

FAMILY CHILD CARE  
LICENSING  
MN RULE 9502  
STATUTE 245A  
STATUTE 245C



# REASONS FOR BECOMING A LICENSED FAMILY CHILD CARE PROVIDER

- ⦿ It is legally required if caring for more than one unrelated family at the same time.
- ⦿ Supports your status as a child care professional.
- ⦿ You will be eligible for a food program.
- ⦿ You may qualify for grant opportunities.
- ⦿ Love working with children and families.
- ⦿ You will be able to take business tax advantages.



# APPLICANTS MUST:



- ⦿ Be 18 years of age
- ⦿ Complete a health physical within the past 12 months (form is provided)
- ⦿ Pass a background check
- ⦿ Provide three references
- ⦿ Complete licensing application and all required paperwork
- ⦿ Fire inspection
- ⦿ Well water test
- ⦿ Landlord Permission form (if you do not own)

# POTENTIAL DEAL BREAKERS:

- ⦿ Fences: Locations near rail, traffic, water, or machinery hazards may require a fence that meets city code and licensing requirements.
- ⦿ Fire Inspection and Safety Requirements: You may need to make changes to your home after a Fire Marshal inspection or licensing inspection.
- ⦿ Water Hazards: Swimming pools or water features in your yard must be separated from children's outdoor play space by fencing that meets city code and licensing requirements.
- ⦿ Background Studies: Everyone in your household over 13 years old or working in the child care home must receive clearance prior to working with children.



# LICENSING PROCESS

- ⦿ The applicant is the person who will be the provider of care in the residence, present during the hours of operation, and who shall be legally responsible for the operation of the residence.
- ⦿ The agency completes background studies on applicant, household members, and any subs/helpers.
- ⦿ The agency needs to receive three reference letters regarding the applicant. References need to be non-related and they need to know you well, visit your home, know what kind of housekeeper you are, how you discipline children, know what kind of food you serve.



- ⦿ Fire Marshal inspects the residence.
- ⦿ The residence must meet all applicable local ordinances.
- ⦿ Inspections may be required from a building official or agency of a board of health.
- ⦿ The applicant must give the agency access to the residence for a licensing study.
- ⦿ The agency may require an evaluation at any time prior to licensing or during licensing for a physical, mental illness, or chemical dependency or abuse (any caregiver or person living in the residence or present during the hours children are in care, if the agency has reasonable cause).

# DISQUALIFICATIONS

If an applicant or any other person living in the child care residence or present during the hours children are in care, or working with children:

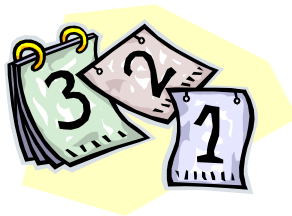
➡ Does not pass their background check

➡ Abuses prescription drugs or uses controlled substances are also disqualified from providing care.

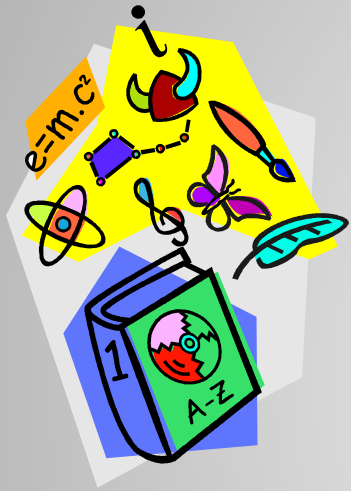
(Would need to provide 12 months of verified abstinence before licensure.)

➡ Refuses to give written consent for the disclosure of criminal history records

- ➔ Has had a child placed in foster care within the past 12 months and the agency determines the reasons for placement reflect on the ability of the provider to give care.
- ➔ Has had a child placed in residential treatment within the past 12 months for emotional disturbance or antisocial behavior and the agency determines that the reasons for the placement reflect on the ability of the provider to give care.







# IMPORTANT DEFINITIONS

**Adult** = A person at least 18 years of age

**Applicant** = The person seeking a license to be the primary provider of child care in the residence.

**Caregiver** = The provider, substitute, helper, or another adult giving care in the residence.



**Child** = A person ten years of age or younger.

**Family Child Care** = Child care for no more than ten children at one time of which no more than six are under school age. The licensed capacity must include all children of any caregiver when the children are present in the residence.

**Group Family Child Care** = Child care for no more than 14 children at any one time. The total number of children includes all children of any caregiver when the children are present in the residence.



**Helper** = A person at least 13 years of age and less than 18 years of age who assists the provider with the care of children.

**Infant** = A child who is at least six weeks of age but less than 12 months of age.

**Licensed Capacity** =  
The total number of children ten years of age or younger permitted at any one time in the residence. The licensed capacity includes all children of any caregiver when the children are present in the residence.

**Newborn** = A child between birth and six weeks of age.

**Preschooler** = A child who is at least 24 months old up to age 5.



**Related** = Any of the following relationships by marriage, blood, or adoption: parent, grandparent, brother, sister, stepparent, stepsister, stepbrother, uncle, aunt, child, niece, nephew. Related also includes a legally appointed guardian.

**Regularly or Regular Basis** = A cumulative total of more than 30 days within any 12 month period.

**School Age** = A child who is at least 5 years of age.



**Supervision** = A caregiver being within sight or hearing of an infant, toddler, or preschooler at all times so that the caregiver is **capable of intervening** to protect the health and safety of the child. For the school age child, it means a caregiver being available for assistance and care so that the child's health and safety is protected.

**Toddler** = A child who is at least 12 months old but less than 24 months old.

**\*\***If specialized infant and toddler family and group family day care, “toddler” means a child who is at least 12 months old but less than 30 months old.





