



Iowa Department of Human Services

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GENERAL LETTER NO. 12-E-AP-32

ISSUED BY: Bureau of Child Care
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 12, Chapter E, **CHILD CARE CENTER APPENDIX**, Comm. 204, *Child Care Centers and Preschools Licensing Standards and Procedures*, Cover page, revised; Welcome page, revised; Contents (pages 1 through 5), revised; pages 4, 8, 21 through 24, 26, 27, 36, 37, 38, 53, 55 through 60, 80, 81, 103, 104, 106, 133, 145, 146, and 161, revised; pages 36a and 114a, new; and form 470-2310 and 470-2310(S), *Record Check Evaluation*, revised.

Summary

Comm. 204, *Child Care Centers and Preschools Licensing Standards and Procedures*, is revised to:

- ◆ Update the contact information for the Child Care Licensing Program Manager identified for prospective providers.
- ◆ Update the definition of program exemption.
- ◆ Update the child care consultants area map.
- ◆ Include information regarding the Quality Rating System.
- ◆ Include contact information for Child Care Resource and Referral under Iowa Resources.
- ◆ Include First Children's Finance as a national resource.
- ◆ Include a link to the Prepare Iowa website.
- ◆ Update information regarding:
 - Written policy requirements and biting incidents.
 - Volunteer and substitute requirements.
 - Iowa record checks and national criminal history record checks.
 - The training registry.
 - Personnel records requirements.
 - First aid kit requirements.
 - Requirements for recording incidents.

- ◆ Include new requirements regarding supervision and access.
- ◆ Include Iowa Department of Public Health information regarding radon testing.
- ◆ Include federal crib standards.
- ◆ Include water availability requirement by CACFP.

Effective Date

Immediately.

Material Superseded

This material replaces the following pages from Employees' Manual, Title 12, Chapter E, Appendix:

Comm. 204

Cover page	August 2008
Welcome page	August 2008
Contents (pages 1-5)	August 2008
4, 8, 21-24, 26, 27, 36-38, 53, 55-60, 80, 81, 103, 104, 106, 133, 145, 146, 161	August 2008
470-2310	6/11
470-2310(S)	6/11

Additional Information

Refer questions about this general letter to Ryan Page, Child Care Regulatory Program Manager.



Child Care Centers and Preschools

LICENSING STANDARDS AND PROCEDURES

WELCOME TO CHILD CARE PROVIDERS

On an average day in Iowa, more than 75,000 children are cared for in more than 1,500 licensed child care centers, preschools, and before- and after-school programs across the state.

As a current or potential provider of care to those children, you play a pivotal role in the development, nurturing, health, safety and support of these children. The research is undisputed:

- ◆ The first three years of life are of critical importance in a child's overall development and ability to learn.
- ◆ The caregiver relationship (parent or provider to child) is the single strongest determinant of children's emotional and social development.
- ◆ The availability of after-school care programs reinforces school-age children's self-esteem and sense of community, while significantly decreasing the likelihood of children engaging in unhealthy and dangerous behaviors.

The handbook provides information on the process to obtain a license to operate a child care center and the state regulations that centers must follow. The rationale behind a regulation and "best practice" guidelines are offered to assist you in implementing these standards.

If you have questions regarding the contents of the licensing standards handbook, contact:

Licensed Centers

1. The child care consultant assigned to your center.

[*Insert label or business card*]

Prospective Providers

1. The child care consultant assigned to your area. To get the name of the consultant assigned to your area, call the Department's child care center licensing office at (515) 725-2731.
2. The Department's child care licensing program manager.
DHS Division of Child and Family Services
1305 E Walnut Street, 5th Floor
Des Moines, IA 50319-1114
Phone: (515) 281-7714

CHILD CARE CENTERS AND PRESCHOOLS
LICENSING STANDARDS AND PROCEDURES

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“Get-well center” means a facility that cares for a child with a temporary illness of short duration for short enrollment periods.

“Infant” means a child who is less than 24 months of age.

“Parent” means parent or legal guardian.

“Preschool” means a child care facility which provides to children ages three through five, for periods of time not exceeding three hours per day, programs designed to help the children to develop intellectual skills, social skills, and motor skills, and to extend their interest and understanding of the world about them.

“School” means kindergarten or a higher grade level.

Note: The contents of this handbook apply to licensed child care centers and preschools. A “licensed” center is one that provides care for periods of less than 24 hours to seven or more children in a place other than the children’s home and that is not a child development home.

A child care home provider that cares for six or more children must be “registered” with the state as a child development home. There are restrictions on the numbers of children by age categories that a child development home can serve and assistants are required when serving a certain number of children. Requirements for child development homes are found in “Child Development Home Registration Guidelines,” Comm. 143. You can obtain these guidelines by contacting the DHS office in your county or you can find them on the Department’s web site at <http://dhs.iowa.gov/>.

