MINIMUM LICENSING REQUIREMENTS

FOR

Out-of-School Time Facilities

ARKANSAS DEPARTMENT OF HUMAN SERVICES

DIVISION OF CHILD CARE AND EARLY CHILDHOOD EDUCATION

CHILD CARE LICENSING UNIT

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Out-Of-School Time

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MINIMUM LICENSING REQUIREMENTS FOR

Out-of-School Time Facilities

100 OUT-OF-SCHOOL TIME LICENSING

101 Related Laws and Requirements

1. The "Child Care Facility Licensing Act" Ark. Code Ann. 20-78-201-220, as amended, is the statutory authority for licensing Out-of-School Time (OST) Programs. This act created the Division of Child Care and Early Childhood Education and authorized the Division to establish rules and regulations governing the granting, revocation, denial and suspension of licenses for OST facilities and the operation of OST facilities in this state. The Minimum Licensing Requirements for Out-of-School Time Facilities are the Division's rules and regulations for OST Facilities.

2. The Child Care Facility Licensing Act designates the Arkansas Department of Human Services, Division of Child Care and Early Childhood Education as the administrative agency responsible for administering the Act in accordance with the Minimum Licensing Requirements for Out-of-School Time Facilities. The Division is authorized to inspect and investigate any proposed or operating OST Facilities and any personnel connected with the OST Facilities to determine if the facility will be or is being operated in accordance with the Child Care Facility Licensing Act and the Minimum Licensing Requirements for Out-of-School Time Facilities.

3. 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 (20) feet 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.

4. The Licensee shall maintain Child Care Liability Insurance (Act 778 of 2009), and comply with the following requirements:

    a. Prior to the approval of an application, the applicant shall provide verification of the required coverage to the Licensing Specialist and provide subsequent verification when requested. (Facilities licensed prior to the effective date of this revision shall have

ninety (90) days to comply with this requirement.)

b. The Licensee shall maintain the minimum amount of coverage as follows:

Licensed Capacity of OST Facility	Minimum Child Care Liability Insurance Coverage Required
1-74	$500,000 per occurrence
75 and up	$1,000,000 per occurrence

5. Laws relevant to the operation of OST facilities are available upon request.

6. The following standards are the minimum licensing requirements which shall be met by persons or organizations which operate an OST facility. In recommending a license be issued, the Division of Child Care and Early Childhood Education works in coordination with the local and state Health Departments, Fire Departments, City Planning or Zoning Departments and the Boiler Division of the Department of Labor. Persons considering opening or expanding an OST facility shall immediately contact these individual departments for inspection and information on their separate regulations.

   A prospective Licensee should request clarification regarding the codes or covenants enforced by these departments as some may prevent the operation of OST facility at a particular location, may limit the number of participants in care or may impose additional safety requirements.

7. The Licensing Unit shall share information on the location and status of new applicants applying for a license and on facilities holding a license when a city or county requests the information.

102 General Requirements

1. OST Facilities shall maintain compliance with the licensing requirements at all times. To be in substantial compliance, the OST Facility shall meet all essential standards necessary to protect the health, safety and welfare of the participants attending the OST Facility. Essential standards include but are not limited to those relating to issues involving fire, health, safety, nutrition, discipline, staff/participant ratio and space. Failure to comply with any of the licensing requirements for OST Facilities may result in any of the following adverse actions:

   a. Denial of an application for a license or for church exempt status
   b. Revocation or suspension of a license or church exempt status
   c. Issuance of a provisional license or provisional church exempt status

2. The following factors may be considered when determining the appropriate adverse action:

   a. Severity of the deficiency cited
   b. Number of violations cited
   c. Frequency of violations cited

d. Past history of compliance
e. Willingness/ability to correct violations

3. Each OST Facility shall be reviewed by the Child Care Licensing Unit to determine whether the facility is in compliance with all the Minimum Licensing Requirements for OST Facilities. Child Care Licensing staff shall have access to OST Facilities for the purpose of conducting inspections, reviews and complaint investigations. (**Clarification:** In addition to rooms used for care, Child Care Licensing Staff must also be given access to all other rooms or spaces not used for care. Any rooms or areas that are not accessible to participants in care will only be viewed briefly for major health and safety issues and will not be routinely monitored for general licensing compliance. This is to help insure that there are no dangers such as fire hazards, which could impact the safety of the entire structure.)

4. Denial of access to the facility or to interview participants may result in any of the adverse action described above.

5. Any facility that has not provided care to participants for a period of one year shall be closed unless a written request is made by the licensee stating why closure should not take place. If the licensee requests that the license remain open, license fees and required annual inspections shall be kept current.

6. Falsification of any document or the submission of false information to the Child Care Licensing Unit or any other unit of the Division may constitute grounds for revocation of the license. (Falsification means the submission of untrue information, whether by statement or omission.)

103 Licensing Procedures

1. Application- An application shall be obtained from the Child Care Licensing Unit. The completed application packet shall be submitted to the Child Care Licensing Unit for review and approval. A completed application packet shall consist of:

   a. A signed application form with a designated person who assumes legal responsibility for operation of the OST facility
   b. Name of proposed director and their qualifications
   c. Names, addresses and telephone number of Board of Directors, if applicable
   d. Clear written guidelines of responsibility for the Board of Directors, if applicable
   e. Building/facility diagram
   f. Description of the services that will be provided to the participants
   g. Verification that criminal record checks and child maltreatment central registry checks have been initiated on all owners, operators and staff members of the OST Facility.
   h. Boiler inspection, or verification that inspection has been scheduled
   i. Fire Department approval
   j. Health Department approval
   k. Zoning approval
   l. 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 participants can be provided)

m. A reasonable plan with a proposed budget for the financial support of the program covering costs of staffing, building (including rent or mortgage and repairs), utilities, equipment, safety, and nutrition. (This is a one-time only requirement that applies to new applicants for a license.)

2. Time for processing: The Licensing Specialist has sixty days to submit a recommendation to the Division.

3. A pre-approval consultation meeting shall be required for all applicants for a license prior to the approval of the application. This meeting shall be offered to the applicant prior to application or within 30 days of the receipt of the application.

4. License: The Child Care Licensing Unit shall conduct a licensing study of each OST Facility to determine eligibility for a license. The facility shall be approved by the Child Care Licensing Unit before a license may be issued by the Division. A license for a OST Facility shall specify:

   a. The name and address of the facility
   b. The owner/operator of the OST Facility
   c. The number of participants authorized for care at the OST Facility
   d. The expiration of any provisional licenses
   e. The type of care the OST Facility will be providing

5. License—Non-transferable: A license for an OST Facility or approval for a church-operated exempt status shall apply only to the address and location stated on the license or approval issued. It shall not be transferable from one holder of the license or approval to another or from one place to another. If the location of an OST Facility is changed, or the operator of the OST Facility is changed, then the license or approval for that OST Facility shall be automatically closed on such a change. The OST Facility shall notify the Licensing Unit of a change of location or ownership.

6. Compliance: On-site inspections of OST Facilities are conducted by the Child Care Licensing Unit on a routine basis to determine a facility's continued compliance with the standards. The caregivers shall cooperate with licensing staff during licensing visits and investigations.

   Violations of rules are documented in writing by use of the licensing compliance record. Documentation shall include:

   a. Reference to the specific rule violated
   b. A factual description of the nature of the violation and how the OST Facility failed to comply
   c. A date of expected corrections

7. If video recordings are made by the facility and maintained for viewing as part of a continuous monitoring system, they shall be made available to licensing staff as needed upon request. This does not include video recordings of special events, etc.

8. The Child Care Licensing Unit shall have the authority to make both scheduled and unscheduled visits to:

    a. Conduct inspections and reviews to determine compliance with the licensing requirements.
    b. Investigate complaints involving possible violations of licensing requirements.
    c. Offer consultation and technical assistance.

9. The Child Care Licensing Specialist may increase unscheduled monitor visits where numerous or severe violations of standards are cited.

10. If a violation is of imminent threat to the health, safety, and welfare of the participants attending the OST Program, corrective action or compliance shall be obtained within 24 hours in order to insure the health, safety and welfare of the participants in care. If an OST Facility violates an administrative standard or standard that does not directly threaten the immediate health, safety or welfare of the participants in care, these violations shall be corrected within a reasonable time as mutually agreed upon by the Child Care Licensing Unit and the OST Facility.

    Once a violation has been corrected, the correction will be documented on the Licensing Compliance Record and a copy provided to the OST Facility.

11. New Provisional License- The Child Care Licensing Specialist shall recommend a new provisional license when the facility is newly opened or a facility has been acquired by new owners whose compliance history has not been determined. A new provisional license shall not exceed twelve (12) months in length.

    At the end of the provisional license, the Division may in its discretion:

    a. Issue a regular license
    b. Revoke the license
    c. Suspend the license
    d. Issue a successive provisional license

12. Regular License: The Child Care Licensing Specialist will recommend a regular license when the facility has demonstrated substantial compliance, or when an existing Licensee with a Regular license relocates their facility and their past demonstrates a substantial level of compliance.

13. Probationary Provisional License- The Licensing Unit may issue a Probationary Provisional license when the OST facility 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 participants. The facility and 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 license,

the Licensing Unit may:

a. Issue a Regular license
b. Suspend the license
c. Revoke the license

14. Suspension of License- The Division may suspend a license when the Licensing Unit determines that the facility has serious areas of non-compliance, but the facility would be able to resume normal operation when the harmful conditions are eliminated.

    If granted, the suspension order remains in effect until the order expires or until the Division determines that the problem necessitating the suspension order have been resolved. The suspension of a license may not exceed twelve (12) months. If the Division finds that the terms of the suspension order have been met prior to the expiration of the suspension period, the Division retains the discretion to reinstate the license. If the terms of the order have not been met, the Division may revoke the license.

15. Revocation of License-The Division may revoke a license when any of the following situations occur:

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

16. The revocation of a license nullifies and cancels the license. At the time of a final determination of revocation of the license by the Division, the Division shall specify in the revocation letter the terms of the revocation. The licensee shall not be eligible to reapply for a license for a minimum of one (1) year or longer, if specified in the revocation order. Related parties shall not be eligible to apply for a license for the same specified period. (Related parties are defined as immediate family members, member of Board of Directors, persons or entities associated or affiliated with, or which share common ownership, control, or common board members or which have control of or is controlled by the licensee. An immediate family member is defined as a spouse, step and in-law relationships, a child, a natural or adoptive parent, a sibling, a grandparent, a grandchild or a son or daughter-in-law.) (Applicants who are denied a license or registration due to this requirement may appeal the denial to the Child Care Facility Review Panel.) Facilities wishing to be re-licensed must submit a new application for licensure for review and approval by the Division. Approval must be obtained and a new license issued before the facility provides care to a licensable number of participants.

104 License Fee

1. Each facility shall submit an annual license fee as long as the facility is in compliance with the Minimum Licensing Requirements for OST Facilities. A facility license fee is determined by combining the maximum license capacity of all licenses located within the same premises.

a. Facilities serving up to 17 participants- $15 per year
b. Facilities serving 17 to 99 participants- $50 per year
c. Facilities serving 100 or more participants- $100 per year

2. Upon review and determination of a licensing recommendation by the Child Care Licensing Specialist, the Specialist shall issue a Notice of License Fee Due to the facility.

3. The Division shall not issue a license unless the required license fee has been paid.

4. A copy of the license fee notice shall be submitted, licensure recommendation.

5. The fee schedule shall apply to all OST facility recommendations for licensure as follows:

   a. New Provisional License-(Provisional License for new operation to be issued for a period of twelve (12) months.) A one-year license fee shall be paid prior to the issuance of a provisional license.
   b. New Regular License or Conversion from provisional to regular status-A license fee shall be paid prior to the issuance of a new license.
   c. Conversion to Provisional Status-No license fee is due for licenses converted to provisional status during the term of a regular license.

6. A second notice of license fee due will be sent to facilities failing to submit the required license fee (Notice of License Fee Past Due). This notice will be sent 20 days after the initial notice of fee due. Failure to submit a license fee within 20 days of receipt of the past due notice will result in action to suspend the license until such time as the fee is paid.

7. Refunds of license fees paid are made only when the Division does not approve issuance of a license. There shall be no refunds of license fees paid for voluntary closure of a facility or for Division action to revoke or suspend a license.

8. All license fees paid to the Division shall be deposited in a special Child Care Provider's Fund. This fund shall be used to meet the cost of conducting statewide criminal record checks, with the remaining money used for training or materials to be loaned to child care providers.

105 Appeal of Licensing Actions

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

   a. Adverse licensing actions (revocation or suspension of a license, conversion to a provisional license or denial of an application for a license)
   b. Founded licensing complaints
   c. Denials of alternative compliance requests
   d. 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 licensing actions must be mailed within ten (10) calendar days of the receipt of the notice of the adverse action. Requests to appeal licensing actions, other than adverse, must be mailed within twenty (20) calendar days from receipt of the notification of the action. The request to appeal shall include a statement of the action(s) taken by the Division and the reason(s) the licensee or applicant for license disagrees with that action. The request to appeal will be reviewed by the Licensing Supervisor and the Licensing Administrator. If the appeal is not resolved to the satisfaction of the licensee or applicant for license, the matter will be referred to the Child Care Appeal Review Panel for hearing**.** (This appeal process also applies to Church Operated exempt facilities.) **(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 Licensing Requirements for Out-of-School Time Facilities if the Division determines that the alternative form of compliance offers equal protection of health, safety and welfare to participants and meets the basic intent of the requirements for which the program is making the request.