LICENSING OF  
FACILITIES FOR  
CHILDREN FAMILY  
DAY CARE AND  
GROUP FAMILY DAY  
CARE HOMES

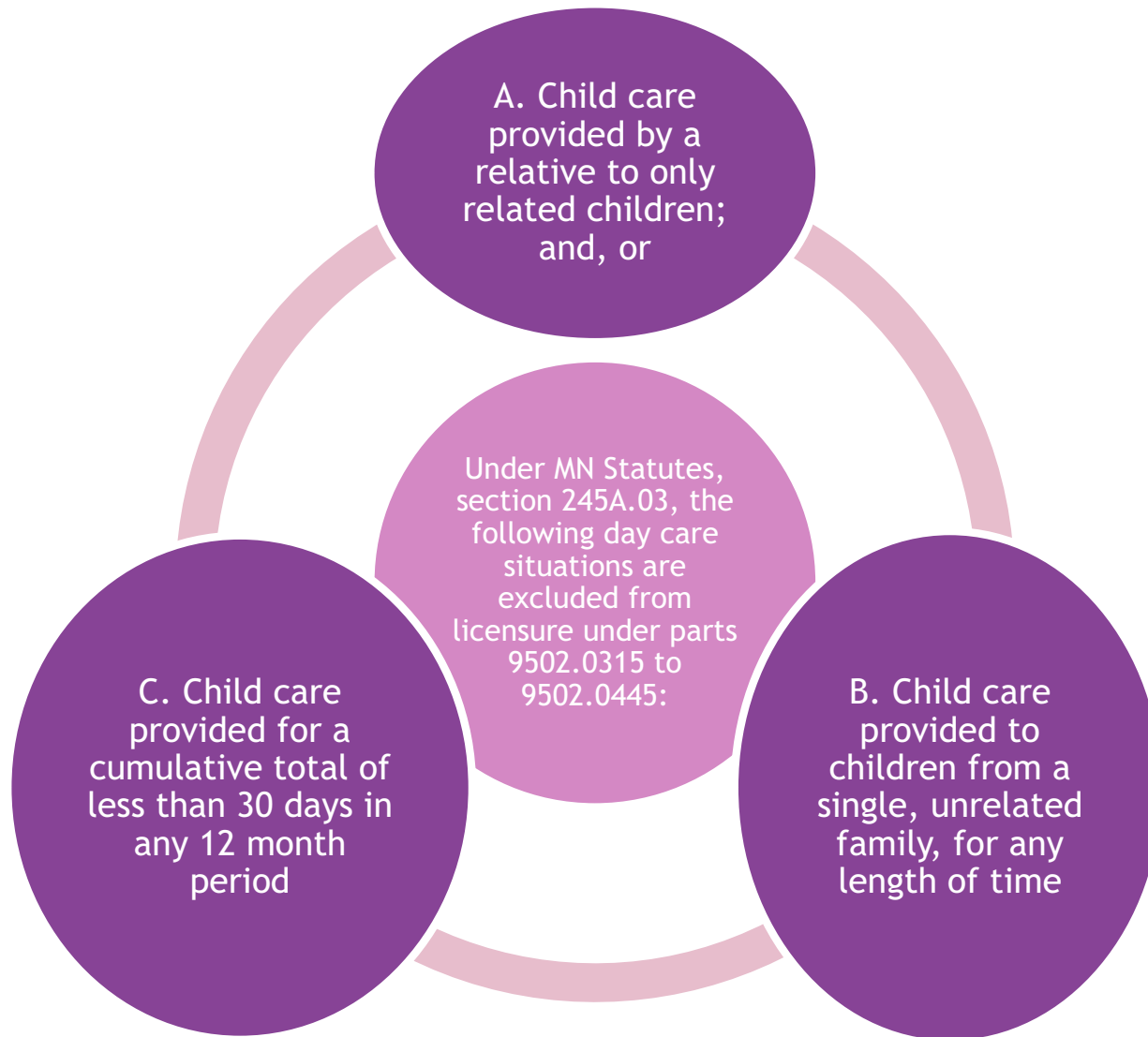
# PURPOSE

The purpose of parts 9502.0315 to 9502.0445 is to establish procedures and standards for licensing family day care and group family day care homes to ensure that **minimum** levels of **care and service are given and the protection, proper care, health, safety, and development of the children are assured.**





# EXCLUSION FOR LICENSURE



# Training

Knowledge  
useful abilities.  
backbone of co  
quired for a tr  
today

# TRAINING



**CPR** = Must have prior to caring for children.  
Every 2 years

**First Aid** = Must have prior to caring for children.  
Every 2 years

**SUIDS** = Must have prior to caring for infants.  
Annually-Face to face/online  
course & video on off year

**AHT** = Must have prior to caring for children.  
Annually-classroom/online-approved video on off year

**Child Growth Development/Behavior Guidance** =  
Before initial license 4 hours then completed  
annually

**Supervising for Safety** = 6 hours before initial license(must be the  
6hr.course)

2 hours annually

Training MUST be approved by the county licensing agency. Verification  
of training. 16 hours annual training.



Thus, SUID/AHT training must be completed face-to-face, through classroom training, or through online training at least once every two years. Eager to Learn now has approved online offerings to fulfill this requirement. These are separate courses available on their website at <https://www.eagertolearn.org/Default.aspx>

Here are specific links to the courses:

SUID-

<https://www.eagertolearn.org/CourseSchedule/CourseDetails/3005>

AHT-

<https://www.eagertolearn.org/CourseSchedule/CourseDetails/3006>

On the years when the caregiver is not receiving SUID and AHT training face-to-face, in a classroom, or online, the caregiver must view a video of no more than one hour in length. The video must be developed or approved by the commissioner. The “video” is comprised of three videos each for SUID and AHT which are now posted on the DHS website. Again, these are for the years the caregiver is not taking the training face-to-face, in a classroom, or through the new Eager to Learn online options (or other future online options that are approved by the commissioner). Here is a link to the videos:

[http://www.dhs.state.mn.us/main/idcplg?IdcService=GET\\_DYNAMIC\\_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=dhs16\\_188848#](http://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=dhs16_188848#)



**Child Passenger Restraint Training** = If transporting children under the age of 9 for any reason.

Every 5 years / At least 1 hour

\*Approved trainers by Dept. of Public Safety.

**Health and Safety I & II**-every 5 years

# INITIAL LICENSE

- ⦿ Granted for one year.
- ⦿ Type A
- ⦿ 10 children
- ⦿ One adult
- ⦿ Six children under school age
- ⦿ No more than three infants and toddlers, of which no more than two are infants.





# LICENSING PROCESS

# LICENSE TERMS



The license must indicate:

- ❖ Number and age groupings of children who may receive care at any one time.
- ❖ The expiration date of the license and location of the residence.
- ❖ The name and address of the provider.
- ❖ That the provider is licensed under parts 9502.0315 to 9502.0445 of Minnesota Rules

You will receive your license from DHS,  
which will include the above information.



# POSTING LICENSE



The provider shall post the license in the residence in a prominent place.

- ❖ Do not cover your license - it must be visible for the parents to see. Place in a location where the parents can easily view.

# NUMBER OF LICENSES

No provider shall be issued a license to operate more than one child care residence.



# ACCESS TO RESIDENCE

The provider shall give authorized representatives of the commissioner or agency access to the residence during the hours of operation to determine whether the residence complies with Rule 2.

## Access includes:

- ⦿ Residence to be occupied by children in care.
- ⦿ Any adjoining land or buildings owned or operated by the applicant or provider in conjunction with the provision of child care and designed for use by the children in care.
- ⦿ Noninterference in interviewing all caregivers and household members present in the residence on a regular basis and present during the hours of operation.
- ⦿ The right to view and photocopy the records and documents specified in part 9502.0405.





# AGENCY RECORDS

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Otter Tail County Human Service shall maintain the following records for each provider:

- ❖ Licensing application
- ❖ Physical health reports on any adult giving care in the residence on a regular basis
- ❖ Any written reports from the fire marshal, agency of a board of health, or building official

- ❖ Agency's initial and any renewal licensing studies
- ❖ If licensed through another jurisdiction, will keep a reference from the licensing authority in that jurisdiction
- ❖ Annual relicensing evaluation by the agency
- ❖ Documentation of any variances
- ❖ Arrest, conviction, or criminal history information and substantiated maltreatment information



# DATA PRIVACY

The agency, department, and the authorized agent shall have access to provider records on children in care to determine compliance with the Rule.

