18) years of age and a resident of the family home. In the event of rental or leased property, the operator shall be the individual who occupies the residence. The operator of a family day care home may not work outside of the home during the hours the family day care home is operating.

Item #2: Written Plan for Substitute – What are my requirements for a substitute caregiver?

There shall be a written plan to provide at least one other competent adult, who must be at least eighteen (18) years of age, to be available as a substitute for the operator on a temporary or emergency basis.

1. This plan shall include the name, address, and telephone number of the designated substitute. Proof of background screening clearance and completion of required training for the designated substitute must be submitted with the written plan at time of licensure.
2. Any changes to the substitute plan that occur during the year must be submitted to the licensing authority within five working days of the change.
3. Family day care home operators must maintain written documentation (i.e. time records) of the hours a substitute worked in their home each day for the preceding twelve (12) months. Substitutes may not work more than forty (40) hours per month on average over a six month period in any single home for which they have been identified as the designated substitute.

No person shall be an operator, substitute or employee in a family day care home while using or under the influence of narcotics, alcohol, or other drugs that impair an individual's ability to provide supervision and safe child care.

Item #3: Background Screening Requirements – What are the requirements for background screening?

"Screening" means the act of assessing the background of child care personnel and volunteers and includes, but is not limited to, employment history checks, local criminal records checks through local law enforcement agencies, fingerprinting for all purposes and checks in this subsection, statewide criminal records checks through the Department of Law Enforcement, and federal criminal records checks through the Federal Bureau of Investigation.

Background screening requirements include the owner/operator, any household member over the age of twelve (12) years of a family day care home operator's family, or persons over the age of twelve (12) years residing with the operator in the family day care home. Members of the operator's family, or persons residing with the operator, who are between the ages of twelve (12) years and eighteen (18) years shall not be required to be fingerprinted, but shall be screened for delinquency records.

Initial Screening includes all of the following:

1. Level 2 screening, which includes at a minimum Federal Bureau of Investigation (FBI), Florida Department of Law Enforcement (FDLE), and local criminal records checks. For the purpose of issuing a license, any out-of-state criminal offense, which if committed in Florida would constitute a disqualifying felony offense, shall be treated as a disqualifying felony offense for licensing and screening purposes under this rule.

2. An employment history check for the operator and substitute(s) must include the previous two years of employment history, which shall include the applicant's position description, confirmation of employment dates from previous job(s), and level of job performance.
3. CF Form 1649A, January 2007, Child Care Attestation of Good Moral Character, which is incorporated by reference, must be completed annually or in accordance with the local licensing agency compliance and must be maintained in the department's licensing file. A copy of the CF Form 1649A may be obtained from the department's website at www.myflorida.com/childcare.
4. Initial screening submission and clearance documentation must be maintained in the department's licensing file.

A screening conducted under this rule is valid for five years, at which time a statewide re-screen must be conducted.

1. The five year re-screen is required for the operator, household members and all substitutes.
2. The five year re-screen must include, at a minimum, a statewide criminal records check through the FDLE and a local criminal records check.
3. CF Form 1649A, Child Care Attestation of Good Moral Character must be completed annually. A copy of the CF Form 1649A may be obtained from the department's website at www.myflorida.com/childcare.
4. Documentation/clearance from the five year re-screening must be included in the department's licensing file.

An operator, substitute and all household members must be re-screened as outlined in Section 402.313, Florida Statutes following a break in operation of the family day care home that exceeds 90 days.

Item #4: Staff Training – What type of training must I have to operate a family child care home? What training must my substitute complete?

Prior to caring for children, all family day care home operators and substitutes who work 40 hours or more per month on average must:

1. Successfully complete the department's 30-clock-hour Family Child Care Home training, as evidenced by successful completion of a competency based examination(s) offered by the department or its designated representative with a weighted score of 70 or better. Family day care home operators who successfully completed the mandatory 30-clock-hour Family Child Care Home training prior to January 1, 2004, are not required to fulfill the competency examination requirement. Documentation of course completion may either be a single Family Child Care Home certificate or certificates for the five individual training courses which total 30-clock-hours of training: Family Child Care Home Rules and Regulations; Health, Safety and Nutrition; Identifying and Reporting Child Abuse and Neglect; Child Growth and Development; and Behavioral Observation and Screening.
2. Complete a single course of training in early literacy and language development of children ages birth through five years that is a minimum of five clock-hours or .5 CEUs. Proof of completion will be documented on the certificate of course completion, classroom transcript, or diploma. In order to meet this requirement, individuals must complete one of the following:
 - a. One of the department's online literacy courses available on the department's website at www.myflorida.com/childcare; or
 - b. One of the department's approved literacy training courses. A list of these courses may be obtained from the department's website at www.myflorida.com/childcare (no additional courses will be approved by the department); or

- c. One college level early literacy course (for credit or non-credit) if taken within the last five years.

Family day care home substitutes who work less than 40 hours a month on average shall complete the department's six clock-hour Family Child Care Home Rules and Regulations training, as evidenced by successful completion of a competency based examination offered by the department or its designated training representative prior to licensure and caring for children.

1. The operator of the family day care home must sign a statement attesting to the number of hours that the substitute works in the operator's home. The statement must be placed in the substitute's file.
2. Family day care substitutes who have successfully completed the three clock-hour Fundamentals of Child Care training or 30-clock-hour Family Child Care Home training are not required to complete the six clock-hour Family Child Care Home Rules and Regulations course.