2. The Division shall consider all requests for alternative compliance with the Licensing requirements except those requirements that are enforced by the Department of Health, Local Fire Marshal or State Fire Marshal's office and applicable city ordinances including zoning.

3. To request alternative compliance, the following procedure shall be initiated by the person responsible for the operation of the facility.

4. The applicant/licensee shall submit the request for alternative compliance in writing.

5. The request shall include:

    a. The specific standards for which alternative compliance is sought.
    b. An explanation of how the alternative form of compliance is equal to or exceeds the stated requirements.
    c. 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 continue to provide for the health, safety and welfare of participants as intended by the requirements.
    d. The applicant/licensee shall provide clear and supportive evidence and upon request of the Division, and expert's opinion on the effect of the request on health, safety and welfare of the participants.

6. A separate written request shall be submitted for each requirement of which alternative compliance is sought. The approved alternative compliance is effective for the duration of the license unless a shorter time frame is specified.

7. The granting of alternative compliance for a requirement shall in no way constitute a precedent. If an alternate means of complying with the requirement is granted by the Division and the facility fails to satisfactorily implement this alternate means, the original requirement for which alternative compliance was sought shall become immediately enforceable.

8. The Division shall have the right to obtain an expert opinion to corroborate expert opinions provided by the applicant/licensee.

9. The Division shall have the right to deny requests for alternative compliance when it finds that such requests do not adequately protect the health, safety and welfare of participants and do not meet the intent of the requirements.

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

107 Church-Operated Exemption

Please note that all regulations included in this manual also apply to Church Operated Exempt (COE) OST facilities.

1. Act 245 of 1983 defines those facilities that may apply for an exemption from obtaining of license to operate a child care facility and the process through which such exemption may be granted. The facility must be operated by a church or group of churches and be exempt from the State Income Tax levied by Act 118 of 1929, as amended. The person or persons in charge of such a facility shall submit a written request to the Division for such exemption along with the following:

    a. Verification of Tax ID ownership by the church
    b. Verification that the facility is operated by a church or group of churches
    c. Verification that the facility has been inspected annually and meets the applicable fire safety and health standards
    d. Certification from the facility that it is in substantial compliance with published standards that similar nonexempt OST facilities are required to meet

2. The Division shall review each request for a church-operated exemption and reply in writing within 60 days from receipt of such request.

3. The facility shall be visited by Division staff to verify the facility's substantial compliance with the published standards prior to the consideration and review by the Division.

4. The Division shall consider each request for exemption and shall review the Division staff's written report in determining a facility's substantial compliance with published standards.

5. If a facility claims and states the belief that a particular standard is of a religious nature, the Division shall consider and make a determination on the statements that shall then be a final action subject to review under the Administrative Procedures Act.

6. Written notification of an exemption shall be made to the facility stating the maximum number of participants allowable, the dates of exemption and any other conditions by which an exemption is granted.

7. Division staff shall have the authority to visit any church-operated exempt facility to review, advise and verify the maintenance of substantial compliance at the direction of the Division.

108 Licensing Investigations

1. Child Care Licensing staff shall investigate all complaints involving the possible violation of licensing requirements.

109 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 made out to Department of Human Services (DHS) must be attached to each form.

a. Each applicant to own or operate a OST facility	At application and every two years thereafter
b. Staff members and applicants for employment in OST facility	At application or within 10 days of hire/start date and every two years thereafter
c. All volunteers who have routine contact with participants	At application and every two years thereafter
d. Administrative staff and/or members of Board of Directors who have supervisory and/or disciplinary control over participants or who have routine contact with participants	At application and every two years thereafter
e. Student Observers	At beginning of observation or within 10 days of first observation and every two years thereafter if applicable
f. Therapist or other persons who have routine contact with participants	Within 10 days of the time they begin to provide services or begin to participate in program activities and every two years thereafter

2. If a complaint of child maltreatment is filed against any owner/operator, staff or other person in OST Facility, the Child Care Licensing Specialist shall evaluate the risk to participants and determine the suitability of the person(s) to supervise, be left alone with participants, have disciplinary control over participants or remain in the program during hours of care until the allegations have been determined true or unsubstantiated. (Pending

the evaluation of risk to participants by the Child Care Licensing Unit, the person(s) alleged shall not be left alone with participants.)

3. If corrective action is appropriate, the facility shall require all staff members who have had a founded report of child maltreatment to follow the corrective action plan specified 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 may constitute grounds for adverse action against the license.

4. The statewide Child Maltreatment "Hot Line" and the Child Care Licensing Central Office number shall be posted in a conspicuous place in the OST facility. The "Hot Line" number is 1-800-482-5964 and the Licensing Central Office number is (501) 682-8590 or toll free 1-800-445-3316.

110 Criminal Records Check

1. The following persons shall apply to the Identification Bureau of the Arkansas State Police for a nationwide criminal record check, to be conducted by the FBI, which shall include a fingerprint check: (The individual is responsible for the cost of a nationwide check. Each request must be accompanied by a check or money order made out to the Arkansas State Police.)

   Fingerprints submitted will be used to check the criminal history records of the FBI. Individuals with results showing a prohibited offense shall be advised to contact the Licensing Unit for procedures to obtain the results and for procedures to update or make corrections to the record of their individual history.

a. Each applicant to own or operate OST facility.	Initial application only
b. Staff who have not been a resident of the State of Arkansas for the five (5) preceding years	Within 10 days of hire/start date
c. Administrative persons who have direct contact with participants.	If the person has not been a resident of Arkansas for 5 years.
d. Therapist or other persons who have supervisory control, disciplinary control over participants or are left alone with participants.	If the person has not been a resident of Arkansas for 5 years, then at the time they begin to provide services or begin to participate in program activities

2. The following persons shall be required to have their background reviewed through Criminal Records check (which includes the Arkansas Sexual Offender Registry) conducted by the Arkansas State Police.

a. Each applicant to own or operate OST	At application and every 5 years

facility	thereafter
b. Staff and applicants for employment in ~~a~~ an OST facility	Within 10 days of hire/start date and every 5 years thereafter
c. Administrative persons who have direct contact with participants	Within 10 days of hire and every 5 years thereafter
d. Therapist or other persons who have supervisory or disciplinary control over participants, or are left alone with participants	Within 10 days of the time they begin to provide services or begin to participate in program activities and every 5 years thereafter

3. 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.

4. No person shall be eligible to be an OST 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- 1st 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

5. No person shall be eligible to be an OST 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	§5-3-301

100.110	
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

6. If the licensee wishes to employ an individual with a conviction or plea of guilty or nolo contendere for the following nonviolent offenses, they shall submit a written request for a waiver prior to employment. § 20-38-103 (e) (3) (a) Act 990 of 2013
    a. Theft by receiving § 5-36-106
    b. Forgery § 5-37-201
    c. Financial identity fraud § 5-37-227
    d. Resisting arrest § 5-54-103
    e. Criminal impersonation in the second degree § 5-37-208(b)
    f. Interference with visitation § 5-26-501
    g. Interference with court-ordered visitation § 5-26-502
    h. Prostitution § 5-70-102
    i. Patronizing a prostitute § 5-70-203

    The waiver may be approved if all of the following conditions are met:
    - The individual has completed probation or parole supervision
    - The individual has paid all court ordered fees, fines and/or restitution
    - The individual has fully complied with all court orders pertaining to the conviction or plea

7. The waiver will be revoked if after employment the individual pleads guilty or nolo contendere or is found guilty of any prohibited offense (including the list above a-i) or has a true or founded report of child maltreatment or adult maltreatment in a central registry.

8. The request for waiver and certification of approval shall be kept in the individual's file for the term of employment and three years after termination of employment.

9. If approved, the waiver is not transferable to another licensed facility.

10. Any person who has pled guilty, nolo contendere, or who has been found guilty of any one of the offenses listed as prohibited above (Section 110.5, 0-62) 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 more than 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.

11. 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 ORGANIZATION AND ADMINISTRATION

201 Administrative Procedures

1. The Owner and/or Board of Directors shall be responsible for operating the facility and shall have final responsibility to ensure that the facility meets licensing requirements. Names, addresses and telephone numbers of Board members shall be provided to the Licensing Specialist.

2. The facility shall provide a written procedure for reporting suspected of child maltreatment. This procedure shall be followed and a call made to the Hot Line whenever there is a suspicion of child maltreatment (1-800-482-5964). These reports of child maltreatment shall include all allegations made to the licensee by parents, staff members or the general public. The licensee should call Child Care Licensing for guidance if there is any question about whether or not the Hot Line should be called regarding any situation where potential child maltreatment is involved.

3. The facility shall provide a written procedure for reporting suspected licensing violations. Serious licensing violations shall be reported to the Licensing Unit. These include, but are not limited to, violations relating to transportation, inappropriate behavior guidance, inadequate supervision, staff/participant ratio violations or any other violations or any other violation that could imminently affect the health and safety of participants.

4. Parents shall be informed in writing upon enrollment of their child that participants 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. Participant interviews do not require parental notice or consent.

300 PERSONNEL

301 Staff/Participant Ratio

1. A licensee shall not have more participants in care at any one time than the maximum specified on the license.

2. The following staff/participant ratios shall be maintained:

Ages of Participants	Number of Staff	Number of Children
a. Kindergarten and above	1	18

Providers who were licensed to serve school age participants prior to the effective date of this rule will have four years from the implementation of this rule to comply with the new ratio requirement.

3. All participants shall be adequately supervised at all times. Though participants are generally required to be within the sight or hearing of staff, OST participants, second grade and above, may be provided opportunities to take part in short-term activities not within the sight and hearing of OST staff. Such short-term activities include but are not limited to going to a restroom, transitioning to other activities, returning to a classroom within a school building, etc. In order to minimize the risks associated with such short-term activities, the following provisions must be adhered to:

    a. The appropriateness of the degree of direct staff supervision required shall be based on an individual participant's ability to handle such responsibility. Only participants able to handle such responsibility shall be provided it.
    b. Participants shall be accompanied at a minimum by another participant when engaging in short term activities (as defined above).
    c. Systems of monitoring, (ex. use of two-way communication devices) shall be in place.
    d. Staff shall make contact with the participant at least every ten (10) minutes. If the participant is anticipated being gone longer than ten (10) minutes, prior to releasing the participant , staff should make contact with the responsible adult

(ex. teacher) that will provide supervision during this extended time to ensure that adequate supervision provisions are in place.

4. DDS (Developmental Disabilities Services) staff/ participant ratios shall be maintained in all facilities that are licensed or certified by both Child Care Licensing and DDS.

5. Additional staff provisions shall be made for enrollment of participants with disabilities, or participants who require individual attention.

302 Maximum Group Size

1. Maximum group size limitations do not apply during meal times, rest times, transitions, outdoor time periods, field trips, or the length of a special occasion, including but not limited to celebrations or visits from guest speakers.

2. Group size shall be limited to 2 times the number of children allowed with one staff member. This does not apply to periodic or special group activities. Existing structures licensed prior to November 1, 2002 are exempt from this requirement. However, any expansions, additions or any newly licensed structures effective November 1, 2002 shall be in compliance.

303 Director

1. There shall be a Director/Site Supervisor who shall be responsible for:

   a. Administering, planning, managing and controlling the daily activities of the OST facility
   b. Ensuring that the facility meets licensing requirements
   c. Ensuring the health and safety of participants
   d. Providing prudent supervision of all staff and volunteers

2. Directors shall be age twenty-one or older, and provide documentation of one of the following educational levels:

   a. Bachelor's Degree or higher Degree in Early Childhood, Elementary Education, Child/Youth Development or a related field from a regionally accredited college or university. (Determination of "related field" shall be made by the Division of Child Care & Early Childhood Education.)
   b. Bachelor's Degree in a non-related field from a regionally accredited college or university plus one of the following:
      - Four years of experience in early childhood education or elementary education
      - Child Development Associate Credential (CDA) or Out of School Time Credential
      - Nine college hours of credit in child/youth development
   c. Associate's Degree in Early Childhood, Child or Youth Development or a related field, plus six years of experience in Early Childhood Education or Elementary Education
   d. Eight years of experience in Early Childhood or Elementary Education and completion of one of the following, within two years of employment:
      - Out of School Time Credential

- Child Development Associate Credential
- Director's Credential or the equivalent
- Technical Certificate in Early Childhood Education

Individuals who have been employed in the position of Director prior to implementation of this rule will not be required to meet the new director's qualifications. These individuals may change employers after this date and still qualify as director.

3. A director or assistant director/site supervisor, who meets director qualifications, must be present at each licensed site a minimum of 50% of the center's primary operational day, on a routine basis.

4. When the director and assistant director/site supervisor are away from the center, there shall be a person in charge who shall have the ability and authority to carry out daily operations. The person in charge shall be age twenty-one (21) or older.