The providers shall not disclose any records on children in care to any persons other than the parents of the child, the agency, the department, the persons required by 9502.0375, subpart 1, and medical or public safety persons if information is necessary to protect the health and safety of the child.





# CAREGIVER QUALIFICATIONS

# AGE

18

An applicant for family day care or group family day care shall be an **adult** at the time of licensure.

# HEALTH

An adult caregiver shall be physically able to care for children.

The applicant shall supply documentation to the agency with the license application that the applicant has had a physical examination from a licensed physician within 12 months prior to initial licensure and is physically able to care for children.





The applicant shall supply documentation to the agency with the license application that all adult caregivers who are assisting with care on a **regular basis** have had a physical examination from a licensed physician within 12 months prior to employment within the residence and are physically able to care for children.

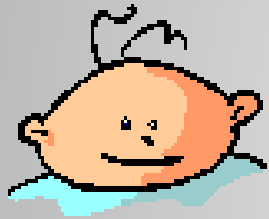


# CHILD CARE INSURANCE COVERAGE

A provider shall have



- ⦿ A certificate of insurance for the residence for general liability coverage for bodily injury in the amount of at least \$100,000 per person and \$250,000 per occurrence; or
- ⦿ If the provider has liability coverage of lesser limits or NO liability coverage, the provider shall give a written notice of the level of liability coverage to the parents of all children in care prior to admission or when there is a change in the amount of insurance coverage; and
- ⦿ The provider shall maintain copies of the notice, signed by the parents to indicate they have read and understood it, in the providers records on the residence.



LICENSED CAPACITY,  
CHILD/ADULT RATIOS,  
AGE DISTRIBUTION  
RESTRICTIONS

# CAPACITY LIMITS



Providers shall comply with capacity limits, which limits the number of children and the number of preschoolers, toddlers, and infants who may be in care at any one time, and provides for the number of adults who are required to be present.

- Providers shall be licensed for the total number of children, **ten years of age or younger**, who are present in the residence at any one time. The licensed capacity must **include all children of any caregiver** when the children are present in the residence.

- Within the licensed capacity, the age distribution restrictions specify the maximum number of children under school age who are in care at any one time.



# SPECIALIZED INFANT AND TODDLER FAMILY CHILD CARE

In specialized  
infant and toddler  
group family child care,  
the caregivers  
**must**  
be adults.



# NEWBORN CARE



When a newborn is in care and only one adult caregiver is present, the newborn shall be the ONLY child under 12 months of age and the provider shall not care for more than two other children at the same time, unless another adult caregiver is also present or the newborn is the provider's own.

Newborn = between birth and six weeks of age

# HELPERS

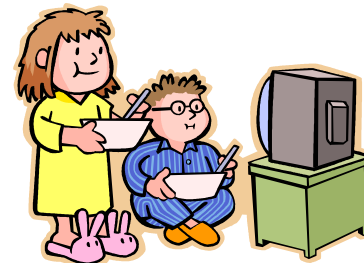
A helper may be used in place of a second adult caregiver when there is no more than one infant or toddler present.

Helper = A person at least 13 years of age and less than 18 years of age who **assists** the provider with the care of children.

# SUPERVISION AND USE OF SUBSTITUTES



- A licensed provider must be the primary provider of care in the residence.
- Children in care must be supervised by a caregiver.
- The use of a substitute caregiver must be limited to a cumulative total of not more than 30 days in any 12 month period.







# CHILD/ADULT RATIOS; AGE DISTRIBUTION RESTRICTIONS

# LICENSE CLASSES

## CHILD/ADULT RATIOS

- ❖ After a provider's first year of licensure, you may choose to remain a Class A or you may move to a Class C1, C2, or C3.
- ❖ If you are licensed as a C2, you may operate under a C1 in certain circumstances.
- ❖ If you are licensed as a C1, you may not operate under a C2 or C3.



# C1

- ⦿ Granted for two years, normally.
- ⦿ 10 children
- ⦿ One adult
- ⦿ Eight children under school age
- ⦿ Of the total children under school age, a combined total of no more than three shall be infants and toddlers. Of this total, no more than two shall be infants.



C2



- ⦿ Granted for two years, normally.
- ⦿ 12 children
- ⦿ One adult
- ⦿ Ten children under school age
- ⦿ Of the total children under school age, a combined total of no more than two shall be infants and toddlers. Of this total, no more than one shall be infant.

# C3



- ⦿ Granted for two years, normally.
- ⦿ 14 children
- ⦿ Two adults
- ⦿ Ten children under school age
- ⦿ Of the total children under school age, a combined total of no more than four shall be infants and toddlers. Of this total, no more than three shall be infants.

A helper may be used in place of a second adult caregiver when there is no more than one infant or toddler present.



# REPORTING TO AGENCY

# REPORTING TO AGENCY



- ❖ All caregivers shall report any suspected physical abuse, sexual abuse, or neglect of a child to the agency or police as required by MN Statutes 626.556. If a caregiver has reasonable cause to believe a child has died as a result of physical or sexual abuse or neglect, the caregiver shall report this information to the county medical examiner or coroner. **(There must be a statement in your policy to notify parents that you are a mandated reporter.)**
- ❖ Within 30 days of any change in the regular membership of the household within the child care residence or the addition of an employee who will regularly be providing care.



Regularly = more than 30 days within any 12 month period

- Immediately of any suspected case of physical or sexual abuse or neglect.
- Within 48 hours after the occurrence of a fire that requires the service of a fire department.



- Immediately after the occurrence of any serious injury or death of a child within the child care residence.



Serious Injury = One that is treated by a physician.



# RULE SUMMARY FOR PARENTS

A descriptive summary of parts 9502.0315 to 9502.0445 shall be distributed to the parent by the provider at the time a child is admitted to care. There must also be a statement in your policy regarding where to find Rule 9502 along with a grievance policy.

Access on website at:

<http://www.leg.state.mn.us/>

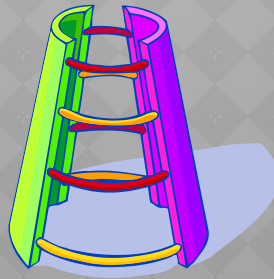
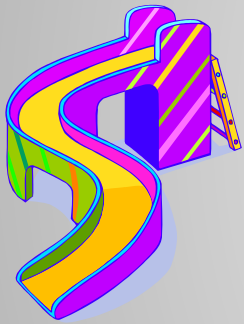
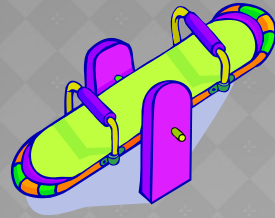


# NONDISCRIMINATION

No caregiver shall discriminate in relation to admissions on the basis of race, creed, color, national origin, religion, or sex.



# ACTIVITIES AND EQUIPMENT



# GENERAL ACTIVITIES

Day care activities must provide for the **physical, intellectual, emotional, and social development** of the child. The environment must facilitate the implementation of the activities.