ACRONYMS

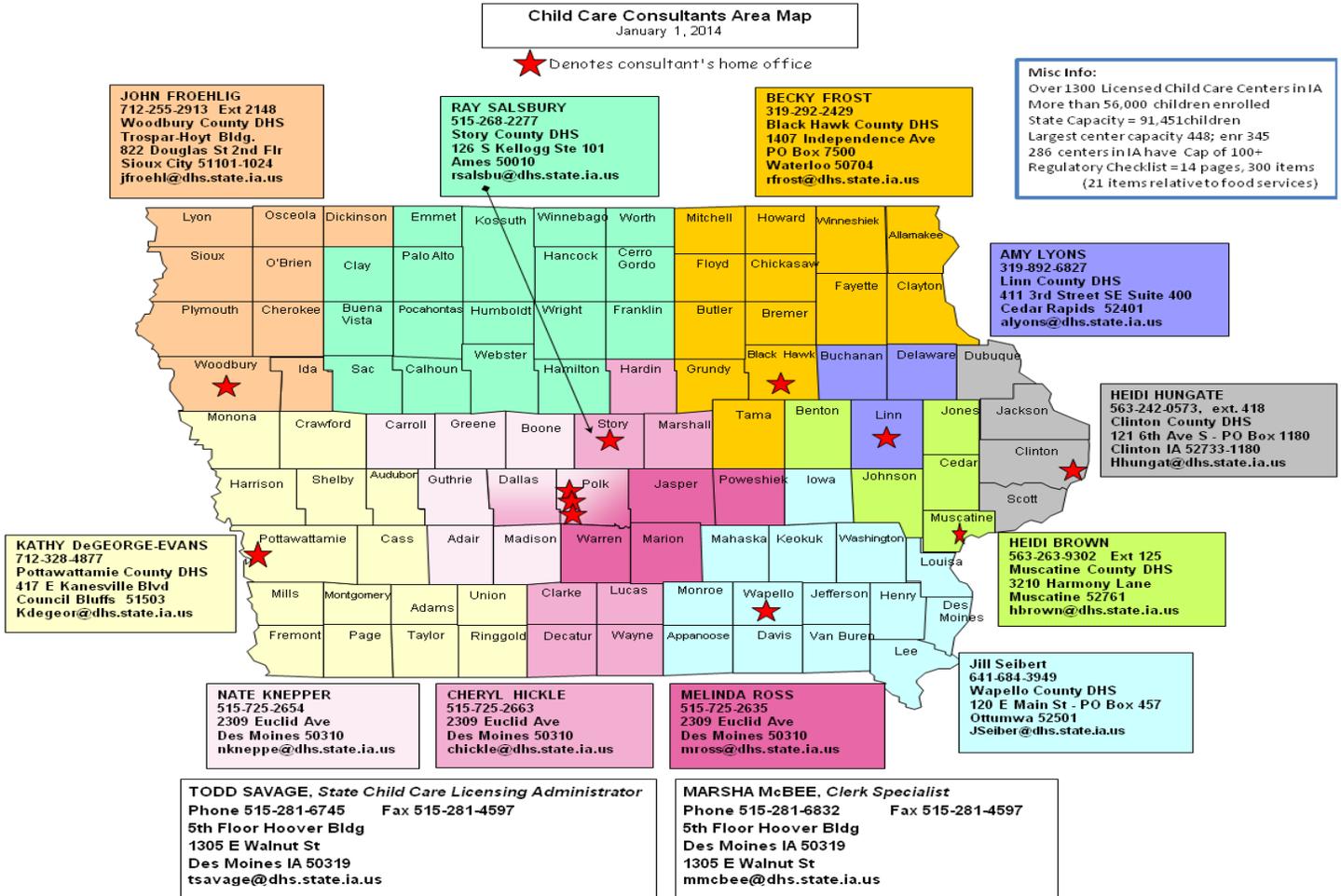
ADA	Americans with Disabilities Act
AEA	Area Education Agencies
AHA	American Heart Association
ARC	American Red Cross
ASTM	American Society for Testing and Materials for juvenile products
CACFP	Child and Adult Care Food Program
CCR&R	Child Care Resource and Referral Agency
CDA	Child Development Associate
CHSC	Child Health Specialty Clinics
CPR	Cardiopulmonary Resuscitation
CPSC	Consumer Product Safety Commission
DE	Department of Education
DHS	Department of Human Services
DPH	Department of Public Health
HCCI	Healthy Child Care Iowa
NHSPS	National Health and Safety Performance Standards
IAC	Iowa Administrative Code
OSHA	Occupational Safety and Health Administration
USDA	United States Department of Agriculture