5. All new directors and assistant directors/site supervisors shall attend New Director's Orientation, PAS (Program Administration Scale) or YPQA form B, and ERS (Environment Rating Scale) training or introduction to YPQA (Youth Program Quality Assessment) within six months of employment. Programs operating seasonally (90 days or less within a calendar year) must, at a minimum, have Directors/Site Directors attend OST Director's "Essentials" within the first thirty (30) days. This is an orientation class sponsored by the Division. Proof of attendance shall be maintained in the director's file.

6. The director and assistant director/site supervisor shall obtain fifteen (15) clock hours in early childhood education or child/youth development each year. Training shall be registered with the Division of Child Care and Early Childhood Education Professional Development Registry or Department of Education or Department of Higher Education approved. Documentation of training shall be maintained and available for review.

7. Topics appropriate for continuing early childhood education or child/youth development shall include, but are not limited to the following:

   a. Child growth and development;
   b. Nutrition and food service;
   c. Family communication and involvement;
   d. Curriculum development and implementation;
   e. Developmentally appropriate practice and learning environments;
   f. Behavior guidance and positive interaction;
   g. Emergency care and first aid;
   h. OST Program planning, management and leadership of early childhood/OST programs.
   i. Building partnerships with schools and the larger community
   j. Creating a culturally competent OST Program

8. The Licensee shall notify the Licensing Unit of any change in the person named as director and/or assistant director/site supervisor within five (5) calendar days.

304 Staff Requirements

1. A person shall be considered a staff member if they have disciplinary or supervisory control over participants, is left alone with participants at any time, or is counted in staff/ participant ratio, regardless if they are paid by the facility or not.

2. Staff members in an OST facility shall be age 18 years or older. Exceptions may be allowed for individuals sixteen (16) or seventeen (17) years of age to work in an OST facility if they meet all of the following criteria:

    a. The individual shall not have disciplinary control over participants.
    b. The individual shall not be left alone with participants at any time.
    c. The individual shall be under the direct supervision of an adult (18 years of age or older) staff member at all times.
    d. The individual shall meet all other requirements.
    e. The individual shall be a high school graduate, have a GED or be enrolled in a high school or GED curriculum.

3. All staff members who work directly with participants shall have a high school diploma or GED or shall be enrolled in a high school or GED curriculum and complete the curriculum within one year of hire.
4. All staff members who work directly with participants shall obtain at least fifteen (15) hours of training registered with the Division of Child Care and Early Childhood Education Professional Development Registry or Department of Education or Department of Higher Education approved training each year in continuing Early Childhood Education or child/youth development. This training shall be appropriate for working with school age children/youth.
5. All staff members caring for participants shall be able to perform necessary job functions.
6. Staff shall not engage in behavior that could be viewed as sexual, dangerous, exploitative or physically harmful to participants. A caregiver shall not use profanity or speak in an abusive manner when participants are present.

5. No caregiver shall consume or be under the influence of illegal drugs. (A drug test may be required if there is reasonable cause to suspect violation of this requirement and the issue cannot otherwise be resolved.) No caregiver shall consume or be under the influence of alcohol while delivering care. No caregiver shall consume or be under the influence of medications (prescription or non-prescription) which impair their ability to provide care.

305 Volunteer Requirements

1. Volunteers are those individuals who have routine contact with participants and assist staff in the facility. If they are left alone with participants considered in the staff/participant ratios or given supervisory/disciplinary control over participants they shall be considered staff and must meet the requirements for personnel (Section 300) and staff requirements (Section 303).

2. All volunteers in an OST Facility shall be 18 years or older unless the volunteer is under the direct supervision of the director or site supervisor and has been approved on an individual basis by the Child Care Licensing Unit.

3. Volunteers, who have routine contact with children, shall have on file a child-maltreatment Central Registry check. An exception shall be given to parents who volunteer to assist on field trips, but are not left alone with participants***.*** Child maltreatment Central Registry checks for volunteers under age 18 must include a parent's signature.

4. Volunteers who are left alone with children must have an orientation regarding program policies and practices that are related to the scope of the services they will be providing at the facility.

5. Individuals who provide health services or program enrichment activities on a limited basis are not considered volunteers. The facility shall retain a register of such persons listing name, organization, address, telephone number, date and time in the center. (Note: This section does not apply to therapists or others who have routine contact with participants. Therapists who are not left alone with participants are required to have child maltreatment background checks. Therapists who are left alone with participants at any time are subject to all background check required for personnel. The therapist is entitled to a copy of the initial background/maltreatment check results, and may share a copy with other facilities the therapist may be working in.)

306 Student Observers

1. Students visiting the OST Facility on a regular or periodic basis to **observe** program activities, or for similar purposes, shall not be counted in the staff/participant ratio, shall not have disciplinary control over participants and shall not be left alone with participants. These individuals shall have a Child Maltreatment background check on file.

2. Students that are conducting practicum, student teaching, or working in the same capacity as a staff member or volunteer must meet the criteria in the appropriate section. (Sections 304 and 305)

307 Professional Development

1. All directors, site supervisors, and staff who provide direct care to participants shall be registered with the Division of Child Care and Early Childhood Education Professional Development Registry within 30 days of hire and all training shall be registered with the Division of Child Care and Early Childhood Education Professional Development Registry or Department of Education or Department of Higher Education approved.

2. All new staff shall have a probationary period of at least 30 days, but no more than six months, during which they are closely supervised, mentored, and evaluated. Evaluations shall be documented and maintained in the employee file.

3. All new staff members who provide direct care to children shall receive a basic orientation to facility management policies, center schedules, minimum licensing standards, and emergency procedures prior to providing care. This shall be documented in the employee file.

4. All new staff, including volunteers who are counted in the ratios shall receive the following orientation (unless the staff has prior documented training in the required areas).

   a. Introduction (8 clock hours) to include the following, which shall be completed before being left alone with participants:

   - Proper supervision of participants
   - Behavioral guidance practices
   - Shaken baby syndrome; which includes prevention (Carter's Law, Act 1208)
   - Emergency procedures in the event of severe weather, or fire, including evacuation procedures and routes, and location and use of fire extinguishers.
   - Mandated reporter training
   - Administering medication
   - Caring for participants with special needs / care plans
   - Transportation and car seat safety
   - Policies regarding release of participants to authorized individuals

See Division Web Site for a list of courses, that The Division maintains contracts for, which meet the above requirements.

   b. All staff shall have 15 hours of job specific training each calendar year for the ages of participants they work with. This shall be training focused on their job responsibilities.

See Division Web Site for a list of courses, that The Division maintains contracts for, which meet the above requirements.

5. The director, assistant director/site supervisor, and 50% of the facility staff that are on site at any given time shall have a certificate of successful completion of first aid and CPR from an approved organization.

   a. The curriculum shall conform with current American Heart Association or American Red Cross guidelines.

   b. The curriculum shall require hands on, skill-based instruction, as well as practical testing. Training and certification that is provided solely "on-line" will not be accepted.

c. The instructor shall be qualified and authorized to teach the curriculum and shall be certified by a nationally recognized organization. (Including but not limited to: Health and Safety Institute; EMS Safety Services, Inc.)

400 PROGRAM

401 Program Requirements

1. The OST program shall develop a written weekly routine listing developmentally appropriate activities for participants and provide a copy of the routine of weekly activities to parents when they enroll the participants.

2. Each OST Program shall be equipped with supplies, resources and equipment to take care of the needs of the total group and to provide each participant with a variety of activities during program operations.

3. The OST program shall post a daily schedule in each program space that reflects activities that promote physical, social, emotional, cognitive language/literacy, and cultural. Activities shall:

    a. The program shall organize its environment so that participants may participate in activities individually and in small groups, so that the development of each participant is supported. Be flexible and shall provide some opportunities for a participant to choose how he will spend his time.
    b. Provide a variety of activities suitable to the ages and interests of the participants.
    c. Be age and skill level appropriate
    d. Offer project-based, experiential activities that promote creativity and youth self-expression
    e. Offer short and long term projects
    f. Offer opportunities for alternating periods of indoor and outdoor activities, weather permitting
    g. Offer alternating periods of active and quiet activities
    h. Offer a balance of large and small muscle activities
    i. Offer more than one option for an activity including individual, small group or large group activities

4. The OST program shall offer activities that target life skill development that:

    a. Encourages development of critical thinking skills
    b. Offers a progression of skill levels within activities

5. The OST program shall offer activities that integrate opportunities throughout the program for the participants to develop personal responsibility, self-direction and leadership by providing opportunities to:

    a. Work on self-directed projects
    b. Make content choices

c. Plan and conduct activities
d. Offer opportunities for leadership roles throughout the program
e. Support participant leadership through the policies and engagement strategies of the program
f. Form special clubs/groups within the program
g. Plan and participate in community service

6. The OST program shall provide activities that provide recognition of achievement and participation that:

   a. Promote diversity in cultures, religion, ethnicities, abilities, etc.
   b. Are representative of the varying ages, cultures, and abilities of the participants
   c. Are adaptable for different levels of ability

7. School age participants who leave the OST Program to participate in other activities shall have written permission from the parents naming the activity, date, time of leaving and returning and method of transportation.

8. Each facility is required to provide at least four Division approved opportunities to increase parental/family involvement. Examples of approved activities are listed below. (See Better Beginnings website for resources. www.arbetterbeginnings.com)

   - Parents are allowed to observe, eat meals or snacks with a participant, or volunteer in the program.
   - Conferences are held at least once a year and at other times, as needed to discuss participant's progress, accomplishments and difficulties.
   - A parent resource area is available with books, pamphlets or articles on parenting and child/youth development.
   - Parent meetings are held with guest speakers or special events, for example, open house or participant's programs.
   - Parents are informed of the facilities programs and activities through a parent's bulletin board or regular newsletter.
   - Parents participate in program and policy development through board involvement, planning meetings or questionnaires.

9. There shall be sufficient lighting to provide adequate supervision of the participants.

10. Parents shall not be denied access to their child/youth at any time during hours of operation. **(Clarification: The intent of this rule is to ensure that the parent(s) or guardian(s) is able to have contact with their child during hours of care. It is not intended to be a determining factor in child custody/visitation matters, nor should it be used to circumvent court ordered custody/visitation rights or schedules. Facilities should encourage parents to resolve custody/visitation issues outside of the care environment. Parents should be informed that continuing problems could result in the dismissal of their child.)**

11. Staff shall not release a participant to anyone who is not immediately recognized as the

participant'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 participant's data sheet

12. Verification of permission for persons not on the authorized list shall be obtained by the person in charge by calling the parent at a number listed in the participant's record. The person in charge shall view an official picture ID of the individual to verify identity.

13. Photos or video recordings shall not be made of any participant without prior written permission from the parent or guardian.

14. Photos or video recordings of participants shall not be placed on social media or other websites without prior written parental permission.

402 Outdoor Time

1. For full time programs, there shall be a total of at least one hour of outdoor activity time per day in suitable weather. For programs operating part day schedules (five hours per day or less) a minimum of 30 minutes of outdoor activity shall be provided in suitable weather. Such time shall be under the supervision of an adult to encourage physical activity and the promotion of gross motor skills.

2. When making a determination if participants should have outdoor time, staff shall consider the following environmental factors:

   a. When the heat index is forecast to be ninety (90) degrees or above, it is recommended that outdoor time be scheduled during early morning hours or the length of time spent outdoors should be reduced to avoid heat stress.
   b. When outdoor time occurs during the hotter part of the day, it is recommended that participants have shaded area, an ample supply of water and should be monitored closely for signs of heat stress.
   c. When outdoor time occurs during the winter months and when temperatures are extremely cold, it is recommended that the time scheduled for outdoor time be reduced or suspended depending on the temperature and other weather conditions.

403 Screen Time

1. An OST Program shall ensure that their weekly schedules are constructed in a way that no more than 25% of the program's total weekly program hours of operation allow participants to engage or use electronic media, solely for recreational purposes. (Participants who require use of electronic devices for communication or navigational purposes shall be exempt.)

2. If television programming, videos, DVDs, or computer programs are built into an OST Program as an activity option, the content shall be age-appropriate, non-violent, and should

have educational value.

3. Television and software rating systems shall be used to determine appropriate use.

4. Participants shall not be required to participate in recreational screen time activities and shall be offered other choices.

404 Field Trips

1. The safety and welfare of participants during field trips is in the hands of the staff on the trip. The following shall be met:

    a. Safety risks, field trip rules, and behavior expectations shall be discussed with participants prior to field trip departure.
    b. Accountability of children is tightly controlled and frequent "head counts" shall be conducted while on the trip, including loading and unloading upon arrival and departure, and during periods of transition.
    c. Regardless of which mode of transportation is used, all vehicles shall be kept in proper operating conditions at all times.
    d. Ratios shall be adjusted to a 1:9 depending on the risk associated with the field trip activity and/or to maintain proper supervision of all participants in attendance on the field trip. Risky activities include but are not limited to rock/mountain climbing, horseback riding, canoeing, etc.