**Activities must:**



Be scheduled indoors and outdoors, weather permitting;



Be appropriate to the developmental stage and age of the child;



Include active and quiet activity; and



Contain provider-directed and child-initiated activity.

# EQUIPMENT



The provider must have the equipment specified in the next few slides in adequate quantities for the number and ages of children in care and to carry out activities.

Equipment may be new, used, commercial, or homemade, as long as it is appropriate for the ages of the children and activities for which it will be used, safe, and in good repair.

# NEWBORN OR INFANT ACTIVITIES

## The provider shall:

- ❖ **Hold the infant or newborn** during bottle feedings until the child can hold its own bottle.
- ❖ **Bottles must NOT be propped.**
- ❖ Respond to the infant or newborn's attempts to communicate.
- ❖ Provide freedom of movement to the infant or newborn during a large part of the waking day to the extent that safety and weather permits. The noncreeping child shall spend part of each day out of a crib or infant seat. The creeping infant or newborn shall have freedom to explore outside of the crib or infant seat.



- ❖ Give the infant or newborn opportunity to stimulate the senses by providing a variety of activities and objects to see, touch, feel, smell, hear, and taste.



- ❖ Provide activities for the infant or newborn that develop the child's manipulative and fine motor skills, self-awareness, and social responsiveness.



- ❖ The following minimum equipment is required for **each** infant or newborn: **An infant seat or high chair**

- ❖ **A crib, portable crib, or playpen with waterproof mattress or pad which meets requirements.**



# TODDLER ACTIVITIES

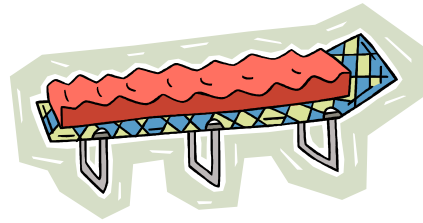
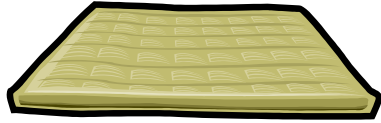
## The provider shall:

- ❖ Provide the toddler with freedom of movement and freedom to explore outside the crib or playpen.
- ❖ Talk to, listen to, and interact with the toddler to encourage language development.
- ❖ Provide the toddler with large muscle activities and activities which develop the child's small muscles and manipulative skills.
- ❖ Develop and stimulate learning by reading stories to the child or looking at picture books together.
- ❖ Give the toddler opportunities to stimulate the senses by providing a variety of age appropriate activities and objects to see, touch, feel, smell, hear, and taste.



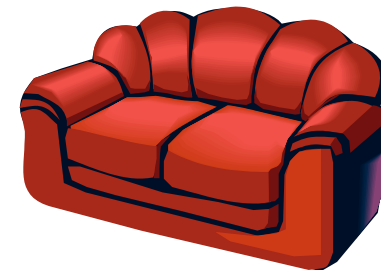
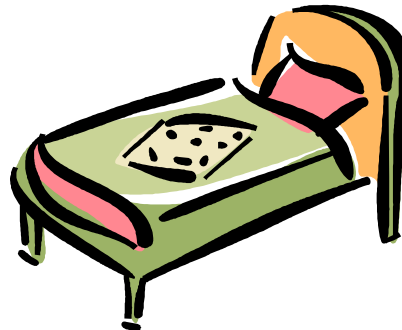
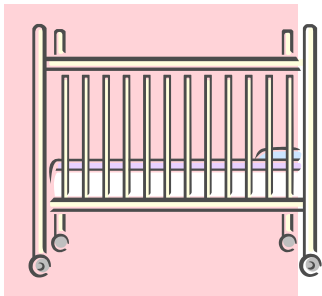


# TODDLER EQUIPMENT



Each toddler shall be provided with:

Mat, Crib, Cot, Bed, Sofa **Or** Sleeping Bag



# PRESCHOOLER ACTIVITIES

## The provider shall:

- ❖ Encourage conversation between the child and other children and adults.
- ❖ Provide opportunity to play near and with other children; provide time and space for individual and group play; allow for quiet times to talk or rest; allow for unplanned time and individual play time.
- ❖ Foster understanding of personal and peer feelings and actions and allow for the constructive release of feelings and anger through discussion or play.
- ❖ Give assistance in toileting and provide time to carry out self-help skills and provide opportunity to be responsible for activities like putting away play equipment and helping around the house.



❖ Provide opportunity for each child to make decisions about daily activities and to take credit for the consequences of decisions.

❖ Provide time and areas for age appropriate large muscle play.

❖ Provide learning, small muscle, manipulative, creative or sensory activities.

❖ Read stories, look at books together, and talk about new words and ideas with the child.



# PRESCHOOLER EQUIPMENT

Each preschooler shall be provided with:



Mat

Bed

Cot

Sofa

Or

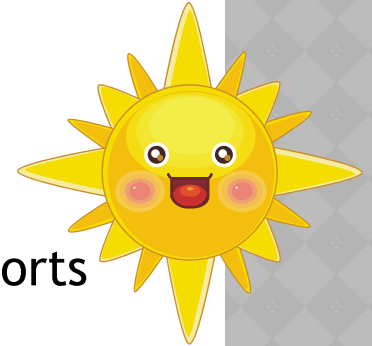
Sleeping Bag



# SCHOOL AGE ACTIVITIES

## The provider shall:

- ❖ Provide opportunities for individual discussion about the happenings of the day and planning for activities.
- ❖ Provide space and opportunity for games, activities, or sports using the whole body, outdoors, weather permitting.
- ❖ Provide space and opportunity for individual rest and quiet time.
- ❖ Allowed increased freedom as the child demonstrates increased responsibility.
- ❖ Provide opportunities for group experiences with other children.
- ❖ Provide opportunities to develop or expand self-help skills or real-life experiences.
- ❖ Provide opportunities for creative and dramatic activity, arts and crafts, or field trips.



# WRITTEN PERMISSION

**Written permission** must be obtained from the parent to allow a school age child in care to participate in activities away from the residence.





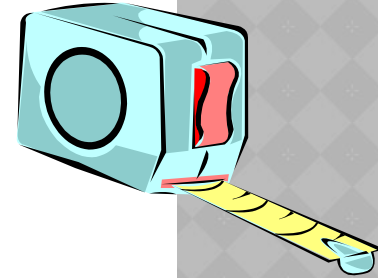
# PHYSICAL ENVIRONMENT

# INDOOR SPACE

The licensed capacity of the child care residence must be limited by the amount of usable indoor space available to children. A minimum of *35 square feet* of usable indoor space is required per child.

Bathrooms, closets, space occupied by major appliances, and other space not used by children may **not** be counted as usable space. Space occupied by adult furniture, if it is used by children, may be counted as usable indoor space.

Usable indoor space may include a basement if it has been inspected by a fire marshal, is free of hazard, and meets the minimum exiting standards.





# OUTDOOR PLAY SPACE



There must be an outdoor play space of at least **50 square feet per child** in attendance, adjacent to the residence, for regular use, or a park, playground, or play space within 1,500 feet of the residence.