DESCRIPTION	EXAMPLES (Not intended as an exhaustive list)
9. A special activity program that meets less than four hours per day for the sole purpose of the special activity. Such programs include but are not limited to music or dance classes, organized athletic or sports programs, recreational classes, scouting programs, and hobby or craft clubs or classes.	<ul style="list-style-type: none"> • Soccer or Little League baseball • Boy or Girl Scouts • Art clubs, music classes, etc.
10. A nationally accredited camp.	<ul style="list-style-type: none"> • Camp Sunnyside • 4-H camps
11. A structured program for the purpose of providing therapeutic, rehabilitative, or supervisory services to children under any of the following: <ul style="list-style-type: none"> • A purchase of service or managed care contract with the Department. • A contract approved by a local decategorization governance board created under Iowa Code section 232.188. • An arrangement approved by juvenile court order. 	<ul style="list-style-type: none"> • After school supervision of children receiving services from DHS or under the supervision of a juvenile court officer • Group therapy arranged under the supervision of DHS or a juvenile court officer
12. Care provided on-site to children of parents residing in an emergency, homeless, or domestic violence shelter.	<ul style="list-style-type: none"> • Domestic violence shelters, temporary shelters for the homeless, etc.
13. A child care facility providing respite care to a licensed foster family home for a period of 24 hours or more to a child who is placed with that licensed foster family home.	<ul style="list-style-type: none"> • Registered child development home that is providing respite care to foster children.
14. A program offered to a child whose parent, guardian, or custodian is engaged solely in a recreational or social activity, remains immediately available and accessible on the physical premises on which the child's care is provided, and does not engage in employment, while the care is provided. <p>However, if the recreational or social activity is provided in a fitness center or on the premises of a non-profit organization, the parent, guardian, or custodian of the child may be employed to teach or lead the activity.</p>	<ul style="list-style-type: none"> • Adult exercise, social and recreation programs where child care is offered on-site and the parent remains at the site.

STATE CONTACTS

CHILD CARE CONSULTANTS

Child care consultants responsible for licensing centers are located in DHS offices. To locate the child care consultant for your area, see the next page.



CHILD CARE RESOURCE AND REFERRAL AGENCIES

The child care resource and referral agencies are available to provide training, resources, technical assistance, and lending library materials to providers. These agencies distribute a newsletter to providers containing topics of interest related to early childhood and school-age care and inform providers of training opportunities in their area. In addition, they offer parent referral services and consumer education on quality child care.

Child care resource and referral agencies are organized into a network through five service delivery areas. Each area has a designated lead agency. To locate the resource and referral agency for your area, contact the lead agency for your area.

Counties in Service Delivery Area:	Lead Agency For Service Delivery Area:
SDA 1 Buena Vista, Calhoun, Cherokee, Clay, Crawford, Dickinson, Emmet, Hamilton, Humboldt, Ida, Kossuth, Lyon, Osceola, O'Brien, Palo Alto, Plymouth, Pocahontas, Sac, Sioux, Webster, Wright, Woodbury	Child Care Resource and Referral of Northwest Iowa Regional Director 418 S Marion Street Remsen, IA 51050 Phone: 877-216-8481 Fax: 712-786-3250
SDA 2 Allamakee, Black Hawk, Bremer, Buchanan, Butler, Cerro Gordo, Chickasaw, Clayton, Delaware, Dubuque, Fayette, Floyd, Franklin, Grundy, Hancock, Howard, Mitchell, Winnebago, Winneshiek, Worth	Child Care Resource and Referral of Northeast Iowa Regional Director 3675 University Avenue Waterloo, IA 50704 Phone: 800-475-0804 Fax: 319-274-8841
SDA 3 Adair, Adams, Audubon, Carroll, Cass, Clarke, Decatur, Fremont, Greene, Guthrie, Harrison, Lucas, Mills, Monona, Monroe, Montgomery, Page, Pottawattamie, Ringgold, Shelby, Taylor, Union, Wayne	Child Care Resource and Referral of Southwest and South Central Iowa Regional Director 710 10th Street Harlan, IA 51537 Phone: 800-945-9778 Fax: 712-755-7827
SDA 4 Boone, Dallas, Hardin, Jasper, Madison, Marion, Marshall, Story, Polk, Warren	Child Care Resource and Referral of Central Iowa Regional Director 808 5th Avenue Des Moines, IA 50309 Phone: 800-722-7619 Fax: 515-246-3570
SDA 5 Appanoose, Benton, Cedar, Clinton, Davis, Des Moines, Henry, Iowa, Jackson, Jefferson, Johnson, Jones, Keokuk, Lee, Linn, Louisa, Mahaska, Muscatine, Poweshiek, Scott, Tama, Van Buren, Wapello, Washington	Child Care Resource and Referral of Southeast Iowa Regional Director 500 E 59th Street Davenport, IA 52807 Phone: 866-324-3236 Fax: 563-324-7736

Iowa's Quality Rating System (QRS) is a voluntary child care rating system for child development homes, licensed child care centers and preschools, and child care programs that are operated by school districts.

Ratings reflect information provided by the program at their time of rating. If a program's child care license or registration is revoked during the rating period, their QRS rating is also revoked. The QRS status of a program does not reflect other infractions that may occur during the certification period.

The QRS was developed to:

- ◆ Raise the quality of child care in Iowa.
- ◆ Increase the number of children in high-quality child care settings.
- ◆ Educate parents about quality in child care.

There are five levels in the QRS. For a program to be rated at:

- ◆ Level 1: All the Level 1 criteria must be met.
- ◆ Level 2: All the Level 1 and Level 2 criteria must be met.
- ◆ Levels 3-5: All the Level 1 and Level 2 criteria must be met, and then the program must earn a minimum of one point in each of the Level 3-5 categories. For levels 3-5, the level is determined by the total number of points earned.