2. Written permission from parents shall be on file for each field trip. If the facility has a scheduled, routine activity planned to the same location a single permission form may be used for each program year. The written permission shall include:

    a. Name and description of activity
    b. Date and time of leaving and returning
    c. Method of transportation to the facility

500 BEHAVIOR GUIDANCE

501 Behavior Guidance Requirements

1. Behavior guidance shall be:

    a. Individualized and consistent for each participant
    b. Appropriate to the participant's level of understanding
    c. Directed toward teaching the participant acceptable behavior and self-control

2. Physical punishment shall not be administered to participants.

3. The Out-of-School Time (OST) Program shall offer a nurturing, respectful, supportive and responsive environment that supports frequent interactions between the participants and staff. Staff shall:

a. Support participants in developing an understanding of self and others by assisting the participants in sharing ideas, experiences and feelings
b. Provide participants age-appropriate opportunities for growth and development of their social and communication skills
c. Assist the participants in solving problems
d. Foster creativity and independence in routine activities that shall include tolerance for mistakes
e. Treat and model equality of all participants regardless of race, religion, culture, gender and ability
f. Offer verbal encouragement to the participants during the course of an activity
g. Use respectful voice tone and positive guidance practices
h. Promote teamwork among participants

3. For behavior guidance practices used by the OST Program, the program shall:

   a. Discuss the behavior guidance practices of the OST Program with the parents of each participant at the time of enrollment
   b. Provide a copy of the behavior guidance practices in writing to the parents
   c. Have each parent verify in writing their receipt of a copy of the behavior guidance practices
   d. Maintain the signed verification in the participant's record

4. The OST Program shall guide the behavior of the participants based on an understanding of the participant's individual needs and stages of development by:

   a. Supporting the participant's developmentally appropriate social behavior, self-control and respect for the rights of others
   b. Ensuring that the behavior management and discipline practices are fair, reasonable, consistent and related to the participant's behavior
   c. Ensuring that staff are responsible for implementing the behavior management and discipline practices of the OST Program
   d. Ensuring that staff do not administer discipline that is cruel, unusual, hazardous, frightening or humiliating

6. Acceptable behavior guidance techniques include:

   a. Look for appropriate behavior and reinforce the participant with praise and encouragement when they are behaving well.
   b. Remind the participant on a daily basis of the rules by using clear positive statements regarding how they are expected to behave rather than what they are not supposed to do.
   c. Attempt to ignore minor inappropriate behavior and concentrate on what the participant is doing properly.
   d. Use brief supervised separation from the group only when the participant does not respond to a verbal command which instructs the participant as to how he or she is supposed to behave.

e. When a misbehaving participant begins to behave appropriately, encourage and praise small steps rather than waiting until the participant has behaved appropriately for a long period of time.
f. Attend to the participants who are behaving appropriately and other participants will follow their example in order to obtain your attention.

7. The following activities or threats of such activities are unacceptable as behavior guidance measures and shall not be used for participants. These include, but are not limited to the following:

   a. Using physical punishment such as biting, or biting back, jerking, swatting, pulling hair, twisting arms, shaking, spanking, slapping, hitting, striking, kicking or exercising other means of inflicting physical or emotional pain or causing bodily harm
   b. Using a physical restraint method that may cause injury to the participant
   c. Using mechanical restraint, locked time-out room or closet
   d. Washing mouth with soap
   e. Taping or obstructing a participant's mouth
   f. Placing unpleasant or painful tasting substances in mouth, on lips, etc.
   g. Profane or abusive language
   h. Isolation without supervision
   i. Placing participant in dark area
   j. Yelling (This does not include a raised voice level to gain a child's attention to protect the participant from risk of harm.)
   k. 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.)
   l. Associating punishment with rest, toilet training or illness
   m. Denying food (lunch or snacks) as punishment or punishing participants for not eating. Participants shall not be forced or bribed to eat.
   n. Shaming, humiliating, frightening, physically or mentally harming participants or labeling participants
   o. Covering the faces of participants with blankets or similar items

600 RECORDS

601 Record Requirements

1. All staff, participant and facility records shall be kept and made available to the Child Care Licensing Unit on request. The records shall be maintained for three (3) years unless otherwise indicated.

2. Licensing compliance forms (DCC-521) shall be available at the facility for 3 years. The facility shall advise parents in writing that the compliance forms are available for review upon request.

3. The facility shall maintain daily attendance records on all participants as follows:

a. Participants shall be signed in and out daily by a parent, guardian, or designee. Electronic sign in and out systems will satisfy this requirement.
b. The record shall include the date and time of arrival and departure.

602 Facility Records

1. Facility Records shall be maintained on site and include:

    a. Attendance records on all participants
    b. Transportation rosters, if applicable (maintained for one year)
    c. Verification of current vehicle registration, if applicable
    d. Verification of required commercial vehicle insurance coverage, if applicable
    e. Verification of required Child Care Liability Insurance
    f. Verification of current pet vaccinations, if applicable
    g. Verification of annual fire department approval
    h. Verification of annual health department approval
    i. Verification of zoning approval (maintained as part of permanent record)
    j. Verification of annual approval by the Boiler Inspector Division of the Department of Labor
    k. Mobile Home Commission approval for double wide manufactured homes, if applicable (maintained as part of permanent record)
    l. Record of emergency drills
    m. Plans and procedures of Emergency Preparedness
    n. Procedures for reporting allegations of child maltreatment
    o. Procedures for reporting suspected licensing violations
    p. Licensing compliance forms
    q. Log of Product Recall and Safety Notices from CPSC or Attorney General's Office
    r. Articles of Incorporation, if applicable (maintained as part of permanent record)
    s. Current list of names, addresses and phone numbers of the Board of Directors, if applicable

603 Staff Records

1. Staff records may be maintained off site, unless otherwise noted, and shall contain the following:

    a. Name, date of birth, address and telephone number
    b. Education, training and experience, including a copy of the GED or high school diploma (If these documents are no longer available, proof of reasonable effort to obtain the documentation is acceptable.) (**Clarification:** Training hours will be counted on a calendar year basis or by the facility's operating schedule if they do not operate year round.)
    c. Employment related information for previous six (6) years, with written documentation of verification of employment and reference checks
    d. Attendance record, listing days and hours worked
    e. Date of employment and date of separation

f. Documented training or continuing education; i.e., orientation, in-service training, and workshop documentation, which shall include title of workshop, presenter, hours of training and date
g. Initiation of Criminal Record Checks and Central Registry Checks and the results obtained when received
h. Verification of completion of the required transportation training and a readable, current copy of the driver's license for all staff who transport participants (copy must be on site)
i. Verification of First Aid and/or CPR for applicable staff (copy must be on site)
j. Documentation of new employee evaluations.

604 Participants' Records

1. The OST Program shall maintain a record for each participant in care which shall be on site. Records for participants no longer enrolled may be maintained off site. Participants' records shall contain the following information:

   a. Application form which includes participant's name, date of birth and address, name of parent or guardian, telephone numbers (home and business), work hours of parents or guardians, and date of enrollment in facility.
   b. The name, address, and telephone number (home and business) of a responsible person to contact in an emergency if the parent or guardian cannot be located promptly.
   c. Name, address and telephone of participant's physician or emergency care facility.
   d. Written permission of parent or guardian authorizing emergency medical care and transportation of participant for emergency treatment (This authorization shall accompany participants anytime they are transported.)
   e. Name(s) of persons authorized to pick up participant.
   f. Permission slips signed by parent or guardian authorizing the participant to be taken on specific field trips.
   g. Pertinent medical history on the participant.
   h. An authorized record of up-to-date immunizations or documentation of a religious, medical or philosophical exemption from the Arkansas Department of Health (Updated immunization schedules will be provided as changes are received from the Arkansas Department of Health.)
   i. A record of all accidents, incidents, or injuries indicating the location, time of day, area or piece of equipment where the incident occurred. A copy of this shall be given to the parent on the day of occurrence.
   j. Any legal or medical documentation that has been given to the facility, by the parent or legal guardian, regarding the care of the participant.
   k. Written permission for the facility to photograph or video tape their child, if applicable.
   l. Written permission for the facility to place photos and video recordings of their child on social media websites, if applicable.

700 NUTRITION

701 Nutrition Requirements

1. The OST Program shall ensure that during all day program operations that a lunch and a

mid-morning and mid-afternoon snack is served to each participant.

2. Breakfast, lunch, snacks and evening meals shall each meet *current* U.S. Department of Agriculture guidelines, including portion size. (See Appendix C) Menus for all food service shall be posted. If sack lunches are utilized, the facility shall ensure that they also meet these requirements. Milk shall be served to each participant during the day. Exceptions may be made for participants who suffer allergies to milk. The facility shall obtain written instructions for allergy substitutions.

3. Breakfast may be served to all participants rather than a morning snack provided there is no more than 3 hours between the beginning of breakfast and the beginning of lunch.

4. All food service surfaces shall be kept sanitary.

5. Food shall be served on individual plates, bowls, or other dishes that can be sanitized or discarded.

6. Food and drinks which are not available to the participants shall not be consumed by staff in the participants' presence.

7. All food brought in from outside sources shall come from Health Department approved kitchens and shall be transported as per Health Department requirements, or the food shall be in an individual, commercially pre-packed container. (This does not include individual sack lunches brought from home.)

8. All refrigerators used for food storage shall be maintained at a temperature of 41 degrees or below, and all freezers used for food storage shall be maintained at a temperature of 0 degrees or below.

9. Vending machines are acceptable provided they are not the only source of snacks/or beverages.

10. Staff shall provide supper to participants during the evening meal hours.

11. Staff shall provide snacks to participants in attendance for more than 2 ½ hours prior to bedtime.

800 BUILDINGS

801 Building Requirements

1. OST Facilities shall comply with the Minimum Requirements of the currently adopted Arkansas Fire Prevention Code as administered by local fire department or by the State Fire Marshal, who has final authority. Written verification of annual approval shall be maintained on file. **(Note that the State and Local Fire Codes may not allow the use of basements or floors above ground level by participants, first grade and younger,**

unless there is a ground level exit.)

2. State Health Department requirements shall be met. Written verification of annual approval shall be maintained on file.

3. Department of Labor, Boiler Inspection Division requirements shall be met. All water heaters and any other boilers in licensed OST Facility settings shall be inspected on an annual basis and/or upon installation. Verification that initial inspection has been scheduled and annual approval shall be maintained on file. 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.)

4. All space used by the OST Program shall be kept clean and free of hazardous or potentially hazardous objects. (These objects include, but are not limited to, poisonous substances, firearms, explosives, broken toys/equipment, or other objects that could be harmful or dangerous, if they are determined to be accessible to participants.)

5. Twenty-five square feet per participant of usable floor space shall be required for indoor activities. This does not include bathrooms, kitchen and hallways. Usable space in the OST Program shall include areas in the program used for storage of programmatic materials which are accessible to participants. This does not include closets or storage space for equipment that is not in use.

6. If a facility utilizes the out-of doors as its major program component for school-age participants, covered pavilions and other roofed structures shall provide 25 square feet per participant.

7. Separate space shall be provided for the isolation of participants who become ill and shall be located in an area that can be supervised at all times by a staff member.

8. All parts of the OST Facility used by the participants shall be well heated, air conditioned, lighted and ventilated and maintained at a comfortable temperature. Glass doors shall be clearly marked. When windows and doors are used for ventilation, they shall be screened and shall not present a safety hazard.

9. Floor furnaces, gas heaters, electric heaters, hot radiators, water heaters, air conditioners and electric fans shall have guards and shall not present a safety hazard. Portable fuel fired heaters shall not be used.

10. It is recommended that if natural gas or propane is used, the facility's heating & ventilation systems shall be inspected and cleaned (if necessary) before each heating season by a qualified HVAC technician.

11. Carbon monoxide detectors shall be placed in facilities according to manufacturer's recommendations if one of the following situations applies:

a. Facilities using wood, propane, natural gas or any other product as a heat source that can produce carbon monoxide indoors or in an attached garage.
b. Any situations where carbon monoxide detectors are required by state or local law

12. Floors, ceilings and walls shall be in good repair and kept clean. Paints used at the facility shall be lead free.

13. An OST Facility shall have an operable telephone on site all hours participants are in care. The Licensee 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.)

14. The following structures shall not be used as OST Facilities:

    a. Manufactured homes constructed prior to June, 1976
    b. Manufactured homes constructed with metal roofs and outside walls
    c. Single-wide manufactured homes
    d. Portable storage type buildings

15. Double-wide manufactured homes may be considered provided they are tied down in accordance with the manufacturer's tie down specifications manual. Any new applicant for an OST Facility that requests the use of a manufactured home shall obtain an inspection at the applicant's expense from the Arkansas Manufactured Home Commission.

16. Manufactured homes currently licensed as child care facilities shall be tied down as recommended by the Arkansas Manufactured Home Commission.

17. Portable classroom buildings are not considered manufactured homes, but do require Fire Department approval. Portable classroom buildings installed after 11-1-2002 shall have Fire Department approval prior to purchase and installation.

900 Playgrounds/Outdoor Learning Environment

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". However, the following are minimum requirements and shall be met.