**On-site supervision** must be provided by a caregiver for children of **less than school age** when play space is not adjacent to the residence.

Enclosure (fence) may be required by the agency to provide protection from rail, traffic, water, or machinery hazard.

The area must be free of litter, rubbish, toxic materials, water hazards, machinery, unlocked vehicles, human or animal wastes, and sewage contaminants.

# WATER HAZARDS

Swimming and wading pool, beaches, or other bodies of water on or adjacent to the site of the residence must be **inaccessible** to children except during period of supervised use.

Wading pools must be kept clean.

When children use a swimming pool or beach, an attendant trained in first aid resuscitation shall be present.

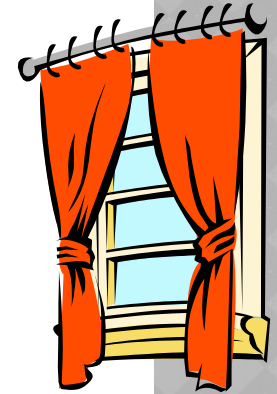
Any public swimming pool used by children must meet requirements.

**Chapter 4717 has requirements/more information regarding wading and swimming pools.**



# MEANS OF ESCAPE

From each room of the residence used by children, there must be **two means of escape**. One means of escape must be a stairway or door leading to the floor of exit discharge. The other must be a door or window leading directly outside. The window must be openable without special knowledge. It must have a clear opening of not less than 5.7 square feet and have a minimum clear opening dimension of 20 inches wide and 24 inches high. The window must be within 48 inches from the floor.



# OCCUPANCY SEPARATIONS

Child care residences with an attached garage must have a self-closing, tight-fitting solid wood bonded core door at least 1-3/8 inches thick, or door with a fire protection rating of 20 minutes or greater and a separation wall consisting of 5/8 inch thick gypsum wallboard or its equivalent on the garage side between the residence and garage.



# VERTICAL SEPARATIONS

For family child care homes with a licensed capacity of more than ten children, a 1-3/4 inch solid wood core door or a door and frame with at least 20 minute fire protection rating, must be provided whenever more than two floors of the residence are connected. These doors must be equipped with self-closing devices.



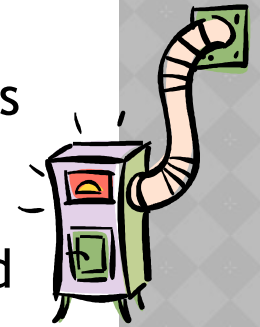
# HEATING AND VENTING SYSTEMS

The following must be met:

- ❖ Stove and heater locations must not block escape in case of a fire.
- ❖ Gas, coal, wood, kerosene, or oil heaters must be vented to the outside in accordance with the State Building Code.



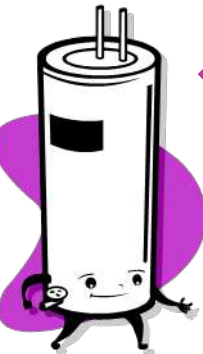
- ❖ Combustible items must not be located within 36 inches of the furnace or other heating sources.



- ❖ Whenever in use, fireplaces, wood-burning stoves, solid fuel appliances, space heaters, steam radiators, and other potentially hot surfaces, such as steam pipes, must be protected by guards to prevent burns. All fireplaces, wood-burning stoves, space heaters, steam radiators, and furnaces must be installed according to the State Building Code.



- ❖ The furnace, hot water heater, and workshop area must be inaccessible to children. Separation may be by a door, partition, or gate. There must be allowance for air circulation to the furnace. Ventilation of usable space must meet the requirements of the State Building Code.

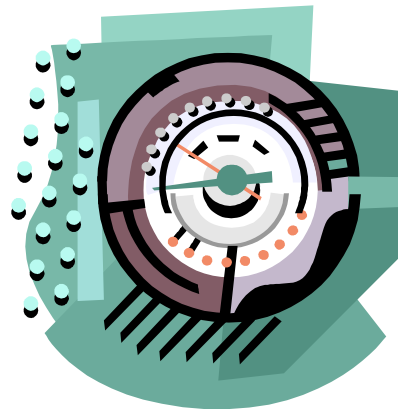


- ❖ Outside doors and windows used for ventilation in summer months must be screened when biting insects are prevalent.



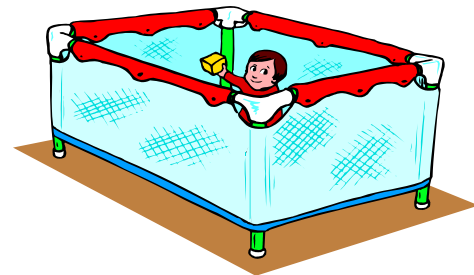
# TEMPERATURE

A minimum temperature of **62 degrees** Fahrenheit must be maintained in indoor areas used by children.



# INFANT AND NEWBORN SLEEPING SPACE

There must be a safe, comfortable sleeping space for each infant and newborn. A crib, portable crib, or playpen with waterproof mattress or pad must be provided for each infant or newborn in care. The equipment must be of safe and sturdy construction that conforms to the Code of Federal Regulations, its successor, or have a bar or rail pattern such that a 2-3/8 inch diameter sphere cannot pass through.



# STAIRWAYS

All stairways must meet the following conditions:

- ❖ Stairways of three or more steps *must* have handrails.
- ❖ Any open area between the handrail and stair tread must be enclosed with a protective guardrail as specified in the State Building Code. The back of the stair risers must be enclosed.
- ❖ Gates or barriers must be used when children between the ages of six and 18 months are in care.
- ❖ Stairways must be well-lite, in good repair, and free of clutter and obstructions.

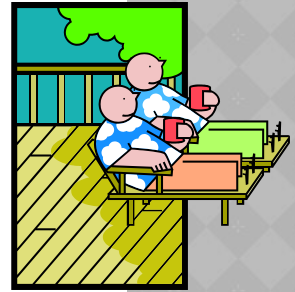


# DECKS

Decks, balconies, or lofts used by children more than 30 inches above the ground or floor must be surrounded by a protective guardrail and be constructed in accordance with the State Building Code. Wooden decks must be free of splinters and coated with wood preservative, paint, or constructed with treated wood.



# LOCKS AND LATCHES



Door locks and latches must meet the following guidelines:

- ❖ A **closet door** latch must be made so that children can open the door from inside the closet.
- ❖ Every **bathroom** door lock must permit opening of the locked door from the outside and the opening device must be readily accessible to all caregivers.

Double cylinder (key required both sides) locks on exit doors are prohibited.



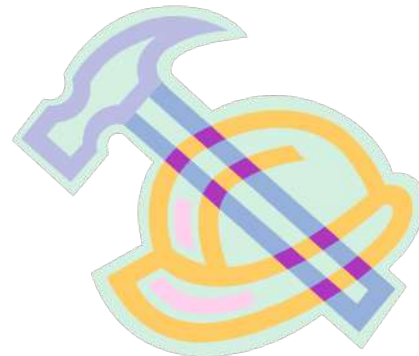
# SEWAGE DISPOSAL

Child care residences must have toilet facilities and sewage disposal systems that conform to the State Building Code or local septic system ordinances. The toilets must flush thoroughly. Outdoor toilets are permissible when local ordinances allow.