For more information on the Quality Rating System, please go to <http://dhs.iowa.gov/iqrs>.

OTHER STATE PROGRAMS

Child Care Licensing:

Child Care Licensing Program Manager
Iowa Department of Human Services
Division of Child and Family Services
1305 E Walnut, 5th Floor, Hoover Bldg
Des Moines, IA 50319-0114
(515) 281-7714

Food Program:

Child and Adult Care Food Program
Bureau of Food and Nutrition
Iowa Department of Education
400 E 14th St
Des Moines, IA 50319
(515) 281-5356

Immunizations:

Bureau of Immunization
Iowa Department of Public Health
321 E 12th St
Des Moines, IA 50319
(515) 281-7301
Vaccine for Children Hotline: 1-800-831-6293
Immunization Certificate: 1-800-398-9696

State Fire Marshal:

Iowa Department of Public Safety
Division of State Fire Marshal
401 SW 7th St., Suite N
Des Moines, IA 50309
(515) 281-5821

Healthy Child Care Iowa:

State Health Consultant
Healthy Child Care Iowa
Bureau of Maternal and Child Health
Iowa Department of Public Health
321 E 12th St
Des Moines, IA 50319
(515) 281-6071
1-800-383-3826

School-Operated Programs:

Iowa Department of Education
Bureau of Children, Family, and
Community Services
400 E 14th St
Des Moines, IA 50319
(515) 281-7844

IOWA RESOURCES

You can obtain additional information on these materials from your child care consultant.

CHILD CARE RESOURCE AND REFERRAL

Child Care Resource & Referral (CCR&R) is a program to support quality child care throughout the state of Iowa. CCR&R is available to assist families in selecting child care providers who best meet the needs of a child and their family. Child Care Consultants provide on-site consultation to licensed preschools, centers, non-registered home providers, and Child Care Development Home providers. Contact them at 877-216-8481 or www.iowaccrr.org.

HEALTHY CHILD CARE IOWA

Healthy Child Care Iowa is a statewide initiative to increase the health and safety practices within child care. Child care health consultants are located in the child care resource and referral agencies and can provide information and resources on health-related matters. For answers to questions regarding health- and safety-related issues or to be connected with health consultants in your area visit the web site at <http://idph.state.ia.us/hcci>.

IOWA STATE UNIVERSITY EXTENSION SERVICE

County ISU Extension offices provide publications, workshops, and self study training materials on early childhood and child care. Consultation and materials cover a wide variety of topics, including financial considerations of operating a child care center, child care environmental design, playground safety, nutrition, child development, health and safety, and positive guidance and discipline.

ISU Extension also works with communities and employers to explore child care options and conduct needs assessments. Publications and videos on choosing quality child care are also available for parents.

AREA EDUCATION AGENCIES

Area education agency (AEA) early childhood consultants and early childhood special education personnel can provide on-site technical assistance and training on a variety of issues, including technical assistance and training for children with developmental disabilities, behavioral issues, and developmentally appropriate practices.

CHILD CARE ASSISTANCE (SUBSIDY)

Financial assistance for child care is available to families who meet income guidelines and requirements for participation in education or employment. Centers can refer families who might benefit from assistance to the county Department of Human Services office.

CHILD SUPPORT

Some families may have difficulty in meeting the cost of child care when a noncustodial parent fails to make child support payments. Centers can refer families who might be in need of assistance in establishing or enforcing child support to the Child Support Recovery Unit that serves the county where the custodial parent resides.

NATIONAL RESOURCES

FIRST CHILDREN'S FINANCE

First Children's Finance provides loans and business-development assistance to high-quality child care businesses serving low- and moderate-income families. Contact them at 866-562-6801 or the website at <http://www.firstchildrensfinance.org/>.

HANDBOOK FOR PUBLIC PLAYGROUND SAFETY

The *Handbook for Public Playground Safety*, Pub No. 325 (2008) was developed by the Consumer Product Safety Commission. It can assist centers in the design, construction, operation and maintenance of safe playground areas. The guidelines make recommendations regarding surfacing materials, spacing and layout, installation, equipment design, and general hazards regarding an array of playground equipment. You can obtain a copy by contacting your county ISU Extension office.

NATIONAL HEALTH AND SAFETY PERFORMANCE STANDARDS

The National Health and Safety Performance Standards for out-of-home child care are also known as "Caring for Our Children." They are published by the American Public Health Association and the American Academy of Pediatrics.

These national standards address recommendations for child/staff ratios and personnel, activities for healthy development, health protection and promotion, nutrition and food service, facilities, supplies, equipment, transportation, infectious diseases, children with special needs, and administration. You can obtain a copy by contacting the National Resource Center on Health and Safety in Child Care at their web site: <http://nrc.uchsc.edu/cfoc/index.html>

NATIONAL RESOURCE CENTER FOR HEALTH AND SAFETY IN CHILD CARE

The National Resource Center on Health and Safety in Child Care is located at the University of Colorado Health Sciences Center. The primary mission of the Center is to promote health and safety in out-of-home child care settings.