Please note that these requirements do not mandate the use of any playground equipment that would require use zones and protective surfacing. Numerous options for suitable playground environments are available and acceptable.

Examples of such activities are:

- Sand boxes
- Activity walls at ground level
- Art easels
- Balls & games

- Play houses
- Nature walks
- Use of the approved natural environment for outdoor learning

The use of public playgrounds and other play environments away from the facility is not recommended as these environments may not meet acceptable safety standards. If these playgrounds are used staff should provide close supervision and not allow children to use any equipment that appears unsafe (eg: broken equipment, sharp objects, strangulations hazards, etc.). Using playgrounds and other play environments away from the facility is considered a field trip and all field trip requirements shall be followed.

901 Layout & Design

1. A diagram of the playground shall be submitted, clearly identifying the perimeter of the playground, with measurements, and identifying each piece of equipment used by the children enrolled at the licensed facility. This documentation shall be in the form of a satellite photo from an internet site such as Google Maps, or a diagram if a satellite photo is not available.

2. Any changes in the playground area boundaries and/or equipment requested must be submitted in writing and approved prior to use.

3. All equipment and protective surfacing shall be installed and maintained according to manufacturer's guidelines.

4. The play area/outdoor learning area shall be fenced or otherwise enclosed and provide at least 75 square feet per child present on the playground at any time.

5. There shall be an outside exit from the play area.

6. The area shall be well drained.

7. There shall be equipment and activities appropriate for the age and number of participants enrolled in the facility.

8. Separate play areas or time schedules shall be provided if, infants and toddlers share playgrounds with older participants.

9. All outdoor areas used by participants shall be properly maintained.

902 General Hazards

1. The area shall be free of hazards or potentially hazardous objects.

2. Equipment that has been determined by the Division to be unsafe for the participants in the licensed facility to use shall be removed from the play area, or enclosed by a fence or

other suitable barrier so the participants will not have access to it.

3. All newly purchased playground equipment designed for participants to play or climb on, such as slides, swings, composite structures, etc., shall be commercially manufactured and certified to meet ASTM or CPSC standards for public playgrounds. Equipment in place prior to January 1, 2014 may continue to be used provided it meets all other licensing requirements.

4. Equipment, which is designed to be anchored, shall be properly anchored so that the anchoring devices are below ground level.

5. Sand for playing shall be kept safe and clean.

6. Paint on equipment shall be lead free.

7. All fasteners, including S-hooks, shall be securely tightened or closed.

8. There shall be no sharp points, corners, edges, or splinters.

9. Equipment shall not have protrusion hazards. (A protrusion is a projection which, when tested, is found to be a hazard having the potential to cause bodily injury to a user who impacts it.)

10. Equipment shall not have entanglement hazards. (An entanglement is a condition in which the user's clothes or something around the user's neck becomes caught or entwined on a component of playground equipment.)

11. Trampolines shall not be used. (Therapeutic use of trampolines is acceptable if supervised by the therapist on a one-on-one basis.)

12. Ball pits shall not be used. (Ball pits are large areas or "pits" filled with balls intended for children to jump in and play. Therapeutic use of ball pits is acceptable if supervised by the therapist on a one-on-one basis.)

13. Wading pools shall not be used. This does not prohibit the use of sprinklers and water play.

14. To prevent entrapment, there shall be no opening(s) between any interior opposing surfaces between 3.5 and 9 inches. (Openings in equipment that might allow a child's body to pass through, but not their head.) Ground bounded openings are exempt.

15. Providers/caregivers shall be aware of and remove when possible any hazardous items children may wear on play equipment such as helmets, drawstrings, and other accessories around the neck that may cause a strangulation/entanglement hazard.

16. All participants shall wear properly fitted and approved helmets while riding on bicycles and when using roller skates, skate boards, roller blades and scooters. Helmets shall be removed as soon as participants stop riding this equipment. Helmets shall meet CPSC standards.

17. All soccer goals shall be commercially manufactured and installed and anchored according to manufacturer's guidelines.

903 Balance Beams

1. Balance beams shall not be higher than 12 inches.

2. Balance beams shall have use zones with protective surfacing.

904 Slides

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

2. Slides shall have a transition platform of at least 14 inches deep for school age participants.

905 Swings

1. The following swings shall not be used for any ages:

    a. Multi-occupancy swings designed to hold more than one participant, except tire swings
    b. Heavy molded swings such as animal figure swings
    c. Free swinging rope (Tarzan ropes)
    d. Swinging exercise rings
    e. Trapeze bars
    f. Swings attached to a composite structure (Composite Structure is defined by CPSC as, "Two or more play structures attached or functionally linked, to create one integral unit that provides more than one play activity.")

2. There shall be no wood or metal swing seats.

906 Climbing Equipment

1. Flexible grid climbing devices, such as rope or chain ladders, climbing ropes, etc., shall be securely anchored at both ends.

2. Sliding poles shall have no protruding welds or seams along the sliding surface and the pole shall not change directions.

907 Merry Go Rounds

1. The only merry-go-rounds allowed are portable merry-go-rounds not designed to be anchored.

2. Merry-go-rounds shall have handgrips or other secure means of holding on.

908 Seesaws

1. Seesaws without spring centering devices shall have shock absorbing materials, such as partial tires embedded in the ground underneath the seats or secured to the underside of the seats.

2. Hand holds shall be provided for both hands at each seating position and shall not turn when grasped.

3. Hand holds shall not protrude beyond the sides of the seat on seesaws.

909 Protective Surfacing

1. There shall be use zones and protective surfacing under and around all equipment that is over 18 inches in height at the highest accessible point. The highest accessible point is defined as the highest surface on the piece of equipment where participants will sit or stand when the equipment is used as intended. Use zones shall extend a minimum of 6′ in all directions (unless otherwise specified) from the perimeter of the equipment. (Playground equipment that is between 18 inches and 24 inches at the highest accessible point and that was installed prior to the enforcement date of this revision is allowable without protective surfacing, as long as it meets all other requirements.)

2. Swings require use zones and protective surfacing regardless of height.

3. Use zone protective surfacing depths shall be as follows:

Minimum compressed loose-fill protective surfacing depths

	Inches	**Loose-Fill Material**	**Protects to Fall Height of:**
a.	6*	Shredded/recycled rubber	10 feet
b.	9	Sand	4 feet
c.	9	Pea Gravel	5 feet
d.	9	Wood mulch (non-CCA)	7 feet
e.	9	Wood chips	10 feet

*Shredded/recycled rubber loose-fill protective surfacing does not compress in the same manner as other loose-fill materials. However, it is recommended that, care be taken to maintain a constant depth as displacement may still occur

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

   a. When purchasing gravel, care should be taken prior to purchase to insure that the gravel is actually pea gravel that is smooth and rounded, and not crushed rock or gravel with sharp edges. Crushed rock and sharp gravel will not be approved.

b. Pea gravel used for use zones shall not be over ½ inch in diameter.
c. Different types of protective surfacing materials shall not be combined within the same use zone area.

5. Hard surface materials, such as asphalt and concrete shall not be used as base surfaces in the use zones except under commercial matting or other systems/products designed to be installed over hard surfaces as directed by the manufacturer.

6. SLIDES: The use zone for slides measuring 6 feet or over, measured from the slide platform to the ground, shall extend 8 feet from the exit end of the slide. Use zones for slides measuring under 6 feet from the platform to the ground shall extend 6 feet from the exit end of the slide.

7. SWINGS: The use zone for single-axis swings (standard swings) (except toddler swings) shall extend to the front and to the rear of the swing a minimum distance of two times the height of the pivot point (where the chain attaches to the frame) above the playing surface. The use zone for toddler swings shall extend to the front and rear of the swing a minimum of two times the distance from the pivot point to the swing seat. Use zones shall also extend 6 feet to the sides of the swing set.

8. SWINGS: The use zone for multi-axis swings (such as tire swings or others with three or more suspending chains) shall extend in all directions a minimum of six feet, plus the height of the suspending rod or chain. The use zone from the end of the structure must also extend a minimum of 6 feet in all directions.

9. Use zones shall be free of obstacles onto which participants may fall.

1000 FURNITURE & EQUIPMENT

1001 Furniture & Equipment Requirements

1. All manufacturer guidelines shall be followed for furniture and equipment that is used by, or around, participants.

2. All equipment shall be sturdy, clean, and safe.

3. Paint on toys, equipment and other materials shall be lead free.

4. Chairs and tables shall be size-appropriate for participants.

5. The OST Program shall provide individualized space for storing personal belongings.

6. There shall be storage space for extra materials and other equipment when not in use.

7. Outdoor equipment that requires use zones and protective surfacing shall require the same use zones and protective surfacing if used inside the facility. (This does not apply to equipment specifically designed for indoor use only.)

1002 Sleeping Equipment

1. There shall be a labeled, individual cot or mat, bottom sheet, and adequate cover for each participant in care during rest time.

2. The use of mats shall be acceptable if they are at least 2 inches thick, washable, waterproof, and size-appropriate for participants.

3. All sleeping equipment shall be kept at least one foot apart to prevent cross-contamination and ease of access in an emergency.

4. Sheets and covers shall be washed at least once a week. Once a sheet/cover/blanket has been used by a participant, it shall not be used by another participant until it has been washed.

1100 HEALTH

1101 General Health Requirements

1. No participant or staff shall be admitted who has a contagious or infectious disease.

2. The parent or legal guardian shall be notified as soon as possible when a participant has any symptom that requires exclusion from the facility. The participant shall be separated from other participants and closely monitored until the parent arrives to pick the participant up.

3. The caregiver should determine if the illness prevents the participant from participating comfortably in activities, results in a greater need for care than the child care staff can provide without compromising the health and safety of the other participants, or poses a risk of spread of harmful diseases to others.

4. The caregiver shall temporarily exclude the participant from care if the participant has:
   a. Sudden change in behavior, such as:
      - lethargy or lack of responsiveness
      - unexplained irritability or persistent crying
      - difficult breathing
      - a quickly-spreading rash
   b. Fever over 101 degrees/oral, 100/axillary (or equivalent method) in a participant who also has pain, behavior changes, or other symptoms of illness.
   c. Diarrhea, defined as watery/runny stools, if frequency exceeds 2 or more stools above normal for that participant, and is not related to a change in diet or medication. Exclusion from the OST program is required if diarrhea cannot be contained in the diaper or if diarrhea is causing soiled clothing in toilet-trained participants

d. Blood or mucus in stools (unless caused by hard stools)
e. Vomiting illness (2 or more episodes of vomiting in the previous 24 hours)
f. Abdominal pain which lasts more than 2 hours
g. Mouth sores with drooling
h. Rash with fever or behavior change
i. Conjunctivitis or "pink eye" – with white, yellow, or green eye discharge and red ("bloodshot") eyes, exclude only if participant has:
    - fever,
    - eye pain
    - redness and/or swelling of the skin around the eyes, or
    - if more than one participant in the program has symptoms
j. Pediculosis (head lice), until after the first treatment.
k. Active tuberculosis, until a health care provider or health official states that the participant is on appropriate therapy and can attend the OST program.
l. Impetigo, until treatment has been started;
m. Strep throat, until 24 hours after antibiotic treatment has been started
n. Chicken pox, until all lesions have crusted (usually 6 days after the rash appears)
o. Rubella, until 6 days after onset of rash
p. Pertussis (whooping cough); until 5 days of antibiotic treatment
q. Mumps, until 5 days after onset of gland swelling
r. Measles, until 4 days after onset of rash
s. Hepatitis A, until 1 week after onset of illness or as directed by the health department

5. Any participant who is injured shall have immediate attention. Parents shall be notified of all injuries. Injuries that require the attention of medical personnel shall be reported to the parent immediately and to the Licensing Unit within one business day.

6. Parents or guardians of all participants shall be notified of contagious illness as soon as possible.

7. If the policy of an OST Program authorizes staff to administer prescription medications, staff shall do so only:

8. Medication shall be given to participants only with signed parental permission which includes date, type, drug name, time and dosage, length of time to give medication, and what the medication is being given for. It shall be in the original container with a child resistant cap, not have an expired date, and be labeled with the participant's name. (Aspirin substitutes, such as ibuprofen and acetaminophen, may be provided by the facility if parental permission has been granted. These medications shall be in the original container.) Staff shall not dispense medications in dosages that exceed the recommendations stated on the medication bottle.

9. Participants with special health care needs (ex. asthma, seizures, diabetes, etc.) who require scheduled daily medications or medications to be given on an emergent basis (Benadryl, EpiPen, rescue asthma medication, etc.) shall have a care plan. Care plans shall

have clearly stated parameters, directions, and symptoms for giving the medications. Care plans shall be updated as needed, but at least yearly.

10. The facility shall share information with families regarding medical homes for participants.

11. The staff person who administers the medication shall initial the permission slip and record the date, time and dosage the medication was administered.

12. Medication shall be returned to the parent or disposed of properly when a participant withdraws from the program or when the medication is out of date.