# CONSTRUCTION / REMODELING

During construction or remodeling, children shall not have access to dangerous construction or remodeling areas within or around the residence.



# INTERIOR WALLS AND CEILINGS

The interior walls and ceilings within the residence, as well as corridors, stairways, and lobbies must have a flame spread rating of 200 or less.



# EXTINGUISHERS

A portable, operational, multipurpose, dry chemical fire extinguisher with a minimum **2 A 10 BC rating** must be maintained in the **kitchen and cooking areas** of the residence **at all times**. Extinguishers need to be serviced annually or a new one purchased.

**All** caregivers shall know how to use the fire extinguisher.



# SMOKE DETECTION SYSTEMS

Smoke detectors that have been listed by the Underwriter Laboratory must be properly installed and maintained on all levels.



When doing your monthly fire drill, be sure to activate the smoke detectors so the children are aware of the sound and change batteries as required. Replace smoke detectors every 10 years and keep receipt for proof of purchase date.

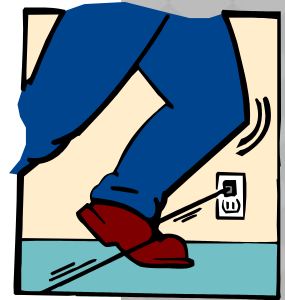


# ELECTRICAL SERVICES

The following electrical guidelines must be met:

- ❖ All electric receptacles accessible to children under first grade must be tamper-proof or shielded when not in use.
- ❖ All major electrical appliances must be properly installed, grounded in accordance with the state electric code, and in good working order.

- ❖ Extension cords shall not be used as a substitute for permanent wiring; extension cords and flexible cords shall be not be affixed to structures, extended through walls, ceilings, floors, under doors or floor coverings, nor be subject to environmental damage or physical impact.
- ❖ Electrical wiring must be sized to provide for the load and be in good repair.



## SMOKING PROHIBITED IN GROUP FAMILY CHILD CARE HOME

Smoking is prohibited in a family child care provider's home during hours of operation.

MN Statutes 144.414, Subd. 2.



The proprietor of a family or group family child care must disclose to parents or guardians of children in care if the proprietor **permits smoking outside of its hours of operation.** Disclosure must include **posting on the premises a conspicuous written notice and orally informing parents or guardians.**





# SANITATION AND HEALTH

# SANITATION AND CLEANLINESS

The residence must be free from accumulations of dirt, rubbish, or peeling paint.



## PEST CONTROL

Effective measures must be taken to protect the home against vermin and insects. Chemicals for insect and rodent control must **not** be applied in areas accessible to children when children are present.



## RUBBISH

Indoor and outdoor garbage and rubbish containers must **not** be accessible to infants and toddlers.



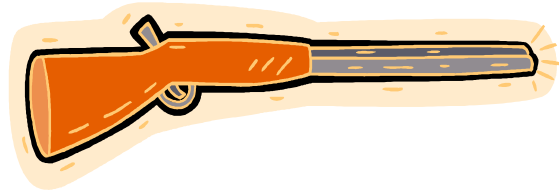
## TOXIC SUBSTANCES

All medicines, chemicals, detergents, poisonous plants, alcoholic beverages, and other toxic substances must be **inaccessible** to children. They must be stored away from food products.

Equipment or toys which are mouthed or may be chewed must be free of lead-based paint. Toys and equipment with chipped, cracked, or peeling paint must be tested to verify the absence of lead or be replaced.



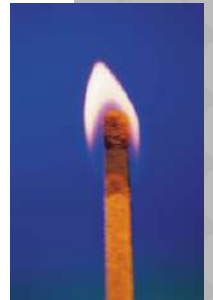
# FIREARMS



All firearms must be **unloaded** and **inaccessible** to children.

Ammunition and firearms must be stored in *separate* locked areas.

# HAZARDOUS ACTIVITY MATERIALS



Knives, matches, plastic bags, and other potential hazards must be kept out of the reach of infants, toddlers, and preschoolers.

The use of potentially hazardous materials and tools must be supervised.



# FIRST AID KIT



The provider shall have a first aid kit that contains:

Bandages, sterile compresses, scissors, ice bag or cold pack, oral or surface thermometer, mild liquid soap, adhesive tape. A first aid manual **must** be included. The kit and manual **must** be accessible and taken on field trips.



# EMERGENCIES

- ❖ The provider shall be prepared for emergencies.
- ❖ An operable telephone must be located within the residence.
- ❖ Emergency phone numbers must be posted by the telephone. The numbers must be those of the local fire department, police department, emergency transportation, and poison control center.



The emergency phone numbers of the parents and child's physician and dentist must be readily available within the residence and taken on field trips.



Prior arrangements must be made for a substitute to provide care during emergencies. Which is also noted in your policy.



For severe storms and tornadoes, the provider shall have a designated area within the residence that children shall go to for cover, and an operable battery flashlight, and portable radio or TV available.

The provider shall have a written fire escape plan and a log of monthly fire and storm drills on file in the residence.





The plan must be approved by the agency and specify:

- Emergency phone numbers.
- A place to meet outdoors for roll call.
- Smoke detector and fire extinguisher locations.
- Plans for the monthly fire and tornado drills sessions.
- Escape routes to the outside from all levels used by children. In building with three or more dwelling units, enclosed exit stairs must be indicated.



# CHILD CARE EMERGENCY PLAN

- ⦿ Write a Child Care Emergency Plan for your program-DHS template
- ⦿ Post the Emergency Plan in a prominent location in your home
- ⦿ Provide an electronic or paper copy to child's parent or legal guardian upon enrollment
- ⦿ Train all caregivers on the plan prior to caring for children and document training
- ⦿ Review and update annually
- ⦿ Keep first page of A&A form for each child with emergency kit

# ALLERGIES AND BODILY FLUIDS

- ⦿ For children with identified allergies, a Family Child Care Allergy Information form must be completed and kept with the child's records
- ⦿ Providers must clean and disinfect any surfaces that come in contact with potentially infectious bodily fluids including blood and vomit
  - Supplies required are plastic bags with secure ties, disposable gloves and eye protection
  - Sharps container if applicable

# TRANSPORTATION OF CHILDREN

When transportation is given to children in a motor vehicle other than a bus or school bus operated by a common carrier, the following provision for their safety must be made:



A child may be transported only if the child is fastened in a safety seat, seat belt, or harness appropriate to the child's weight and the restraint is installed and use in accordance with the manufacturer's instructions.

A child under the age of four may be transported only if the child is securely fastened in a child passenger restraining system which meets the federal motor vehicle safety standards.

Any vehicle operated by the provider for the transportation of children must be licensed in accordance with the laws of the state and driver shall hold a current, valid driver's license.