The Center maintains and distributes the National Health and Safety Performance Standards and maintains a web site that includes the licensing standards of every state and links to other child care related web sites, and maintains a resource library on topics of interest to child care. Contact the Center at 1-800-598-5437 or at their web site: <http://cfoc.nrckids.org/>. Their mailing address is as follows: University of Colorado, Health Sciences Center at Fitzsimons, Campus Mail Stop F541, PO Box 6508, Aurora, CO 80045-0508. E-mail: Natl.child.res.ctr@UCHSC.edu

STEPPING STONES TO USING "CARING FOR OUR CHILDREN"

Stepping Stones is an abbreviated version of the 659 standards that are included in the National Health and Safety Performance Standards. The 233 standards in *Stepping Stones* focus on the key standards for reducing morbidity and mortality in child care settings. You can obtain a copy by contacting the National Resource Center for Health and Safety in Child Care at 1-800-598-5437 or at their web site: <http://cfoc.nrckids.org/>.

INTERNET WEB SITES

Centers for Disease Control

<http://www.cdc.gov>

Consumer Product Safety Commission

<http://www.cpsc.gov>

Department of Justice's Commonly Asked Questions About Child Care Centers and the ADA

<http://www.ada.gov/childqanda.htm>

hawk-i

<http://www.hawk-i.org>

Healthy Child Care Iowa

<http://www.idph.state.ia.us/hcci>

Iowa State University Extension -- Child Care and Education for Professionals

<http://www.extension.iastate.edu/humansciences/child-care-education-professionals>

National Association for the Education of Young Children

<http://www.naeyc.org>

National Network for Child Care

<http://www.nncc.org/>

National Program for Playground Safety

<http://www.playgroundsafety.org>

National Resource Center for Health and Safety in Child Care

<http://nrckids.org/>

National School-Age Care Alliance

<http://naaweb.org/>

Prepare Iowa

<http://prepareiowa.training-source.org/>

Program for Infant and Toddler Care

<http://www.pitc.org>

Zero to Three

<http://www.zerotothree.org/>

Iowa Department of Human Services Child Care Center Licensing Provider Handbook Regulations	SECTION: 109.4 Administration	SUBJECT: Required Written Policies
	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised	Date: 6/1/10
	Rule Citation: 441 IAC 109.4(2)	

RULE

Required written policies. The child care center owner, board or director shall:

- a. Develop fee policies and financial agreements for the children served.
- b. Develop and implement policies for enrollment and discharge of children, field trips and non-center activities, transportation, discipline, nutrition, and health and safety policies.
- c. Develop a curriculum or program structure that uses developmentally appropriate practices and an activity program appropriate to the developmental level and needs of the children.
- d. Develop and implement a written plan for staff orientation to the center's policies and to the provisions of 441—Chapter 109 where applicable to staff.
- e. Develop and implement a written plan for ongoing training and staff development in compliance with professional growth and development requirements established by the Department in rule 441—109.7(237A).
- f. Make available for review a copy of the center policies and program to all staff at the time of employment and each parent at the time a child is admitted to the center. A copy of the fee policies and financial agreements shall be provided to each parent at the time a child is admitted to the center.
- g. Develop and implement a policy for responding to incidents of biting that includes the following elements.
 - (1) An explanation of the center's perspective on biting.
 - (2) A description of how the center will respond to individual biting incidents and episodes of ongoing biting.
 - (3) A description of how the center will assess the adequacy of caregiver supervision and the context and the environment in which the biting occurred.
 - (4) A description of how the center will respond to the individual child or caregiver who was bitten.
 - (5) A description of the process for notification of parents of children involved in the incident.
 - (6) A description of how the incident will be documented.
 - (7) A description of how confidentiality will be protected.
 - (8) A description of first-aid procedures that the center will use in response to biting incidents.

- h. Develop a policy to ensure that people do not have unauthorized access to children at the center. The policy shall be subject to review for minimum safety standards by the licensing consultant. The policy shall include, but is not limited to, the following:
- (1) The center's criteria for allowing people to be on the property of the facility when children are present.
 - (2) A description of how center staff will supervise and monitor people who are permitted on the property of the center when children are present, but who have not been cleared for involvement with child care through the formal record check process. The description shall include definitions of "supervision" and "monitoring."
 - (3) A description of how responsibility for supervision and monitoring of people in the center will be delegated to center staff, which includes provisions that address conflicts of interest.
 - (4) A description of how the policy will be shared with parents, guardians, and custodians of all children who are enrolled at the center.

RATIONALE AND RECOMMENDATIONS FOR IMPLEMENTATION

Child care is a service that operates through a contractual relationship between the provider and the parent in the interests of the child. Parents must be fully informed about a center's services and expectations to allow them an informed decision in delegating care and supervision of their child to the center.

In writing down policies, centers are challenged to focus on activities and practices that are conducive to positive child development and safety practices. Written policies provide a method for parents to choose the type of program that best suits the needs of their child. Written policies are an important step in building a comprehensive and well-developed program, providing a mechanism to communicate to staff and parents, and ensuring consistency in implementation.