13. Medicine shall be stored at the proper temperature, separately from food at all times.

14. A first aid supply shall be kept out of reach of the participant. A first aid kit containing medications shall be locked. This kit shall include the following:

    a. Adhesive Band-Aids (various sizes)
    b. Sterile gauze squares
    c. Adhesive tape
    d. Roll of gauze bandages
    e. Antiseptic
    f. Thermometer
    g. Scissors
    h. Disposable gloves
    i. Tweezers

15. Medicine shall be kept out of the reach of the participants when dispensing and shall be stored in a locked area at all other times.

16. Facilities shall comply with the Clean Indoor Air Act of 2006. Smoking in an OST Program is prohibited at all times. This includes:

    a. All areas of the facility, regardless of whether participants 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(s)
    c. Other outdoor areas when participants are present
    d. In any vehicle used to transport participants, whether participants are present in the vehicle or not

17. The facility shall follow any health or medical care plans and/or medical documentation as provided by the participant's physician, parent, or guardian.

18. Universal precautions shall be used when handling items contaminated by blood. These items shall be disposed of separately and by using rubber gloves that shall be properly disposed of after each use. (Note: hands must be washed even after gloves are used.) It is recommended that universal precautions be used when handling and disposing of materials

containing bodily secretions, such as wet or soiled diapers, fecal matter, etc.

19. Garbage shall be kept in closed containers. Garbage and trash shall be removed from the program daily and from the grounds at least once a week.

20. The facility shall be free of insects, rodents, and pests.

21. There shall be no pets or animals allowed that present a health and safety threat. Certification from a licensed veterinarian shall be maintained on site verifying that dogs and cats have a current vaccination against rabies.

22. The communicable diseases listed in Appendix B, whether suspected in a participant 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

23. Reporting data should include:

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

24. Immunization records shall be required for OST participants.

25. It is recommended that all staff members who have direct contact with participants receive annual Influenza (flu) immunizations.

26. It is recommended that all staff members who have direct contact with participants receive a one-time Tdap (Diphtheria, Tetanus & Pertussis) immunization.

27. It is recommended that all staff members who have direct contact with participants receive the recommended series of immunizations for chicken pox, mumps, measles and rubella or evidence of immunity.

28. Participants shall be protected from overexposure to the sun. Sunscreen shall be used if needed and as directed by the parent. OST participants may apply sunscreen to themselves with supervision. A blanket permission may be obtained annually.

29. It is recommended that the facility have an automated external defibrillator on site and have a staff member(s) on-site who is trained in the proper use of this device.

1102 Hand Washing

1. Individual towels, paper towels or forced air dryers shall be within the reach of participants.

2. A liquid soap shall be accessible in the hand washing area and used by caregivers and participants.

3. Running water shall be available in all lavatories.

4. All staff and participants shall wash their hands with soap and water at the following times:

    a. Before meals and snacks
    b. Before preparing meals
    c. After toileting
    d. After each diaper change (if applicable)
    e. After contact with bodily fluids
    f. After outdoor time
    g. After coming in contact with animals
    h. Other times as needed

5. Alternative methods of hand washing shall be provided if running water is not available.

6. The use of hand sanitizer shall not be a replacement for soap and running water.

7. A wash cloth or towel shall not be used more than one time before laundering.

1103 Drinking Facilities

1. The water supply shall be approved by the Arkansas Department of Health.

2. Drinking water shall be provided to the participants.

3. Drinking water shall not be obtained from the hot water supply.

1104 Toilet Facilities

1. There shall be 1 toilet and 1 sink available for each group of 30 participants.

2. Separate toilet facilities for boys and girls shall be provided.

3. Clean clothes shall be available for participants who might soil themselves.

4. Each OST Program licensed or approved for more than thirty (30) participants shall have a separate rest room for staff.

5. Toilet tissue shall be located within reach of the participants when toileting.

6. Staff shall assist participants in toilet routines and hygiene practices as needed.

7. Toileting equipment shall be safe and sanitary.

1105 Diaper Changing

1. When participants require diapering, there shall be a safe diaper changing area which meets the following criteria:

    a. Impervious (non-absorbent) smooth surfaces that do not trap soil and are easily disinfected
    b. There shall be a changing pad capable of being sanitized used as a cushion between the child and the changing surface.

2. Participants shall always be attended during diapering.

3. Soiled or wet diapers shall be removed and replaced with clean, dry diapers. The caregiver shall ensure that participants are properly cleaned and dried.

4. Soiled cloth diapers or clothing shall not be rinsed. If a participant's own diapers are used, they shall be sanitarily bagged to be taken home daily.

5. Diaper covers or plastic pants shall be handled in the same manner as cloth diapers.

6. All diapering preparations shall be placed out of the reach of participants. The use of all diapering preparations shall be agreed upon by the caregiver and parent.

1200 SAFETY

1201 Safety Requirements

1. Within 30 days of licensure and within 30 days of any change or modification of the floor plan the facility shall file a copy of their floor plan with the local Office of Emergency Management including the following (§ 20-78-228 Act 1159 of 2013):

    a. A schematic drawing of the facility and property used by the child care facility including the configuration of rooms, spaces, and other physical features of the building
    b. The location or locations where children enrolled in child care spend time regularly
    c. The escape routes approved by the local fire department for the child care facility

d. The licensed capacity and ages of children per room at the facility
e. The contact information for at least two emergency contacts for the facility
f. An aerial view of the child care facility and property used by the child care facility shall be included with the floor plan if available

2. The OST Facility 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 participants and staff.

3. 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 participants, including participants with special needs
   e. Procedures and documentation for annual training of staff regarding the plan and possible reassignment of staff duties in an emergency
   f. Plans to ensure that all staff and volunteers are familiar with the components of the plan

3. The facility shall coordinate with local emergency management officials to plan for emergencies.

4. Written procedures and evacuation diagrams for emergency drills shall be posted in each program space.

5. Fire and tornado drills shall be practiced as follows:

   a. Monthly
   b. Fire and tornado drills shall be practiced on separate days and at different times of the day.
   c. Everyone in the facility, at the time of the drill shall participate.
   d. Staff, including volunteers and substitutes, shall be trained in emergency drill procedures.
   e. Drills shall be conducted during all hours when participants are in care (evenings, nights, weekends, etc.)

6. The facility shall maintain a record of emergency drills. This record shall include:

   a. Date of drill
   b. Type of drill
   c. Time of day
   d. Number of participants participating in the drill
   e. Length of time taken to reach safety
   f. Notes regarding things that need improved upon.

7. The OST Facility shall maintain an evacuation pack that shall be taken on all drills and during actual emergency evacuations. The pack shall be easily accessible in an emergency and all staff shall know the location of the pack. The evacuation pack shall include, but is not limited to the following:

    a. List of emergency numbers
    b. List of all emergency and contact information for participants
    c. List of all emergency and contact information for staff
    d. First aid kit (requirement 1101.6) with extra gloves
    e. Kleenex
    f. Battery powered flashlight and extra batteries
    g. Battery powered radio and extra batteries
    h. Hand sanitizer
    i. Notepad and pens/pencils
    j. Whistle
    k. Disposable cups
    l. Wet wipes
    m. Emergency survival blanket

8. The facility shall immediately notify the Licensing Unit of any extended utility outages or significant damage to the building and/or grounds. If phone service is not available, notification shall be as soon as service is restored or available.

9. OST Facilities shall maintain a log of all child product recalls and safety notices issued by CPSC or distributed by the Attorney General's Office and shall post or otherwise make these notices available for parents to review on site. The facility director shall certify, on an annual basis, that these notices have been maintained and reviewed and that any identified items have been removed from the facility. Forms for self-certification will be provided by the Licensing Specialist and shall be submitted annually. (Act 1313 of 2001).

10. There shall be no alcoholic beverages in any part of the facility during hours of care. Illegal drugs/paraphernalia shall not be in any part of the facility or on the premises, regardless if participants are present or not.

11. All medications and poisonous substances shall be kept in separately locked areas.

12. Rescue medications such as inhalers or EpiPens shall be inaccessible to children (kept in a cabinet with a child proof type safety latch or carried by a staff member.)

13. All detergents and cleaning supplies shall be kept out of the reach of participants. (This does not include hand soap in participants' or staff bathrooms.)

14. Supplies used for participants' activities shall be carefully supervised.

15. All bags belonging to participants shall be checked on arrival to eliminate possible hazards. Purses and bags belonging to staff shall be stored out of reach of participants.

16. Balloon use shall be carefully supervised.

17. Staff shall be instructed in the use of fire extinguishers.

18. The facility shall maintain smoke detectors/fire extinguishers as required by the Fire Department. Smoke detectors shall be kept in working order at all times.

19. Chemicals and toxins shall not be stored in the food storage area.

1202 Swimming Pools

1. Swimming pools and natural pools of water may be used for water play if the following requirements are met:

    a. Health Department approval where applicable
    b. Written parental permission
    c. One person present at all times who has current certification in Red Cross Life Saving, Y.M.C.A. aquatic instruction or other industry recognized certification entity.

2. Adult supervision of the children shall be provided at all times, with grouping based on a 1:8 staff/participant ratio. (Unless participants are participating in an authorized swimming instruction program.)

3. Lifeguards, swimming instructors or any other swimming pool staff may be counted in the ratio when the OST Facilities' participants are the only occupants of the pool and these persons have completed criminal and child maltreatment background checks and have a current health card.

4. Swimming pools located within the play area of the OST Facility ~~center~~ shall be enclosed. The enclosure shall consist of a locked gate and a fence that is at least four feet high.

1300 TRANSPORTATION

1301 Transportation Requirements

1. The requirements in this section apply to all transportation provided by the licensee, including transportation provided by any person on behalf of the licensee, regardless of whether the person is employed by the licensee. 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. When participants are transported emergency contact information shall be maintained on the vehicle at all times.

3. Staff transporting participants 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 staff's record
c. Successfully completed the training course in Driver Safety that is offered or approved by the Division prior to transporting participants. Verification of the completed course in Driver Safety (when available) shall be maintained on site in the staff's record.
d. At least one adult on the vehicle shall be certified in CPR and First Aid.

4. The vehicle(s) used for the transportation of participants_shall be in compliance with Arkansas state laws on transportation of participants.

5. Vehicles shall be licensed and maintained in proper working condition including air conditioning and heating systems.

6. 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 participants. (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)

7. During routine transporting of participants to and from an OST Program, a ratio of 1:18 does not need to be maintained as long as there is one additional adult present in the vehicle besides the driver. When transporting participants for non-routine purposes (ex. field trip) a ratio of 1:18 needs to be maintained at all times. The driver may be counted in staff/participant ratio.

8. Any participant who is less than 6 years old or weighs less than 60 pounds shall be restrained in a child passenger safety seat. Any participant who is at least 6 years or weighs at least 60 pounds must be restrained by a safety belt. (Act 470 of 2001). Conventional school busses are exempt from this requirement except for the transportation of infants/toddlers. (See#1302.2) Child passenger safety seats shall be used in accordance with manufacturer's guidelines.

9. There shall be a seating space and an individual, appropriate restraint system provided for each participant transported.

10. Rosters listing the date, the names and ages/date of birth of all participants 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 participants 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 facility. Transportation rosters shall be kept by the facility and available for review for one year.

11. To insure that no participants are left on the vehicle, the driver or a staff member must walk through the vehicle and physically inspect each seat before leaving the vehicle. The driver or the staff member, who conducted the walk through inspection, must sign the transportation roster to verify that all participants have exited the vehicle.

12. To insure that participants have safely arrived in the appropriate program space, the transportation roster shall be reviewed by the Director or designee and compared with attendance records. The Director or designee shall sign off on the transportation roster to verify that all participants have safely transitioned from the vehicle to the program.

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 system may be installed by any certified technician or mechanic employed by a recognized electronics or automotive business in accordance with the devices 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 participants are being delivered at the facility. Other options must be approved by the Licensing Unit.**

  <u>Options</u>

  1. Unload all of the participants, walk through the vehicle to ensure that no participants remain on board and deactivate the alarm. (This option will only work if you are able to unload all participants 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 participants have been unloaded to ensure that no participant is left on board. (This option will require at least two staff members, one to supervise the participants and one to remain inside the vehicle.)

3. Upon arrival, deactivate the alarm and unload the participants. 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.)

1400 SPECIAL NEEDS

1. Participants with disabilities should be included, in the same general activities as their same-age peers. Certain accommodations for their disability and some modifications to activities may be necessary and these should be determined on an individual basis and be related to the specific needs of the individual. Out of School Time providers are encouraged to make available additional staff training in the area of disability awareness. Such training would/might encompass the use of people-first language, general communication strategies, and disability etiquette. In general, it is desirable to treat an individual with a disability in the same way one would treat an individual of the same age but without a disability.

2. Additional information from the parent/caregiver of a child with a disability may be necessary. Questions that cover usual routines, special instructions for care and interaction, the child's interests, and things or situations to avoid are important; as is determining what kinds of things will motivate the child. If there are individualized requirements for rest, nutrition, hydration, etc. these should be noted. Emergency contact information—with back up contacts—may be essential

3. Consideration should be given to special needs related to medical as well as developmental, social/emotional, and mental health/behavioral concerns.

4. While IDEA is specific to educational needs, consideration should also include cooperation with 504 and Medical Plans to best meet the needs of the individual child.