The operator and substitute must have certificate(s) of course completion for infant and child cardiopulmonary resuscitation (CPR) procedures and first aid training, which must be current and valid at all times. Certificates of course completion are valid based on the time frames established by each first aid and CPR training program, not to exceed three years. CPR courses must include an on-site instructor-based skills assessment that shall be documented by the certified CPR instructor. Documentation of completion of the online course and on-site assessment must be maintained at the facility and available for review by the Coalition.

Effective October 1, 2010, the DCF Training Transcript will be the only acceptable verification of successful completion of the department's training. Training completion documented on CFFSP Form 5267, March 2009, Child Care Training Course Completion Certificate, which is incorporated by reference, will no longer be accepted by the department after October 1, 2010, nor any previous version of the form. A copy of the department's Training Transcript may be obtained from the department's website at www.myflorida.com/childcare.

1. A copy of the CF-FSP Form 5267 or Training Transcript for the operator must be included in the department's licensing file.
2. Training documented on the CF-FSP Form 5267 that is not included on an individual's on the Training Transcript must be sent to the department or designated representative prior to October 1, 2010 to be documented on the individual's Training Transcript.
3. As of October 1, 2010, any course completion certificate not documented on the Training Transcript will be considered invalid, requiring that the course(s) be retaken. Until the coursework is retaken and completed, family day care homes will be out of compliance with the mandated training standard.

Prior to beginning volunteering in a family day care home, the volunteer must complete the CF-FSP 5217, March 2009, Volunteer Affidavit, which is incorporated by reference, and may be obtained from the department's website www.myflorida.com/childcare.

Annual In-Service Training:

All family day care home operators must complete a minimum of 10-clock-hours or one CEU of in-service training annually.

The annual 10-clock-hours or one CEU of in-service training concentrating on children ages birth through

12 years must be completed in one or more of the following areas (college level courses will be accepted):

1. Health and safety, including universal precautions;
2. Infant/child CPR;
3. First Aid (may only be taken to meet the in-service requirement once every three years);
4. Nutrition;
5. Child development – typical and atypical;
6. Child transportation and safety;
7. Behavior management;
8. Working with families;
9. Design and use of child oriented space;
10. Community, health and social service resources;
11. Child abuse;
12. Child care for multilingual children;
13. Working with children with disabilities in child care;
14. Safety in outdoor play;
15. Literacy;
16. Guidance and discipline;
17. Computer technology;
18. Leadership development/program management and staff supervision;
19. Age appropriate lesson planning;
20. Homework assistance for school-age care;
21. Developing special interest centers/spaces and environments; or
22. Other course areas relating to child care or child care management.

Documentation of the in-service training requirement must be recorded on CF-FSP Form 5268A, March 2009, Child Care In-Service Training Record, which is incorporated by reference, and maintained at the family day care home. CF-FSP Form 5268A may be obtained from the department's website at www.myflorida.com/childcare. A new in-service training record is required each licensing year. The in-service training records for the previous two licensing years must also be maintained at the family day care home for review by the Coalition

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

Item #5: Indoors and Outdoors Supervision – What type of supervision of children is required?

At all times, which includes when the children are napping or sleeping, the operator shall remain responsible for the supervision of the children in care and capable of responding to emergencies and the needs of the children. While children are napping or sleeping in bedrooms, the bedroom doors must remain open. During the daytime hours of operation, children shall have adult supervision, which means watching and directing children's activities, both indoors and outdoors, and responding to each child's needs.

A child who has been placed in an isolation area due to illness as stated in paragraph 65C-20.010(4)(b), F.A.C., must be within sight and hearing of the operator.

Children must be attended at all times when being diapered or when changing clothes.

HEALTH REQUIREMENTS

<p>Item #6: Animal Immunizations – What must I do if I have pets or other animals in/around my home? Animals, pets or fowl must have current immunizations, if immunizations are available for the type of animal, pet or fowl; and be free from disease. Custodial parents or legal guardian must be informed in writing of all animals on the premises of the home. Such information may be provided by way of a parent flier, a notification statement, or a statement included in the child's enrollment form. Documentation of current immunizations must be available for review upon request by the Coalition.</p>
<p>Item #7: Toxic, Hazardous Materials and Hazardous Items – How must I handle dangerous materials? All areas and surfaces accessible to children shall be free from toxic substances and hazardous materials. All potentially harmful items including cleaning supplies, flammable products, poisonous, toxic, and hazardous materials must be labeled. These items, including knives, sharp tools, BB guns, pellet guns and other potentially dangerous hazards, shall either be stored and in a locked area or must be inaccessible and out of a child's reach.</p>
<p>Item #8: Smoking on Premises – If I am a smoker, am I allowed to smoke around children? All family day care home operators shall inform custodial parents or legal guardians in writing, if someone living in the home smokes. Pursuant to Chapter 386, F.S., while children are in care, smoking is prohibited, within the family day care home, in outdoor play areas, during field trips, and in vehicles when transporting children.</p>
<p>Item #9: Firearms and Weapons – What are the rules about guns and other weapons in my home? At all times when children are in care, all firearms and weapons, as defined in Section 790.001, F.S., must be stored in a location inaccessible to children and in accordance with Section 790.174, F.S. No firearms or weapons as defined in Section 790.001, F.S., shall be kept upon any person located on the premises, excluding federal, state or local law enforcement officers.</p>
<p>Item #10: Play Areas Clean and Free of Litter – What are the requirements for cleaning my home? Play areas shall be clean and free from litter, nails, glass, and other hazards.</p>

Item #11: Outdoor Time and Play Area Requirements – What are the requirements that pertain to my outside play areas/yard?