All levels of administration, including the board of directors, the center director, the on-site supervisor, and direct care staff should be provided a copy of the center's policies and the DHS licensing standards at time of employment. These materials should be reviewed during the staff's orientation.

You may want to develop a checklist of all materials and information required before a child can be admitted to the program. The checklist can be shared with parents and serve as a reminder to staff.

A copy of all the center's policies should be shared with parents at the time of their child's admission. You are encouraged to make this handbook available to parents at the time of admission to educate parents on the licensing standards that you must be meet.

You must provide fee policies to the parents at the time of admission. Fee policies and financial agreements should be clearly stated. Policies should clearly indicate discharge provisions for a parent's failure to pay, including a process for resolution. Any change to the agreements should allow for timely notification to parents. Provide amended copies to the parent. Continuity of care for children should be given highest priority in mediating disputes.

Because of the importance of stable and consistent adult relationships to children and for the protection of the center, you should have well-defined criteria for permanently discharging a child from the program. The decision to discharge a child should be made only after defined attempts to resolve problems, with the knowledge and support of the child's parents, have been unsuccessful. Document attempts to resolve the problems, including communications with the child's parents.

In the written policies that describe the center's practices related to enrollment and discharge of children, field trips and non-center activities, transportation, discipline, nutrition, and health and safety policies, you should have clear policies that outline the expectation for parent authorizations for:

- ◆ Participation in center-sponsored field trips.
- ◆ Participation in non-center-related activities away from the center that the child may attend.
- ◆ Transportation by the center to and from school.
- ◆ Changes in meals and snacks provided to a child that differ from CACFP guidelines.
- ◆ Health-related care and administering medications.

Suggestions for content of the required written policies and procedures are included in Part IV of the handbook.

Iowa Department of Human Services Child Care Center Licensing Provider Handbook Regulations	SECTION: 109.4 Administration	SUBJECT: Required Postings
	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised	Date: 7/1/08
	Rule Citation: 441 IAC 109.4(3), 109.10(1) as amended by HF 2212(16)(t) Sec 6	

RULE

Required postings:

- a. Postings are required for the certificate of license, notice of exposure of children to a communicable disease, and notice of actions to deny, suspend, or revoke the center's license and shall be conspicuously placed at the main entrance to the center. If the center is located in a building used for additional purposes and shares the main entrance to the building, the required postings shall be conspicuously placed in the center in an area that is frequented daily by parents or the public.
- b. Postings are required for mandatory reporter requirements, the notice of availability of the handbook required in subrule 109.4(5), and the program activities and shall be placed in an area that is frequented daily by parents or the public.
- c. Post nonsmoking signs at every entrance of the child care center and in every vehicle used to transport the children. All signs shall include:
 - (1) The telephone number for reporting complaints, and
 - (2) The Internet address of the Department of Public Health (<http://www.iowasmokefreeair.gov/>).

RATIONALE AND RECOMMENDATIONS FOR IMPLEMENTATION

Parents have a right to be informed regarding activities within or regarding the center, including any legal action taken against the center, which may impact their child or their decision to continue services at the center. The goal of postings is to facilitate and increase communication opportunities with parents.

In addition to posting within a center, in some circumstances centers may also want to send notices home with children or do a separate mailing to parents. Centers may also want to include information regarding mandatory reporters, this handbook, and the program structure of the center in their parent handbook. However, this does not remove the requirement to post *in the center*.

Postings must be clearly visible to parents when they enter the center. If the location of the center within a building makes it impractical to post a notice by the front door, the posting must be in an area of the center where parents routinely gather when they arrive to pick up or leave their children.

The posting regarding the availability of the handbook must also include the name, office mailing address, and telephone number of the child care consultant.

Letters from the Department giving notice of action to suspend or revoke a license **MUST** be posted in the format in which they are received. Do not alter the content or design of the letter in any way.

Iowa Department of Human Services Child Care Center Licensing Provider Handbook Regulations	SECTION: 109.6 Personnel	SUBJECT: Volunteers and Substitutes
	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised	Date: 6/1/10
	Rule Citation: 441 IAC 109.6(5)	

RULE

Volunteers and substitutes.

- a. All volunteers and substitutes shall sign a statement indicating whether or not they have one of the following:
 - (1) A conviction of any law in any state or any record of founded child abuse or dependent adult abuse in any state.
 - (2) A communicable disease or other health concern that could pose a threat to the health, safety, or well-being of the children.
- b. Sign a statement indicating the volunteer or substitute has been informed of the volunteer's or substitute's responsibilities as a mandatory reporter.
- c. Undergo the record check process if the volunteer or substitute is included in meeting the required child-to-staff ratio; the volunteer or substitute has direct responsibility for a child or children; or the volunteer or substitute has access to a child or children with no other staff present.

RATIONALE AND RECOMMENDATIONS FOR IMPLEMENTATION

Record checks are required for each owner, director, staff member including volunteer, substitute, or subcontracted staff, with direct responsibility for child care or with access to a child when the child is alone and for anyone living in the child care facility who is 14 years of age or older. See [Record Checks and Evaluations](#).