PROGRAM SPECIFIC VARIATIONS

PROGRAM-SPECIFIC VARIATIONS ARE NUMBERED ACCORDING TO THE REGULATION WITH WHICH IT VARIES. UNLESS A VARIANCE IS LISTED BELOW, ALL BASIC REQUIREMENTS APPLY.

1500 DAY CAMP

401 Program Requirements

1. If hazardous items (ex. archery equipment) are used during activities offered, such equipment must be used under close supervision and must be safely stored.

2. If specialized activities take place such as, but not limited to horseback riding, water activities, rock climbing, and other adventure based activities, supervision of such activities must be provided by qualified staff that have received the proper training in the activity's guidelines, safety regulations, and emergency procedures.

603 Participants' Records

1. Permission for specialized summer activities shall be maintained.

2. Emergency information and medical permission sheet shall be maintained at day camp site.

701 Nutrition Requirements

1. Milk is not required to be served in day camp settings.

901 Grounds

1. Outdoor day camps need to have a shelter or permanent building for protection from inclement weather.

2. An outdoor day camp shall perform daily visual inspections of the outdoor space and facilities prior to the arrival of participants to ensure all buildings, structures, and activity areas are in good repair and free of hazards.

1104 Drinking Facilities

1. Water that is transported to the camp sites for drinking purposes shall be in enclosed containers. Fresh water shall be provided each day.

1600 EVENING & NIGHT CARE VARIATIONS

Night care is any care provided after midnight.

301 Staff/Participant Ratio

1. Staff members shall be awake at all times and shall have participants in view at all times.

401 Program Requirements

1. Evening quiet time activity shall be provided to each participant arriving before bedtime.

701 Nutrition Requirements

1. Participants who are in care overnight shall be provided with a breakfast prior to leaving for school or other activities.

2. Snacks meetings the current U.S. Department of Agriculture guidelines shall be provided to participants in attendance for more than 2 ½ hours prior to bedtime.

1002 Sleeping Arrangements

1. Bedtime schedules shall be established for participants in consultation with the participant's parent(s).

2. Storage space for clothing and personal belongings shall be provided within easy reach of the participant.

3. Individual beds or cots equipped with comfortable mattresses, sheets, pillows, pillow cases and blankets shall be provided for participants in all-night care. Bed linens shall be changed at least once a week or daily when wet or soiled.

4. Mats may be used for participants in evening care.

5. The upper level of double deck beds shall be allowed for participants 10 years or older if a bed rail and safety ladder are provided.

6. Participants shall have clean and comfortable sleeping garments for their individual use.

1105 Toilet Facilities

1. There shall be age appropriate bathing facilities available for all participants including a bathtub or shower available. Bathtubs and showers shall be equipped to prevent slipping.

2. Bathrooms shall be located near the sleeping areas.

3. No participant under 6 years of age shall be left alone or with another participant while in the bathtub or shower.

1700 PART-TIME PROGRAM VARIATIONS

701 Nutrition Requirements

1. Facilities in operation for more than 3 hours per day shall provide a snack that meets current U.S. Department of Agriculture Guidelines.

1800 SICK CARE COMPONENT

301 Staff/Participant Ratio

1. The following ratios shall be maintained at all times:
   a. OST Participant 1:5, Maximum group size 10

2. Staff shall be separated in the same manner participants are separated to prevent cross infection.

302 Director

1. If the component is part of an OST Facility, the program director shall be accountable to the facility director. If the component is an entity unto itself the program director may also be the facility director.

2. The program director shall have completed the following training:

   a. Communicable disease control
   b. Recognition and care of usual childhood illness
   c. CPR certification
   d. First Aid certification

401 Program Requirements

1. Participants shall be provided with quiet activities according to their age and abilities.

2. Caregivers shall:

   a. Administer medicine according to prescribed instructions
   b. Take temperature frequently or as needed
   c. Monitor any changes in condition
   d. Record necessary medical or physiological data or changes
   e. Notify parents immediately if their child's condition changes significantly for the worse, especially if the condition meets one of the excludable diseases or symptoms

3. The participant shall be removed immediately from sick care when his/her condition meets one of the excludable diseases or symptoms.

4. Participants may be returned to the regular OST Program when a doctor's statement has been obtained or when the participant is free of symptoms for 24 hours.

603 Participants' Records

1. The record shall contain information on the specific condition or illness placing the participant in sick care.

2. The record shall contain any recommendations for needed medical treatment and/or program or environment modifications that the participant needs.

801 Building Requirements

1. If located in the same facility as OST Program, sick care shall be separate with a separate entrance and separate ventilation system.

2. Participants with respiratory illnesses shall be cared for in separate space from participants with gastrointestinal illness. Any participant with an undiagnosed condition shall be separated from other participants to prevent cross infection. A separate area can be defined by curtains; partitions etc. if airborne transmission is not likely.

3. A hand-washing sink shall be available in each room.

4. To prevent cross contamination, a designated toilet shall be available to each sick care room.

5. The facility shall be self-contained, i.e. food, water, bedding, toileting (no potty chairs) etc.

1001 Furniture & Equipment Requirements

1. No furniture, fixtures, equipment and supplies designated for use in the sick care component shall be used or shared by well participants.

2. All laundry shall be washed each day. The items shall be placed in a plastic bag and labeled "contaminated" so necessary precautions can be taken.

3. All toys and equipment shall be disinfected after every use.

1101 General Health Requirements

TABLES OF COMMUNICABLE DISEASES AND SYMPTOMS THAT EXCLUDE CHILDREN FROM SICK CARE: (asterisk denotes reportable diseases)

1. Communicable Diseases:

a. RESPIRATORY ILLNESS	**b. GASTROINTESTINAL ILLNESS**	**c. CONTACT**
Chicken Pox	Giardia Lamblia*	Impetigo
German Measles	Hepatitis A*	Lice
Hemophilus influenza	Salmonella*	Scabies
Measles*	Shigella*	
Meningococcus*		
Mumps*		
Strep throat		
Tuberculosis*		
Whooping Cough*		

2. Symptoms that Exclude Participants from Sick Care:

   A symptom is a condition that indicates an illness that may not be identifiable by one of the above listed names but presents a situation where the participant shall not be admitted to or remain in sick care and should be seen by the family physician.

a. Diarrhea

- Accompanied by evidence of dehydration for excessive fluid loss
- Accompanied by history of poor fluid intake and/or marked lethargy
- With blood or mucous in the stool unless at least one stool culture shows the absence of Salmonella, Shigella, Campylobacter or E-Coli
- That exceeds 5 bowel movements in an 8 hour period of is continued over 3 or 4 days unless the participant is under the supervision of a physician with written documentation

b. Vomiting for over a 6 hour period

c. Difficult or rapid breathing

d. Severe coughing: episodes of coughing which may lead to gagging, vomiting, or difficulty breathing

e. Mucous (phlegm) that is foul smelling, yellow or green and the participant has a fever over 102

f. Asthmatics with severe upper respiratory infections who have not been seen by a physician or whose distress is not controlled by medication

g. Sore throat and fever greater than 103 or confirmed Strep throat until treated with antibiotics for over 24 hours

h. Skin conditions that have not been diagnosed as noncontiguous by a physician; including but not limited to:

- Yellow (jaundiced) eyes or skin
- Child in contagious stages of chicken pox, measles, mumps or rubella
- Untreated impetigo
- Untreated scabies or head lice
- Blood-red rashes and skin conditions with spontaneous bruising

i. Participants who are in the contagious states of Pertussis, diphtheria, or tuberculosis

j. Pink or red eye(s) which may be swollen with white or yellow discharge until on antibiotics for over 24 hours

k. Abdominal pain that is intermittent or persistent

l. Fever over 102 for greater than 24 hours, or any fever over 103 unless the participant has been evaluated and treated by a physician and does not have other exclusion criteria.

APPENDIX A: DEFINITIONS

1. **"Act"** means the Child Care Facility Licensing Act as amended.

2. **"Assistive electronic device"** means any electronic device that is used/needed by a child or youth with a disability. Such a device might be used for communication, for environmental manipulation, to keep a schedule or checklist of activities, or for other specific and generalized therapeutic activities that promote independence. The device may be used at all times or at the discretion of the user, but has a functional application for the user.

3. **"Child Care Center"** means any Child Care Facility conducted under public or private auspices on a profit or nonprofit basis providing direct care and protection for children. Any facility that is open more than five (5) hours during any 24 hour period or more than a total of ten (10) hours during a seven (7) day period is considered a Child Care Center and shall be subject to the provisions of the Child Care Facility Licensing Act. Those facilities meeting the above definitions but operating no more than three (3) weeks per calendar year are not required to comply with the licensing requirements, i.e.: Summer Bible Schools and Camps.

   For purposes of determining the need for a license, all care provided at the site of a licensed program is considered a part of the licensed program and therefore subject to licensing requirements. This includes separate buildings located on the same property or any other property under the same ownership. However, Mother's Day Out and other part time programs serving children not participating in the licensed program are exempt as long as they operate no more than 5 hours per day or 10 hours per week.

   A public or private school which operates a Kindergarten (K5) in conjunction with grades one and above, or for grades one and above only and provides short-term custodial care (not to exceed 20 hours weekly) prior to and/or following classes for those students, is not required to comply with licensing requirements for the short-term custodial care provided.

4. **"Child Care Licensing Unit"** means the unit within the Department of Human Services, Division of Child Care and Early Childhood Education, that inspects and investigates any proposed or operating Child Care Center and any personnel connected with the center to determine if the facility will be or is being operated in accordance with the Child Care Facility Licensing Act and the Licensing Requirements for the Child Care Centers.

5. **"Child Maltreatment Central Registry Check"** means a check of the Arkansas Child Maltreatment Central Registry for any record of founded child abuse and neglect or maltreatment.

6. **"Criminal Record Check"** means a statewide criminal record check conducted by the Identification Bureau of the Arkansas State Police.

7. **"Criminal FBI Check"** means a nationwide criminal record check conducted by the Federal Bureau of Investigation that conforms to the applicable federal standards and includes the

taking of fingerprints. Application for a nationwide criminal check shall be made to the Identification Bureau of the Department of the Arkansas State Police.

8. **"Department"** means the Arkansas Department of Human Services.

9. **"Division"** means the Division of Child Care and Early Childhood Education.

10. **"Employee"** or **"Staff"** means all full or part-time employees or any person(s) who perform services under the direction and control of the OST Facility, regardless if they are paid or not. This includes any person(s) that has supervisory or disciplinary control over participants, is at any point left alone with participants, or is counted in staff/-participant ratios.

11. **"Evening and Night Care"** means participant-care provided between 7:00 p.m. and 6:00 a.m.

12. **"Kindergarten"** means a school based program offered for children five (5) years of age ***(K5)*** during the school year prior to their entry into the first grade.

13. **"Medical Home"** is the Doctor that you and your child see for routine medical care. This is your "Primary Care Physician" (PCP).

14. **"Operator"** means any person or entity exercising any measure of supervision or control over an OST Facility.

15. **"Out-of-School Time Program"** means a child care/school-age or youth development program caring for children who are in kindergarten (K-5 years of age) and above. OST care includes before and after school care, extended care during the school holiday, summer day camps, and youth development programs. OST Programs which operate with children arriving and leaving voluntarily for scheduled classes, activities, practice, games, and meetings are defined as recreational programs, and do not fall under the definition of requiring licensure as an OST Program.

16. For purposes of determining the need for a license, all care provided at the site of a licensed OST program is considered a part of the licensed program and therefore subject to licensing requirements. This includes separate buildings located on the same property or any other property under the same ownership. Part time programs serving participants not participating in the licensed OST program are exempt as long as they operate no more than 5 hours per day or 10 hours per week.

17. A public or private school which operates a Kindergarten (K5) in conjunction with grades one and above, or for grades one and above only and provides short-term custodial care (not to exceed 20 hours weekly) prior to and/or following classes for those students, is not required to comply with licensing requirements for the short-term custodial care provided.

18. **"Owner"** means any person who assumes the legal responsibility for operation of an OST facility.

19. **"Participant"** refers to a child who is enrolled in kindergarten or a higher grade. If the OST Program provides care to children over 13 years of age, the program must meet all regulatory standards in regard to such children just as if the children were under 13 years of age. Children may receive care through the conclusion of high school.

20. **"Part-time Care"** means care provided no longer than four (4) hours per day or not to exceed a maximum of 20 hours per week.

21. **"Personnel"** is defined as the facility owner or operator, staff or volunteer.

22. **"Program"** is defined as all activities that comprise the participant's day at the center.

23. **"Screen time"** refers to the amount of time that a participant uses or is engaged with electronic media. Electronic media includes but it not limited to television, videos, DVDs, computers, portable electronic devices, etc.

24. **"Sick Care"** is defined as a separate service providing care for participants who are too sick to attend the OST Program as stated in Section 1000 but who do not exhibit any of the excludable diseases as defined in Section 1500. The primary objective of this service is to insure that participants in care receive the required attention necessary for moderately ill participants.

25. **"Staff"** or **"Employee"** means all full or part-time employees/staff or any person(s) who perform services under the direction and control of the OST Facility, regardless if they are paid or not. This includes any person(s) that has supervisory or disciplinary control over participants, is at any point left alone with participant, or is counted in staff/participant ratios.