Family day care homes caring only for infants under 12 months of age shall not be required to have an outdoor play area; however, infants in care shall be provided opportunities for outdoor time each day that weather permits. For all other family day care homes, including those providing evening care, the outdoor play area shall maintain safe and adequate fencing or walls, a minimum of four feet in height, if the family day care home property borders any of the following:

1. Laned road or laned street open to travel by the public;
2. Road or street open to travel by the public, divided by a median;
3. Road or street open to travel by the public where the posted or unposted speed limit is equal to or greater than 25 miles per hour; by municipal or county ordinance, pursuant to Section 316.189, F.S.
4. Lake, ditch, pond, brook, canal or other water hazard.

Fencing, including gates, must be continuous, and shall not have gaps that would allow children to exit the outdoor play area. The bottom or base of the fence must remain at ground level and free from erosion or buildup to prevent inside or outside access by children or animals.

Outdoor Play Area and Outdoor Equipment:

1. All family day care homes' play activities shall be suitable to each child's age and development.
2. All playground equipment, if provided, shall be securely anchored, unless portable or stationary by design, in good repair, maintained in safe condition, and placed to ensure safe usage by the children. Maintenance shall include checks at least every other month of all supports above and below the ground, all connectors, and moving parts.
3. Permanent or stationary playground equipment must have a ground cover or other protective surface under the equipment that provides resilience and is maintained to reduce the incidence of injuries to children in the event of falls.
4. All equipment, fences, and objects on the family day care home's premises shall be free from sharp, broken and jagged edges and properly placed to prevent overcrowding or safety hazards in any one area.
5. All equipment used in the outdoor play area shall be constructed to allow for water drainage and maintained in a safe and sanitary condition.

Item #12: Swimming Pools – Can I have a pool, and if so, what are the safety requirements?

All in-ground swimming pools and above-ground swimming pools more than one foot deep shall have either a fence or barrier on all four sides, at a minimum of four feet in height, separating the home from the swimming pool, or a pool alarm that is operable at all times when children are in care. The fence or barrier shall not have any gaps or openings that would allow a young child to crawl under, squeeze through, or climb over the barrier. All spas and hot tubs must meet the same barrier requirements for in-ground and aboveground swimming pools, or spas and hot tubs may be covered with a safety cover that meet the requirements of Section 515.25(1), F.S. at all times when children are in care. The exterior wall of the home with an ingress and egress does not constitute a fence or barrier. All doors or gates in the fence or barrier shall be locked at all times when children are in care and when the pool is not being used by the children in care. In addition to the fence, barrier or pool alarm, the family day care home operator shall ensure that all exterior doors leading to the pool, spa, or hot tub area remain locked at all times while children are in care. Barriers may be temporary in nature, but must be sturdy and meet all the above requirements, and be in place during all times when children are in care. The wall of an above-ground swimming pool may be used as its barrier; however, such structure must be at least four feet in height. In addition, any ladder or steps that are the means of access to an above-ground pool must be removed at all times while children are in

care and when the pool is not being used by the children in care.

If a family day care home uses a swimming pool, it shall be maintained by using chlorine or other suitable chemicals. If the family day care home uses a swimming pool that exceeds three feet in depth at the family day care home site, one person who has completed a basic water safety course such as offered by the American Red Cross, YMCA or other organization, must be present when children have access to the swimming area. If the family day care home uses swimming pools not at the family day care home site or takes the children to water areas such as a beach or lake for swimming activities, the family day care home operator must provide one person with a certified lifeguard certificate or equivalent who must be present when children are in the swimming area, unless a certified lifeguard is on duty.

Item #13: Appropriate, Safe, and Sanitary Bedding – What are the requirements for sleeping areas?

A family day care home must include a designated area where each child can sit quietly or lie down to rest or nap.

Each child in care must be provided safe and sanitary bedding to be used when napping or sleeping. Sleep bedding includes beds, cribs, or mattresses (excluding an air mattress or a foam mattress). Nap bedding includes sleep bedding, cots, playpens, or floor mats. Floor mats must be at least one inch thick, and covered with an impermeable surface cleaned, and sanitized or disinfected after each use. Bedding must be appropriate for the child's size. Nap bedding is not required for school-age children; however, the family day care home provider shall provide an area as described below for those children choosing to rest.

Children one year of age or older may nap or sleep on beds used by the family, provided individual linens are provided for each child. Each child shall have a separate bed, cot, crib, playpen, mattress or floor mat, except that two sibling preschool children may share a double bed. Sleeping refers to the normal night time sleep cycle. The operator must prepare a written plan outlining the sleeping arrangements of the children in care to be provided to the licensing counselor upon request. If the children are sleeping overnight, the operator must ensure accepted bedtime routines, such as brushing teeth and washing face and hands, are followed. Toothbrushes, towels and wash cloths may not be shared.