Volunteers should always be under the direct observation of staff. Any adult with access to children has the potential to cause them harm, either through abusive behavior or in the transmission of disease. Therefore, centers need to be cautious in the use of volunteers and substitutes, not only for the protection of children, but also for the center's liability.

All volunteers and substitutes, regardless of the amount of time they volunteer or are paid to work in the center, **must** complete the statement indicating whether they have a criminal conviction or history of child abuse or dependent adult abuse or a communicable disease or health concern. Anecdotal information regarding perpetrators of child abuse and people infected with communicable disease serves as a caution to the argument: "but I know them, and they wouldn't"

Iowa Department of Human Services Child Care Center Licensing Provider Handbook Regulations	SECTION: 109.6 Personnel	SUBJECT: Record Checks and Evaluations
	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised	Date: 6/1/10
	Rule Citation: 441 IAC 109.6(6)	

RULE

Record checks. The Department shall conduct criminal and child abuse record checks in Iowa for each owner, director, staff member, or subcontracted staff person with direct responsibility for child care or with access to a child when the child is alone and for anyone living in the child care facility who is 14 years of age or older. The department may use Form 470-0643, *Request for Child Abuse Information*, and Form 595-1396, *DHS Criminal History Record Check, Form B*, or any other form required for criminal and child abuse record checks. The department may also conduct criminal and child abuse record checks in other states and may conduct dependent adult abuse, sex offender, and other public or civil offense record checks in Iowa or in other states.

Iowa records checks. Checks and evaluations of Iowa child abuse and criminal records, including the sex offender registry, shall be completed before the person's involvement with child care at the center. Iowa records checks shall be repeated at a minimum of every two years and when the department or the center becomes aware of any possible transgressions. The department is not responsible for the cost of conducting the Iowa records check.

The child care center may access the single-contact repository (SING) as necessary to conduct a criminal and child abuse record check of the person in Iowa. If the results of the check indicate a potential transgression, the center shall send a copy of the results to the department for determination of whether or not the person may be involved with child care, regardless of the person's status with the center.

When the department conducts the records check, the fee shall be \$25 for each record check through June 30, 2010, and \$35 effective July 1, 2010. The center shall submit the fee before the department initiates the record check process. Payment must be in the form of cash, check, money order, or cashier's check. The department may access SING to conduct the records check. The Department may also conduct dependent adult abuse, sex offender, and other public or civil offense record checks in Iowa for a person who is subject to a record check.

National criminal history checks. National criminal history checks based on fingerprints are required for all persons subject to record checks under this subrule effective with a center's initial licensure or relicensure on or after June 1, 2010. The national criminal history check shall be repeated for each person every four years and when the department or center becomes aware of any new transgressions committed by that person in another state. The department is not responsible for the cost of conducting the national criminal history check.

The child care center is responsible for obtaining the fingerprints of all persons subject to record checks. Fingerprints may be taken by law enforcement agencies, by agencies or companies that specialize in taking fingerprints, or by center staff or subcontractors who have received appropriate training in the taking of fingerprints.

If the results of the Iowa records checks do not warrant prohibition of the person's involvement with child care or otherwise present protective concerns, the person may be involved with child care on a provisional basis until the national criminal history check and evaluation have been completed.

The child care center shall provide fingerprints to the department of public safety no later than 30 days after the subject's approval for employment at the center. The center shall submit the fingerprints on forms or in a manner allowed by the department of public safety.

- a. *Mandatory prohibition.* A person with the following convictions or founded abuse reports is prohibited from involvement with child care:
 - (1) Founded child or dependent adult abuse that was determined to be sexual abuse.
 - (2) Placement on the sex offender registry.
 - (3) Felony child endangerment or neglect or abandonment of a dependent person.
 - (4) Felony domestic abuse.
 - (5) Felony crime against a child including, but not limited to, sexual exploitation of a minor.
 - (6) Forcible felony.
- b. *Mandatory time-limited prohibition.*
 - (1) A person with the following convictions or founded abuse reports is prohibited from involvement with child care for five years from the date of the conviction or founded abuse report:
 1. Conviction of a controlled substance offense under Iowa Code chapter 124.
 2. Founded child abuse that was determined to be physical abuse.
 - (2) After the five-year prohibition period from the date of the conviction or the founded abuse report as defined in subparagraph 109.6(6)"b"(1), the person may request the department to perform an evaluation under paragraph 109.6(6)"c" to determine whether prohibition of the person's involvement with child care continues to be warranted.
- c. *Evaluation required.* For all other transgressions, and as requested under subparagraph 109.6(6)"b"(2), the department shall notify the affected person and the licensee that an evaluation shall be conducted to determine whether prohibition of the person's involvement with child care is warranted.
 - (1) The person with the transgression shall complete and return form 470-2310, Record Check Evaluation, within ten calendar days of the date on the form. The department shall use the information the person with the transgression provides on this form to assist in the evaluation. Failure of the person with the transgression to complete and return this form by the specified date shall result in denial or revocation of the license or denial of employment.
 - (2) The department may use information from the department's case records in performing the evaluation.
 - (3) In an evaluation, the department shall consider all of the following factors:
 1. The nature and seriousness of the transgression in relation to the position sought or held.
 2. The time elapsed since the commission of the transgression.
 3. The circumstances under which the transgression was committed.
 4. The degree of rehabilitation.
 5. The likelihood that the person will commit the transgression again.
 6. The number of transgressions committed by the person.