26. **"Substantial Compliance"** means compliance with all **essential standards** necessary to protect the health, safety and welfare of the participants-attending the OST Program. Essential standards include **but are not limited to** those relating to issues involving fire, health, safety, nutrition, discipline, staff/participant ratio and space.

27. **"Swimming Pool"** means any pool of water in excess of 12 inches deep. This does not include natural pools of water such as lakes, ponds and rivers.

28. **"Volunteer"** means a person who provides services to an OST Program, but has no supervisory or disciplinary control over participants, is not left alone with participants, and is not counted in staff/participant ratios.

APPENDIX B: LIST OF REPORTABLE DISEASES

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

Gonorrhea
Hepatitis (A, B, Non-A, Non-B
Unspecified and results of serologies)
Rash illnesses (including
*MEASLES & RUBELLA)
*WHOOPING COUGH (pertussis)
MENINGITIS
Salmonellosis (including typhoid)
Shigellosis
Syphilis
Tuberculosis
MUMPS

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

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

*The reporting physician will be contacted for additional information.

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

The diseases in capital letters are to be brought to the immediate attention of the State Epidemiologist when suspected.

Reporting data shall include:

a) Name and 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) the physician's name and location, 2) the suspected disease and 3) the number of cases and interval during which the cases were seen:

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

The following occupational diseases also shall be reported:

Asbestosis
Silicosis
Byssinosis
Mesothelioma
Coal Workers Pneumoconiosis

FOR FURTHER ASSISTANCE CONTACT THE LOCAL COUNTY HEALTH UNIT.

APPENDIX C: CHILD CARE MEAL PATTERN

When children over age one participate in the Program, the total amount of food authorized in the meal pattern set forth below shall be provided in order to qualify for reimbursement. 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	½ cup (4 oz)	¾ cup (6 oz.)	1 cup (8 oz.)
Juice or **fruit** or **vegetable**	¼ cup	½ cup	½ cup
Bread, bread alternate**** and/or **cereal**			
enriched or whole grain	½ slice (½ oz.)	½ slice (½ oz.)	1 slice (1 oz.)
Bread or			
Cereal: Cold dry or	¼ cup*	1/3 cup**	¾ cup***
Hot cooked	¼ cup	¼ cup	½ cup
AM or PM snack (supplement)			
(select 2 of these 4 components)			
Milk, fluid	½ cup (4 ounces)	½ cup (4 ounces)	1 cup (8 ounces)
Meat or **meat alternate**	½ ounce	½ ounce	1 ounce
Juice or **fruit** or **vegetable**	½ cup	½ cup	¾ cup
Bread, bread alternate**** and/or **cereal**			
enriched or whole grain	½ slice (½ oz.)	½ slice (½ oz.)	1 slice (1 oz.)
Bread or			
Cereal: Cold dry or	¼ cup*	1/3 cup**	¾ cup***
Hot cooked	¼ cup	¼ cup	½ cup
Lunch or Supper			
Milk, fluid	½ cup (4 oz.)	¾ cup (6 oz.)	1 cup (8 oz.)
Meat or **meat alternate**			
(lean meat or poultry or fish)	1 ounce	1 ½ ounces	2 ounces
Cheese	1 ounce	1 ½ ounces	2 ounces
Egg	½ large egg	¾ large egg	1 large egg
Cooked dry beans or peas	¼ cup	3/8 cup	½ cup
Peanut butter	2 tbsps.	3 tbsps.	4 tbsps.
Yogurt (plain or flavored)	½ cup	¾ cup	1 cup
(Or an equivalent quantity of any combination of the above meat/meat alternates)			
Vegetable and/or **fruit** (total of two or more)	¼ cup	½ cup	¾ cup
Bread or **bread alternate****** enriched or whole grain	½ slice (½ oz.)	½ slice (½ oz.)	1 slice (1 oz.)

* **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**

APPENDIX D: ADULT CARE MEAL PATTERN

The meals served to adult participants in the Child and Adult Care Food Program shall contain the indicated meal pattern quantities and food components in order to qualify for reimbursement. Adult centers may choose to implement the "offer vs. serve" option (as described on following page).

Breakfast			**Adult Participants**
Milk, fluid			1 cup (8 ounces)
Juice or **fruit** or **vegetable**			½ cup
Bread and/or **cereal***			
enriched or whole grain			
Bread or			2 slices (or 2 servings the equivalent quantity of 2 ounces)
Cereal: Cold dry or			1½ cups (or 2 ounces)
Hot cooked			1 cup
AM or PM snack (supplement)			
(select 2 of these 4 components)			
Milk, fluid			1 cup (8 ounces)
Meat or **meat alternate**			1 ounce
Juice or **fruit** or **vegetable**			½ cup
Bread and/or **cereal***			
enriched or whole grain			
Bread or			1 slice (1 ounce)
Cereal: Cold dry or			¾ cup (or 1 ounce)
Hot cooked			½ cup
Lunch or Supper			
Milk, fluid			1 cup (8 ounces) - (none required at supper meal)
Meat or **meat alternate**			
(lean meat or poultry or fish)			2 ounces
Cheese			2 ounces
Egg			1 large egg
Cooked dry beans or peas			½ cup
Peanut butter			4 tablespoons
Yogurt (plain or flavored)			1 cup
(Or an equivalent quantity of any combination of the above meat/meat alternates)			
Vegetable and/or **fruit** (total of two or more)			1 cup
Bread or **bread alternate*** enriched or whole grain			2 slices (or 2 servings the equivalent quantity of 2 ounces)

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

APPENDIX E: 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		

Table I:

Immunization Requirements for Child Care and Early Childhood Education Facilities

Instructions for utilizing Table I: Table I is not a recommendation of vaccines to get, but of doses required to already have at that age. To determine what vaccines are required for a child to attend a licensed child care facility, refer to Column 1 on the left to see what age range is correct for the child. Then all the vaccines on the same row as the child's age are required for attendance in a licensed child care facility. Vaccines are required based on the current age of the child. Column 1 is not an age range for when a child can be vaccinated.

Column 1	Column 2	Column 3	Column 4	Column 5	Column 6	Column 7	Column 8	Column 9
Current AGE of child	**DTaP DTP/DT**	**POLIO**	**Hib ****	**HEPATITIS B**	**MMR ******	**VARICELLA ******	**PNEUMOCOCCAL ****	**HEPATITIS A**
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. A medical professional history of disease may be accepted in lieu of receiving vaccine.)	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	2 doses **OR** 1 dose within the last 8 weeks (3 doses possible)	1 dose	1 dose A medical professional history of disease may be accepted in lieu of receiving vaccine. .	3-4 doses with last dose must be on/after1st birthday **OR** 2 doses on/after 1st birthday	

			months and doses are at least 8 weeks apart **OR** 1 dose on/after 15 months of age if no prior doses					
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 A medical professional history of disease may be accepted in lieu of receiving vaccine.	3-4 doses with last dose must be on/after1st birthday **OR** 1 dose on/after 24 months of age if no prior doses **OR** 2 doses on/after 1st birthday	**For 19-24 months:** 1 dose on or after first birthday (2 doses possible) **For 25-48 months:** 2 doses with one dose on or after 1st birthday and at least 6 months from first dose
≥49 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	4 doses with a minimum interval of 6 months between the 3rd and 4th dose **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	3 doses *** **OR** 1 dose within the last 8 weeks	1 dose	1 dose A medical professional history of disease may be accepted in lieu of receiving vaccine.	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**	2 doses with one dose on or after 1st birthday and at least 6 months from first dose

	birthday		weeks apart **OR** 1 dose on/after 15 months of age if no prior doses **Not required on/after 5th birthday**					

*5th DTaP/DTP/DT (Pre-school dose) must be given on/after the child's 4th birthday. Interval between 4th DTaP/DTP/DT and 5th DTaP/DTP/DT should be at least 6 months. If a child is currently ≥49 months of age and does not meet the above criteria or is in process within 15 days, they are not up-to-date and should be scheduled for immunization.

** 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.

**** Vaccine doses administered up to 4 days before the minimum interval or minimum age can be counted as valid for doses already administered. Exception: The minimum interval between doses of live vaccines (such as MMR and Varicella) must be 28 days.

*****A medical professional is a medical doctor (MD), advanced practice nurse (APN), doctor of osteopathy (DO), or physician assistant (PA). No self or parental history of disease will be accepted.

TABLE II: KINDERGARTEN THROUGH GRADE TWELVE IMMUNIZATION REQUIREMENTS*

Vaccine ► **----------** **Grade ▼**	**Diphtheria, Tetanus, Pertussis (DTP/DT/Td/DTaP/Tdap)**	**Polio (OPV – Oral or IPV – Inactivated)**	**MMR***** (Measles, Mumps, and Rubella)**	**Hep B**	**Meningococcal (MCV4)**	**Varicella**	**Hepatitis A**
Kindergarten	4 doses (with 1 dose on or after 4th birthday)	3 doses (with 1 dose on or after 4th birthday and a minimum interval of 6 months between the 2nd and 3rd dose) **OR** 4 doses with 1 dose on or after 4th birthday and a minimum interval of 6 months between the 3rd and 4th dose	2 doses (with dose 1 on or after 1st birthday and dose 2 at least 28 days after dose 1)	3 doses	None	2 doses (with dose 1 on or after 1st birthday and dose 2 at least 28 days after dose 1) ******A medical professional history of disease may be accepted in lieu of receiving vaccine.	1 dose on or after 1st birthday
Grades 1 – 12	4 doses (with 1 dose on or after 4th birthday) **AND** 1 dose of Tdap for ages 11 years (as of September 1st each year) and older **OR** 3 doses******* for persons 7 years of age or older who are not fully vaccinated (including persons who cannot document prior vaccination)	3 doses doses (with 1 dose on or after 4th birthday with a minimum interval of 6 months between the 2nd and 3rd dose) **OR** 4 doses with 1 dose on or after 4th birthday and a minimum interval of 6 months between the 3rd and 4th dose	2 doses (with dose 1 on or after 1st birthday and dose 2 at least 28 days after dose 1)	2** or 3*** doses (11-15 year olds could be on a 2-dose schedule)	Second dose at age 16 years (as of September 1st each year) with a minimum interval of 8 weeks since 1st dose **OR** 1 dose if not vaccinated prior to age 16 years (If first dose is administered at age 16 years or older, no second dose required.)	2 doses (with dose 1 on or after 1st birthday and dose 2 at least 28 days after dose 1) **OR** ******A medical professional history of disease may be accepted in lieu of receiving vaccine.	**Grade 1 only:** 1 dose on or after 1st birthday

Vaccine ► ---------- Grade ▼	Diphtheria, Tetanus, Pertussis (DTP/DT/Td/DTaP/Tdap)	Polio (OPV – Oral or IPV – Inactivated)	MMR***** (Measles, Mumps, and Rubella)	Hep B	Meningococcal (MCV4)	Varicella	Hepatitis A
Grade 7	4 doses (with 1 dose on or after 4th birthday) **AND** 1 dose of Tdap **** **OR** 3 doses******* for persons 7 years of age or older who are not fully immunized (including persons who cannot document prior vaccination)	3 doses (with 1 dose on or after 4th birthday with a minimum interval of 6 months between the 2nd and 3rd dose) **OR** 4 doses with 1 dose on or after 4th birthday and a minimum interval of 6 months between the 3rd and 4th dose	2 doses (with dose 1 on or after 1st birthday and dose 2 at least 28 days after dose 1)	2** or 3*** doses (11-15 year olds could be on a 2-dose schedule)	1 dose	2 doses (with dose 1 on or after 1st birthday and dose 2 at least 28 days after dose 1) **OR** ******A medical professional history of disease may be accepted in lieu of receiving vaccine.	None

*Doses of vaccine required for school entry may be less than the number of doses required for age-appropriate immunization.

**An alternative two-dose hepatitis B schedule for 11-15 year-old children may be substituted for the three-dose schedule. Only a FDA-approved alternative regimen vaccine for the two-dose series may be used to meet this requirement. If you are unsure if a particular child's two-dose schedule is acceptable, please contact the Immunization Section for assistance at 501-661-2169.

*** 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 (168 days) of age. (All 3rd doses of hepatitis B vaccine given earlier than 6 months of age before 6/21/96 are valid doses and should be counted as valid until 6/21/2014.)

**** Tdap vaccine can be administered regardless of the interval since the last tetanus and diphtheria toxoid-containing vaccine.

***** Exception: If a student has previously received two doses of measles, one dose of mumps and one dose of rubella before January 1, 2010, the doses will be accepted as compliant to immunization requirements and 2 MMRs are not required.

******A medical professional is a medical doctor (MD), advanced practice nurse (APN), doctor of osteopathy (DO), or physician assistant (PA). No self or parental history of disease will be accepted.

******* For unvaccinated persons 7 years of age and older (including persons who cannot document prior vaccination), the primary series is 3 doses. The first two doses should be separated by at least 4 weeks, and the third dose at least 6 months after the second. One of these doses (preferably the first) should be administered as Tdap and the remaining two doses administered as Td.