Children up to one year of age must be in an individual crib, portacrib or playpen with sides. Crib sides must be raised and secured while an infant is in the crib and bar spacing may not exceed two and three-eighths inches. Cribs must meet the construction regulations as outlined in Title 16, Sections 1508.7 and 1509.8, Code of Federal Regulations, January 2009, which is incorporated by reference. A copy may be obtained from the department's website, www.myflorida.com/childcare. No double or multi-deck cribs, cots or beds may be used. When napping or sleeping, young infants who are not capable of rolling over on their own shall be positioned on their back and on a firm surface to reduce the risk of Sudden Infant Death Syndrome (SIDS), unless an alternative position is authorized in writing by a physician. The documentation shall be maintained in the child's record.

A minimum distance of 18 inches must be maintained around individual napping spaces, except a maximum of two sides of a napping space may be against a solid barrier, such as a wall. The solid side of a crib does not meet the requirement of a solid barrier.

1. Napping spaces shall not be in kitchens, bathrooms, utility rooms, or garages.
2. Napping spaces shall not be under furniture, against furniture that may create a hazard, or blocking exit routes.
3. If separate rooms are used for napping, the doors to each room shall remain open to allow the operator to respond to emergencies and needs of the children.

Item #14: Drinking Water and Single Service Disposables – Must drinking water be available? What are the requirements for dishes, cups, utensils, sippy cups, and baby bottles?
Potable drinking water shall be available to children of all ages at all times.

Single service paper or plastic plates, utensils, and cups shall not be reused. Plates, utensils, cups, bottles and sippy cups provided by the family day care home that are not disposable shall be washed, rinsed, and sanitized between uses. All bottles and sippy cups prepared and used continuously throughout the day shall be individually labeled with the child's first and last name. This does not limit any type of identification system in addition to names. Sippy cups or bottles brought from home shall be individually labeled with the child's first and last name and returned to the custodial parent or legal guardian daily.

Item #15: Vermin/Pest Control – What are the requirements for pest control treatments?
Rodents and vermin shall be exterminated. Pest control shall not take place while rooms are occupied by children.

Item #16: Furnishings and Equipment – What are the safety requirements for the furniture, plumbing, etc. in my home?
All parts of the home, both indoors and outdoors; including the furnishings, equipment, and plumbing shall be kept clean, and sanitary, free from hazards, in an orderly condition and in good repair at all times.

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

Item #17: Smoke Detector, Fire Extinguisher, Corded Telephone, Lighting, Temperature, and Ventilation – What safety equipment must I have in my home?
The family day care home shall have an operable smoke detector and fire extinguisher with a current certificate, at least one operable corded telephone, and lighting that allows for safe movement and egress for children in care.

At all times and appropriate for the activity, lighting in family day care homes must be sufficient enough to allow the operator to visually observe and supervise children in care.

The home must have proper ventilation, and the temperature must be maintained between 65 and 82 degrees Fahrenheit.

Item #18: Nutritious Meals and Snacks Provided – If I want to prepare food for the children, what are the requirements?

If the operator chooses to supply food, the operator shall provide nutritious meals and snacks of a quantity and quality to meet the daily nutritional needs of the children. Meal and snack menus shall be planned and written, and must be available for review upon request by the custodial parent or legal guardian. Menus used to meet the USDA Food Program requirements shall also meet the department's licensing standard. The USDA My Pyramid, April 2005, which is incorporated by reference, shall be used to determine what food groups to serve at each meal or snack and the serving size of the selected foods for children ages two and older. The categories "oils" and "discretionary calories" may not be considered food groups. Copies of the USDA My Pyramid may be obtained from the USDA website at www.mypyramid.gov. Using the USDA My Pyramid, breakfast shall consist of at least three different food groups; lunch and dinner shall consist of at least four different food groups, and snacks shall consist of at least two different food groups. If a special diet is required for a child by a physician, a copy of the physician's order, a copy of the diet and a sample meal plan for the special diet shall be maintained in the child's file for as long as the child is in care. If the custodial parent or legal guardian notifies the family day care home of any known food allergies, written documentation must be maintained in the child's file. Daily meal and snack menus shall be maintained for a