# CHILD PASSENGER RESTRAINT TRAINING

Programs licensed to serve children under nine years of age must have training:

- Prior to transporting children under 9
- At least one hour in length
- Provided by certified and approved trainers
- Repeated every five years.



Written permission to transport children must be obtained from parents.

No child is permitted to remain unattended in any vehicle.



# Booster Seat Law

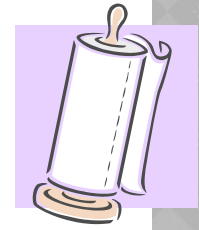
Effective  
July 1, 2009

Under MN's booster seat law, a child cannot use a seat belt alone until they are age 8 or reach 4 feet 9 inches tall - whichever comes first.

It is recommended to keep a child in a booster based on their height, rather than their age. Kids that are shorter than 4 feet 9 inches aren't ready to use a seat belt alone.

# SEPARATION OF PERSONAL ARTICLES

Separate towels, wash cloths, drinking cups, combs, other personal articles, must be used for each child.



## PETS



All pets housed within the residence shall be maintained in good health and limited to dogs, cats, fish, guinea pigs, gerbils, rabbits, hamsters, rats, mice, and birds if the birds are clear of chlamydia and psittaci.

- ⦿ Parents are notified prior to admission of the presence of pets in the residence.
- ⦿ Rabies shots and tags are current for all dogs and cats.
- ⦿ Children handle animals only with supervision.





Pet cages are located and cleaned away from any food preparation, storage, or serving areas.

Play areas are free of animal excrement not confined to pet cages.

Parents of a child whose skin is broken by an animal bite or scratch, are notified of the injury on the day the injury occurs.

The agent of a board of health as authorized under MN Statutes, 145A.04, is immediately notified whenever a child in care is bitten by an animal, the notification shall be given before any steps are taken to destroy the animal, and the provider shall take reasonable steps to confine the animal.

# DIAPERS



Children in diapers shall be kept clean and dry. The following sanitary procedures must be used to reduce the spread of communicable disease:

An adequate supply of clean diapers must be available for each child and stored in a clean place *inaccessible* to children. If cloth diapers are used, parents must provide a change of the outer plastic pants for each fecally soiled diaper change. Cloth diapers, except those supplied by a commercial diaper service, and plastic pants, if supplied by parents, must be labeled with the child's name.

## Diapers

Cloth diapers, except those supplied by a commercial diaper service, plastic pants, and soiled clothing must be placed in the plastic bag after removal and sent home with the parent daily.

Diapers and clothing must be changed when wet or soiled.

For disposable diapers, a covered diaper disposal container must be located in the diaper changing area and lined with a disposable plastic bag. The container must be emptied when full, and at least daily.

Single service disposable wipes or freshly laundered cloths must be used for washing a soiled child. A child who has soiled or wet must be washed with a disposable wipe or a freshly laundered cloth before rediapering.



- ❖ Diapering must not take place in a food preparation area.
- ❖ The diaper changing area must be covered with a smooth, nonabsorbent surface.
- ❖ If the surface is not disposable and is wet or soiled, it must be washed with soap and water to remove debris and then disinfected with a solution of at least *two teaspoons of chlorine bleach to one quart of water*. Other products may be approved.
- ❖ If the surface is not soiled with feces or urine, then it must be disinfected with the solution of chlorine bleach and water after each diapering.

# TOILET TRAINING CHAIRS



Toilet training chairs, chairs, stools, and seats must be washed with soap and water when soiled, and at least *daily*.

# HAND WASHING

- ⦿ Caregivers shall wash their hands with soap and water after each diaper change, after assisting a child on the toilet, after washing the diapering surface, and before food preparation. Hands must be dried on a single use towel.
- ⦿ A child's hands must be washed with soap and water when soiled, after the use of a toilet or toilet training chair, and before eating a meal or snack. The provider shall monitor and assist the child who needs help.
- ⦿ In sinks and tubs accessible to children, the water temperature must not exceed **120 degrees Fahrenheit** to prevent children from scalding themselves while washing.







# CARE OF ILL CHILDREN, MEDICINE ADMINISTRATION

The provider shall notify the parent immediately when a child in care develops any of the following symptoms:

Diarrhea



Vomiting

Rash, other than mild diaper or heat related rash.

Underarm temperature of 100 degrees Fahrenheit or over, or an oral temperature of 101 degrees Fahrenheit or over.

The provider shall follow written instructions from an authorized agent or the physician of an ill child placed in the provider's care if the child has an illness requiring physician instructions or prescription medication.



The provider shall require that a child's parent notify the provider within 24 hours of the diagnosis of a serious contagious illness or parasitic infestation so the provider may notify the parents of other children in care.

The provider shall inform a parent of each exposed child the same day the provider is notified of a positive diagnosis that has been made for any of the illnesses or parasitic infestations in part 4605.7000.

The provider shall notify the authorized agent or MN Department of Health of any suspected case of reportable disease as specified in part 4605.7000.



# WATER, FOOD, AND NUTRITION

# WATER



- ❖ There must be a safe water supply in the residence.
- ❖ Drinking water must be available to the children and offered at **frequent intervals** in **separate or single service** drinking cups or bottles.
- ❖ Water from privately owned wells, must be tested **annually** by a MN Health Department certified laboratory for coliform bacteria and nitrate nitrogen's to verify safety.
- ❖ The provider shall file a record of the test results with the agency. Retesting and corrective measures may be required by the agency if results exceed state drinking water standards or where the supply may be subject to off-site contamination.

# MILK



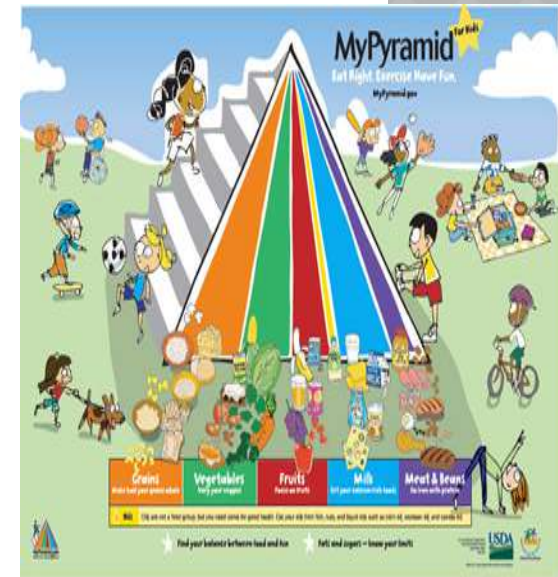
Milk served to children in care must be pasteurized.

## MEALS AND SNACKS

Well balanced meals and snacks must be offered daily.

Food served during the day must include servings **from each of the basic food groups** as defined by the US Department of Agriculture's Code of Federal Regulations, title 7, section 226.20.

The provider shall follow written instructions obtained from the parents, **at the time of enrollment**, on each child's special diet or food needs. Parents shall be consulted about special food preferences.



Flexible feeding schedules must be provided for infants and toddlers, and the infant or toddler's usual diet and feeding schedule must be followed.