<p>minimum of six months.</p>
<p>Item #19: Hand Washing – When must we wash our hands? Operators, substitutes, and children shall wash their hands with soap and running water, dry thoroughly, and follow personal hygiene procedures for themselves or while assisting others, and immediately after outdoor play.</p>
<p>Item #20: Soiled Items – If children’s clothing or other items become soiled, what must I do with them? Soiled items shall immediately be placed in plastic lined, securely covered containers that are not accessible to children. The container shall be emptied, cleaned and sanitized or disinfected daily. Children’s wet or soiled clothing and crib sheets shall be changed promptly.</p>
<p>Item #21: Potty Chairs Cleaned and Sanitized – If I choose to have potty chairs available to children, how must I clean them? Potty chairs, if used, shall be cleaned and sanitized or disinfected after each use.</p>
<p>Item #22: Individual Towels and Wash Cloths – What must I make available for children when they are washing/drying their hands? Each family day care home shall provide and maintain toilet and bath facilities that are easily accessible and at a height usable by the children. Platforms or stools are acceptable when they are safely constructed, with impervious surfaces, and can be easily cleaned and sanitized or disinfected. Running water, soap, trash receptacles, toilet paper and individual towels/disposable towels shall be available and within reach of children using the toileting facility.</p> <p>Each child shall have his own individually labeled towel and wash cloth. If disposable towels are used, they shall be discarded after each use.</p>
<p>Item #23: Diapering Area Clean and Sanitized – If I care for children in diapers, what are the requirements for diaper changing? When children in diapers are in care, there shall be a diaper changing area with an impermeable surface that is cleaned and sanitized or disinfected after each use. The diaper changing area shall be located separate from the food preparation, food service and feeding area. In addition, items unrelated to diaper changing shall not be stored in the diaper changing area nor shall they be placed on the diaper changing table.</p>
<p>Item #24: First Aid Kit – What items must I keep in my first aid kit? At least one first aid kit must be maintained on the premises of the family day care home at all times and on activities away from the home. The first aid kit shall be accessible to the operator and kept out of the reach of children. The kit must be clearly labeled “First Aid” and must, at a minimum, include:</p> <ol style="list-style-type: none"> 1. Soap, 2. Band-Aids or equivalent, 3. Disposable non-porous gloves, 4. Cotton balls or applicators, 5. Sterile gauze pads and rolls, 6. Adhesive tape, 7. Thermometer, 8. Tweezers, 9. Pre-moistened wipes, 10. Scissors, and 11. A current resource guide on first aid and CPR procedures.

Item #25: Emergency Telephone Information – What emergency phone numbers must I post?

Emergency telephone numbers, including ambulance, fire, police, poison control center, Florida Abuse Hotline, the county public health unit; and the home's address, and directions to the home, including major intersections and local landmarks, must be posted on or near all telephones and shall be used to protect the health, safety and well-being of any child in care. To meet the immediate needs of the child, family day care home operators shall call 911 or other emergency numbers in the event of an emergency.

Item #26: Accidents, Incidents, Health Related Symptoms Documented and Shared With Parents – If children become ill or injured while in my care, what are the notification requirements?

Custodial parents or legal guardian shall be notified immediately in the event of any serious illness, accident, injury or emergency involving to their child and their specific instructions regarding action to be taken under such circumstances shall be obtained and followed. If the custodial parent or legal guardian cannot be reached, the family day care home operator will contact those persons designated by the custodial parent or legal guardian to be contacted under these circumstances, and shall follow the written instructions provided by the custodial parent or legal guardian.

All accidents, incidents, and observed health related signs and symptoms which occur at a family day care home must be documented on the day they occur. Documentation shall include the name of the affected party, date and time of occurrence, description of occurrence, actions taken, and signature of operator and custodial parent or legal guardian. This documentation must be shared with the custodial parent or legal guardian on the date of occurrence. Records of accidents, incidents, and observed health related signs and symptoms must be maintained for one year. If the parent or legal guardian does not pick up the child on the date of occurrence of the accident or incident, the individual authorized to pick up the child must sign and be provided a copy of the accident/incident form.

Item #27: Fire Drills – What types of emergency drills must we practice?

During the home's licensure year, fire drills shall be conducted a minimum of 10 times and shall be conducted at various dates and times when children are in care, and shall not occur less than 30 days apart. A written record shall be maintained showing the date, time, number of children in attendance, evacuation route used, and time taken to evacuate the home. This record shall be maintained for one year from the date of the fire drill. The fire drills conducted must include, at a minimum:

- a. One fire drill during the established napping/sleeping times,
- b. One fire drill using different an alternate evacuation route, and
- c. One fire drill in the presence and at the request of the Coalition in coordination with the operator.

The operator shall develop a written emergency preparedness plan to include, at a minimum, procedures to be taken by the family day care home during a fire, lockdown, and inclement weather (tornadoes).

Emergency preparedness drills shall be conducted when children are in care. Each drill, excluding the fire drills, outlined in the emergency preparedness plan must be practiced a minimum of one time per year, documentation of which must be maintained for one year. A current attendance record must accompany staff during the drill or actual emergency and must be used to account for all children.

The operator shall maintain a written record of the emergency preparedness drills showing the type of drill, date conducted, number of children in attendance, and time taken for all individuals to complete the drill.

Documentation of conducted fire and emergency preparedness drills must be available at the time of the inspection. Documentation produced after the inspection shall not meet the licensing standard or corrective action requirements.

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

Item #28: Communicable Disease Control – If children become ill with something that may be contagious to other children or to me, what must I do to protect the health of others?

Children in care shall be observed on a daily basis for signs of communicable disease. Signs and symptoms of a suspected communicable disease include the following:

1. Severe coughing, causing a child to become red or blue in the face or to make a whooping sound;
2. Difficult or rapid breathing;
3. Stiff neck;
4. Diarrhea (more than one abnormally loose stool within a 24 hour period);
5. Temperature of 101 degrees Fahrenheit or higher when in conjunction with any other signs of illness;
6. Pink Eye;
7. Exposed, open skin lesions;
8. Unusually dark urine and/or gray or white stool;
9. Yellowish skin or eyes; or
10. Any other unusual sign or symptom of illness.

The family day care home shall have a designated isolation area for a child who becomes ill. The child's condition shall be closely observed. Any child who is suspected of having a communicable disease or who has a fever of 101 degrees Fahrenheit or higher, in conjunction with any of the signs and symptoms listed in paragraph (4)(a), above, shall be placed in the isolation area. Linens and disposable items shall be changed after each use. The condition shall be reported to the custodial parent or legal guardian and the child shall be removed from the family day care home. Such children shall not return to the home without medical authorization, or until the signs and symptoms of the disease are no longer present.

A child identified as having head lice shall not be permitted to return until the following day and only provided that treatment has occurred and been verified. Verification of treatment may include a product box, box top, empty bottle, or signed statement by a custodial parent or legal guardian that treatment has occurred. The operator must also treat areas, equipment, toys, and furnishings, with which the child has been in contact.

An operator, substitute, employee, or household member who develops signs and symptoms of a communicable disease or who has a fever of 101 degrees Fahrenheit or higher, in conjunction with any of the signs and symptoms listed in paragraph (4)(a), above, shall leave the areas of the home occupied by the children and shall not return without medical authorization, or until the signs and symptoms are no longer present. If it is the operator who is ill, the substitute must assume the operator's responsibilities.

Outbreaks: Operators are required to notify the local county health department immediately upon any suspected outbreak of communicable disease in accordance with Chapter 64D-3, F.A.C., Communicable Disease Control and follow the health department's direction. A suspected outbreak occurs when two or more children or adults have the onset of similar signs or symptoms, as outlined in paragraph (4)(a), above, within a 72-hour period or when a case of a serious or reportable communicable disease is diagnosed or suspected in a child or employee.

Item #29: Prescription and Non-Prescription Medication – What are the rules about dispensing medication to children?

Family day care homes are not required to give medication; however, if they choose to do so, the following shall apply:

- (a) The family day care home must have written authorization from the custodial parent or legal guardian to dispense prescription and non-prescription medications. This authorization must be dated and signed by the custodial parent or legal guardian and must contain the child's name; the name of the medication to be dispensed; and the date, time and amount of dosage to be given. This record shall be initialed or signed by the family day care home provider who gave the medication.
- (b) Any known allergies to medication or special restrictions must also be documented, maintained in the child's file, and posted with stored medication.

Prescription and non-prescription medication brought to the family day care home by the custodial parent or legal guardian must be in the original container. Prescription medication must have a label stating the name of the physician, child's name, name of the medication, and medication directions. All prescription and non-prescription medication shall be dispensed according to written directions on the prescription label or printed manufacturer's label.

All medicine must have child resistant caps, if applicable, and shall either be stored in a locked area or must be inaccessible and out of a child's reach.

Medication which has expired or is no longer being administered shall be returned to the custodial parent or legal guardian or discarded if the child is no longer enrolled in care at the family day care home.

Item #30: Documentation of Dispensing Medication – How must I document giving medicine to a child?

Any known allergies to medication or special restrictions must also be documented, maintained in the child's file, and posted with stored medication. In the event of an emergency, non-prescription medication that is not brought in by the custodial parent or legal guardian can be dispensed only if the family day care home has written authorization from the custodial parent or legal guardian to do so.

Any medication dispensed under these conditions must be documented in the child's file and the custodial parent or legal guardian must be notified on the day of occurrence.

The family day care home must maintain a record for each child receiving medications that documents the full name of the child, the name of medication, the date and time the medication was dispensed, the amount and dosage, and the name of the person who dispensed the medication. The record shall be maintained for a minimum of four months after the last day the child received the dosage.

HEALTH RECORDS

Item #31: Immunization Records – What are the requirements for shot/immunization records?

The family day care home provider is responsible for obtaining, for each child in care, a current, complete and properly executed Florida Certification of Immunization form, Parts A-1, B, and/or C, DH 680 (April 2009), or the Religious Exemption from Immunization form, DH 681 (July 2008), which are incorporated herein by reference, from the custodial parent or legal guardian. DH Form 680 and DH Form 681 may be obtained from the local health department. Immunizations received out-of-state are acceptable; however, immunizations must be documented on the Florida Certification of Immunization form and must be signed by a physician practicing in the State of Florida. Specific immunization requirements are included and

detailed in the most current edition of the “Immunization Guidelines – Florida Schools, Child Care Facilities and Family Day Care Homes” as referenced in Rule 64D-3.011, F.A.C.

Item #32: Student Health Records – Which students must have health records on file?

The family day care home operator is responsible for obtaining, for each child in care, a current, complete and properly executed Student Health Examination form, DH 3040 (June 2002), incorporated herein by reference and may be obtained from the local county health department, or a signed statement by an authorized professional that indicates the results of the components of the form are included in the health examination from the custodial parent or legal guardian, within 30 days of enrollment. The Student Health Examination shall be completed by a person given statutory authority to perform health examinations.

The Student Health Examination form or signed statement is valid for two years from the date the physical was performed and must be on file as long as the child is in care. If the custodial parents or legal guardians fail to provide the documentation required within 30 days of enrollment, the family day care home shall not allow the child to remain in the program.

School-aged children attending public or nonpublic schools are not required to have student health examination and immunization records on file at the family day care home as such records are on file at the school where the child is enrolled.

If the custodial parents or legal guardians need assistance concerning these requirements, the family day care home shall refer them to the Department of Health or to the child's physician.

Medical records in this section are the property of the custodial parent or legal guardian and must be returned when the child is no longer in care. The medical records are transferable if the child is placed in a different family day care home.

Item #33: Enrollment Information – What enrollment information must I collect from my families?