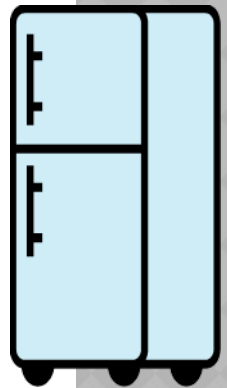
Food, lunches, and bottles brought from home must be labeled with the child's name and refrigerated when necessary. Bottles **must** be washed after use.



Also must be noted in your policy book.

## FOOD SAFETY

- Food must be handled and stored properly to prevent contamination and spoilage.
- Appliances used in food storage and preparation must be safe and clean.
- Food requiring **refrigeration** must be maintained at no more than **40 degrees Fahrenheit**. Food requiring **heating** must be maintained at no less than **150 degrees Fahrenheit** until ready to serve. *Frozen food must be maintained in a solid state until used.*



Fresh and frozen foods, properly canned tomatoes, pickled foods, and canned fruits such as apples, berries, peaches, apricots, jams, and jellies **may** be served to children in care.

**No** hermetically sealed (canned), nonacid or low-acid food which has been processed in a place other than a commercial food-processing establishment shall be served to children in care. Low-acid food includes meats, fish, poultry and most vegetables which are required to be steam-pressure canned by the US Department of Agriculture in Bulletin number 8, “Home Canning of Fruits and Vegetables,” 1983 Edition.

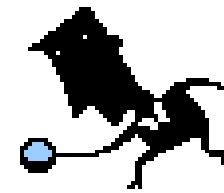






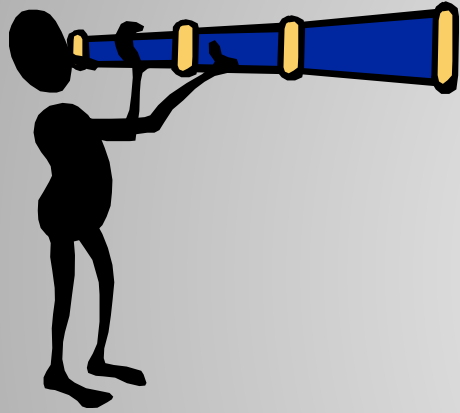
# COMPLAINT INVESTIGATIONS/ NEGATIVE ACTIONS

# LICENSING VIOLATIONS



- ★ **When a report or complaint comes in, review by agency licensor and/or agency team will occur .**
- ★ **Some investigations will involve Child Protection, Licensing Social Worker and Law Enforcement.**
- ★ **Upon completion of the investigation, the agency shall take the appropriate licensing actions indicated by the findings of the investigation.**
- ★ **Child Care providers need to make sure they report and document any incidences.**
- ★ **Investigations happen!**





WHAT DOES  
SUPERVISION MEAN?

An approved adult caregiver (18 years or over) is always present.

Again, must be within sight or hearing of an **infant, toddler, or preschooler** at all times so that you are **capable of intervening** to protect the health and safety of the child.

For **school age** children, you must be available for assistance and care so that the child's health and safety is protected.



Monitors should be used for children under school age if napped on a different level than the caregiver or if in a room with a closed door.



Infants should be visually checked on at least every 10-15 minutes.

School age children may go outside without an adult if on the provider's property, as long as an adult is available to protect their health and safety.

Written parental permission is needed for a school age child to be off the provider's property **for any reason**.

An adult must be present with children in a vehicle. No child will be left alone in a vehicle.



# OUTSIDE SAFETY REMINDERS

All children must go outside each day, weather permitting. Refer to the Wind Chill and Heat Index chart that you were given for 'weather permitting' recommendations.



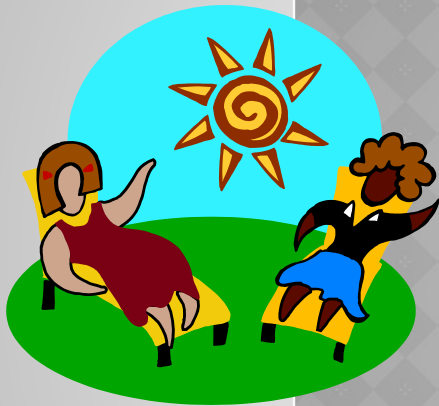
Inform parents to bring appropriate clothing.

Make sure all hazards are inaccessible. If you are required to have a fence, be sure you are in the fence at all times.



If children have access to your garage, whether it is to get riding toys out or come into the house after playing outside, then all toxins, tools, or any other hazardous material must be inaccessible.





# EFFECTIVE COMMUNICATION WITH PARENTS

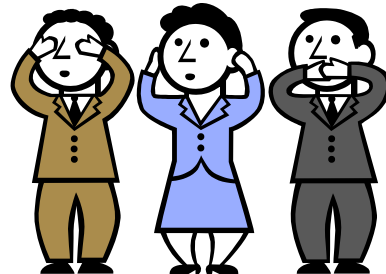


Do parents want more information about their child's day?

Is pick up time crazy, making it difficult to communication with parents?

Do you feel like parents aren't "hearing" what you are saying?

Here are some tips to try to promote more effective communication:





Provide parents with a daily sheet information of their child's day.

Meals served, diaper changes, behavior issues, fun activities, etc.

If a daily sheet is too much, do you have a bulletin board where you could post your daily menu, schedule, etc.?

Schedule a “conference” or a time in the evening to call a parent to discuss sensitive issues.

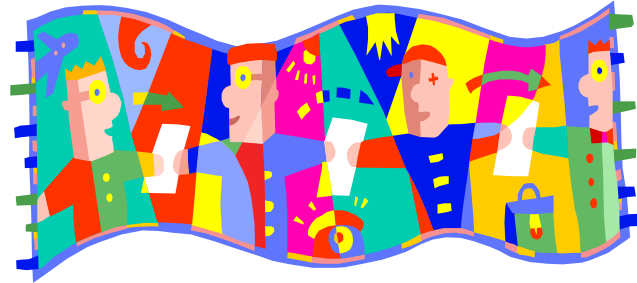


Do not discuss these issues in front of other children or parents.

You want to have the parent’s undivided attention.

Include the parent in a discipline plan. List to their ideas as to what works with their child at home.

Be honest regarding behaviors, let parents know what their child is doing that is not OK.



Remember to share the good stuff!!

Parents want to hear what their child is doing and learning throughout the day.

Let parents know if you are planning a special lesson or activity so that they can re-enforce the ideas at home.

Let parents know when their child meets a new developmental or social milestone.

Be open to constructive criticism.



Know that parents have made the very difficult decision to leave their child in your care. Be proud that they have entrusted you with their child's care!

Listen to concerns that they have and put yourself in their shoes.



Be accommodating to reasonable requests.

Most importantly, enjoy the kids! Keeping the lines of communication open with parents will make your job more enjoyable and rewarding.

# **Child care providers are held to higher standards.**



**Our children are our most precious resource, and it's up to all of us to ensure that they are in safe and healthy environments.**

It is **YOUR** responsibility  
to **read, know** and **understand**  
the **Rule** and **Statutes**  
regarding licensed child care.