The operator shall obtain enrollment information from the child's custodial parent or legal guardian prior to accepting the child into care. This information shall be documented on CF-FSP Form 5219, March 2009 Child Care Application for Enrollment, which is incorporated by reference, or an equivalent that contains all the information required by the department's form. CF-FSP Form 5219 may be obtained from the department's website at www.myflorida.com/childcare.

Enrollment information shall be kept current and on file for each child in care.

There shall be signed statements from the custodial parents or legal guardian that the family day care home has provided them with the following information: The Department of Children and Family Services family day care home brochure, CF/PI 175-28, September 2007, Selecting a Family Day Care Home Provider, which is incorporated by reference. This brochure may be obtained from the department's website at www.myflorida.com/childcare.

Annually, during the months of August and September, the family day care home must provide parents with information detailing the causes, symptoms, and transmission of the influenza virus. To assist providers the department developed a brochure, CF 175-70, June 2009, Influenza Virus, Guide to Parents, which may be obtained from the department's website at www.myflorida.com/childcare.

ENFORCEMENT

Item #34: Access to the Premises – Who must I allow into my home when children are in care?

The family day care operator must allow access to the entire premises of the family day care home to inspect for compliance with family day care home minimum standards. Access to the family day care home also includes access by the parent, legal guardian, and/or custodian, to their child(ren) while in care.

CAPACITY/RATIO

Item #35: Licensed Capacity – How many children can I have at once?

A family day care home shall be allowed to provide care for one of the following groups of children, which shall include those children under 13 years of age who are related to the caregiver:

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

MISCELLANEOUS REQUIREMENTS

Item #36: Driver Licensed/Vehicle Inspections and Insurance – If I transport children, what are the requirements?

When any vehicle is regularly used by a family day care home to provide transportation for the children in care, the driver shall have a valid Florida driver's license in accordance with Section 322.03(1), F.S. All family day care homes must maintain documentation of current insurance coverage on all vehicles used to transport children in care.

Item #37: Seat Belts and Child Restraints – Do children have to use seat belts or car seats?

The maximum number of individuals transported in a vehicle shall not exceed the manufacturer's designated seating capacity or the number of factory installed seat belts.

Each child, when transported, must be in an individual factory installed seat belt or federally approved, properly installed, child safety restraint, unless the vehicle is excluded from this requirement by Florida Statute.

Item #38: Transportation and Supervision – What are the safety rules when I am transporting children?

An adult must remain within sight and hearing of children being transported in a vehicle so as to be able to respond to the needs of the children at all times.

Prior to transporting children and upon the vehicle(s) arrival at its destination, the following tasks shall be completed by the driver(s) of the vehicle(s) used to transport the children:

1. A log shall be maintained for all children being transported in the vehicle. The log shall include each child's name, date, time of departure and time of arrival, and signature of the driver to verify the fact that all children have left the vehicle. The log shall be retained for a minimum of six months.
2. Upon arrival at the destination, the driver of the vehicle shall:
 - a. Mark each child off the log as the child departs the vehicle,
 - b. Conduct a physical inspection and visual sweep of the vehicle to ensure that no child is left in the vehicle, and
 - c. Sign, date and record the driver's log immediately, verifying that all children were accounted for and that the visual sweep was conducted.

Smoking is prohibited in all vehicles while being used to transport children.

Emergency medical consent forms or copies of the consent forms signed by the custodial parent or legal guardian and emergency contact numbers must accompany the children on all field trips.

A permission and transportation release form signed by the custodial parent or legal guardian of the children in care must be on file for planned and unplanned activities. Written permission may be in the form of a general permission slip. Documentation of parental permission must be maintained for a minimum of six months from the date of planned and unplanned activities.

A means of instant communication shall be available at all times while transporting children.

Item #39: Planned Activities – What are the basic requirements for lesson planning and scheduling?

Each age group or class must have a written and followed plan of scheduled activities posted in a conspicuous location accessible to the custodial parents or legal guardian. The written plan must meet the needs of the children being served and include scheduled activities that:

1. Promote emotional, social, intellectual and physical growth;
2. Include quiet and active play, both indoors and outdoors; and
3. Include meals, snacks, and nap times, if appropriate for the age and the times the children are in care.

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

Item #40: Child Discipline/Compliance – What forms of discipline are allowed?

Family day care homes shall adopt a discipline policy consistent with Section 402.305(12), F.S., including standards that prohibit children from being subjected to discipline which is severe, humiliating, frightening, or associated with food, rest, or toileting. Spanking or any other form of physical punishment is prohibited.

All family day care home operators, employees, substitutes, and volunteers must comply with the family day care home's written discipline policy.

A copy of the written discipline policy must be available for review by the parents or legal guardian and the Coalition.

Item #41: Child Abuse or Neglect – Where do I find the rules that explain child abuse or neglect?

Acts or omissions that meet the definition of child abuse or neglect provided in Chapter 39, F.S., constitute a violation of the standards in Sections 402.301-.319, F.S.

Failure to perform the duties of a mandatory reporter pursuant to Section 39.201, F.S., constitutes a violation of the standards in Sections 402.301-.319, F.S.

Item #42: Emergency Plan/Posted – What emergency plans must I post?

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



Early Learning Coalition of the Nature Coast
Serving Citrus – Dixie – Gilchrist – Levy – Sumter Counties

**Health & Safety Assessment (Pre-Assessment)
Registered or Informal Family Day Care Homes**

Name of Facility:	Name of Operator:	Type of Home:
Address:		
Authorized Capacity:	Number of Staff Present:	Number of Children Present:
Assessor Name:	Date:	Time In <input type="text"/> Time Out <input type="text"/>

An item marked "√" indicates COMPLIANCE. An item marked "X" indicates NON-COMPLIANCE and requires corrective action by the specified due date. An item marked "N/A" indicates that the standard was not monitored during the assessment visit.

For detailed requirements, refer to Florida Administrative Codes 65C-20 Family Day Care Standards/Large Family Child Care Homes and Florida Statutes 402.26 – 402.319 Child Care Legislation.

Rating	Item #	Criteria	Due Date
		STAFFING REQUIREMENTS (65C-20.009 & .013)	
	1	Operator/Occupant 65C-20.009 (2)(a) and 65C-20.013 (4)(a, c)	
	2	Written Plan for Substitute 65C-20.009 (2)(b)	
	3	Background Screening Requirements 402.305, 402.3055, 402.302 (13), & 65C-20.008 (3)	
	4	Staff Training 65C-20.013 (5) & (6)	
	5	Indoors and Outdoors Supervision 65C-20.009 (2)(c) & (5) & 65C-20.009 (3)	
		HEALTH REQUIREMENTS (65c-20.010)	
	6	Animal Immunizations 65C-20.101 (1)(a)	
	7	Toxic, Hazardous Materials and Hazardous Items 65C-20.010 (1)(b)	
	8	Smoking on Premises 65C-20.010 (1)(c)	
	9	Firearms and Weapons 65C-20.101 (1)(d)	
	10	Play Areas Clean and Free of Litter 65C-20.101 (1)(e)	
	11	Outdoor Time and Play Area Requirements 65C-20.010 (1)(f-h)	
	12	Swimming Pools 65C-20.101 (1)(i, j)	
	13	Appropriate, Safe, and Sanitary Bedding 65C-20.010 (1)(k-o)	
	14	Drinking Water and Single Service Disposables 65C-20.010 (1)(p, q)	
	15	Vermin/Pest Control 65C-20.010 (1)(r)	
	16	Furnishings and Equipment 65C-20.010 (1)(s)	
	17	Smoke Detector, Fire Extinguisher, Corded Telephone, Lighting, Temperature, and Ventilation 65C-20.010 (1)(s)	
	18	Nutritious Meals and Snacks Provided 65C-20.010 (1)(t)	
	19	Hand Washing 65C-20.010 (2)(a)	
	20	Soiled Items 65C-20.010 (2)(b)	
	21	Potty Chairs Cleaned and Sanitized 65C-20.010 (2)(c)	
	22	Individual Towels and Wash Cloths 65C-20.010 (2)(d)	

Rating	Item #	Criteria	Due Date
	23	Diapering Area Clean and Sanitized 65C-20.010 (2) (c)	
	24	First Aid Kit 65C-20.010 (3)(a)	
	25	Emergency Telephone Information 65C-20.010 (3)(b)1	
	26	Accidents, Incidents, Health Related Symptoms Documented and Shared With Parents 65C-20.010 (3)(b)2 & 3	
	27	Fire Drills 65C-20.010 (3)(b)4 & 65C-20.010 (11)(d)2	
	28	Communicable Disease Control 65C-20.010 (4)	
	29	Prescription and Non-Prescription Medication 65C-20.010 (5)(a, c, g, h)	
	30	Documentation of Dispensing Medication 65C-20.010 (5)(b, d-f)	
		HEALTH RECORDS (65C-20.011)	
	31	Immunization Records 65C-20.011 (1)(a)	
	32	Student Health Records 65C-20.011 (1)(b, c)	
	33	Enrollment Information 65C-20.011 (2)	
		ENFORCEMENT (65c-20.012)	
	34	Access to the Premises 65C-20.012 (4)	
		CAPACITY/RATIO (402.302)	
	35	Licensed Capacity 402.302 (8)	
		MISCELLANEOUS REQUIREMENTS	
	36	Driver Licensed/Vehicle Inspections and Insurance 65C-20.013 (8)(a, b)	
	37	Seat Belts and Child Restraints 65C-20.013 (8)(c, d)	
	38	Transportation and Supervision 65C-20.013 (8)(e-g)	
	39	Planned Activities 65C-20.013 (9)(a)	
	40	Child Discipline and Compliance 65C-20.013 (10)	
	41	Child Abuse or Neglect 65C-20.013 (11)(d)1	
	42	Emergency Plan/Posted 65C-20.010 (7)	

Comments: _____

Items that cannot be physically observed may be documented through the operator's program policy and procedure or an appropriate notification process.

I hereby certify receipt of my Health and Safety Assessment. I understand that if an "X" is marked in the box next to any criteria that my School Readiness contract will be placed in an at-risk status. I understand that I must correct all areas marked with an "X" by the due date listed. Further, I understand that the assessor will return on or after the latest due date listed to verify my corrections to each area noted.

 Provider Name (Please Print)

 Provider Signature

 Date

 Assessor Name

 Assessor Signature

 Date

 Assessor's Supervisor Name

 Assessor's email

 Phone Number

NOTE:

Non-compliance issues which pose imminent danger to a child will result in the immediate termination of the School Readiness provider agreement.