- d. *Evaluation decision.* Within 30 days of receipt of a completed Form 470-2310, Record Check Evaluation, the department shall make a decision on the person's involvement with child care. The department has final authority in determining whether prohibition of the person's involvement with child care is warranted and in developing any conditional requirements and corrective action plan under this paragraph.
- (1) The department shall mail to the individual on whom the evaluation was completed Form 470-2386, Record Check Decision, that explains the decision reached regarding the evaluation of the transgression and Form 470-0602, Notice of Decision.
 - (2) If the department determines through an evaluation of a person's transgressions that the person's prohibition of involvement with child care is warranted, the person shall be prohibited from involvement with child care. The department may identify a period of time after which the person may request that another record check and evaluation be performed.
 - (3) The department may permit a person who is evaluated to maintain involvement with child care if the person complies with the department's conditions and corrective action plan relating to the person's involvement with child care.
 - (4) The department shall send a letter to the employer that informs the employer whether the person subject to an evaluation has been approved or denied involvement with child care. If the person has been approved, the letter shall inform the employer of any conditions and corrective action plan relating to the person's involvement with child care.
- e. *Notice to parents.* The department shall notify the parent, guardian, or legal custodian of each child for whom the person provides child care if there has been a founded child abuse record against an owner, director, or staff member of the child care center. The center shall cooperate with the department in providing the names and addresses of the parent, guardian, or legal custodian of each child for whom the facility provides child care.
- f. *Repeat of record checks.* The child abuse and criminal record checks shall be repeated at a minimum of every two years and when the department or the center become aware of any transgressions. Any new transgressions discovered shall be handled in accordance with this subrule.

RATIONALE AND RECOMMENDATIONS FOR IMPLEMENTATION

Do not send the form to the Division of Criminal Investigation or make alterations to the form. This will result in the Division returning the form to the Department and a delay in turnaround. Resubmit the checks on employees every two years or when there is reason to believe there is a transgression. A copy of the form is included in Part IV of this handbook.

The child care support staff completes form 470-0643, *Request for Child Abuse Information*, when they receive the *DHS Criminal History Record Check*. The center does NOT complete or submit the *Request for Child Abuse Information*. The criminal and child abuse record checks are resubmitted every two years or when there is reason to believe a transgression has occurred. The existence of any of the following in a person's record is considered a transgression:

1. Conviction of a crime.
2. A record of having committed founded child or dependent adult abuse.
3. Listing in the sex offender registry established under Iowa Code Chapter 692A.
4. A record of having committed a public or civil offense.
5. Revocation or denial of a child care facility registration or license due to the person's continued or repeated failure to operate the child care facility in compliance with licensing and registration laws and rules.

You may want to consider conducting checks on other staff in the center, such as cooks, maintenance staff, etc., if they will have significant opportunity to have access to children.

When the licensing support staff requests an employee with a history of a transgression complete and return the *Record Check Evaluation*, form 470-2310, the form **must** be returned in **10 days**. Failure to do so can result in denial of employment.

When a record check evaluation is conducted, the Department will send a letter to the center that informs the center whether the individual subject to an evaluation has been approved or denied involvement with child care. If there are any conditions or a corrective action plan related to the approval of the individual's involvement with child care, the letter will inform the center of any of these conditions or corrective action plan.

A record check evaluation will not be requested or conducted when the criminal conviction or founded abuse meets the definition of a mandatory or time-limited prohibition from involvement with child care. In these circumstances, a *Notice of Decision*, form 470-0602, denying involvement with child care will be sent to the person who is the subject of the record check. The center will be sent a letter notifying it that the person has been denied involvement with child care.

A criminal record or child abuse record check in an employee's file is a confidential request. This record cannot be duplicated and transferred with an employee. Therefore, if an employee leaves one center and begins employment at a new center, a new form 595-1396, *DHS Criminal History Record Check*, Form B, and form 470-0643, *Request for Child Abuse Information*, must be completed. The request does not have to be resubmitted for an employee who transfers between sites of the same corporation.

Notification to Parents

You may want to take an up-front approach with parents by clearly communicating in your parent materials that criminal and child abuse record checks are required on staff, substitutes, and volunteers used to meet ratio requirements. Parents should be informed that individuals are prohibited from involvement with child care when they have the following convictions or founded abuse reports:

- ◆ Founded child or dependent abuse that was determined to be sexual abuse.
- ◆ Placement on the sex offender registry.
- ◆ Felony child endangerment or neglect or abandonment of a dependent person.
- ◆ Felony domestic abuse.
- ◆ Felony crime against a child including but not limited to sexual exploitation of a minor.
- ◆ Forcible felony.

Parents should also be made aware that there is a time-limited prohibition from involvement with child care when a founded child abuse is determined to be physical abuse and when there is a conviction for a controlled substance offense under Iowa Code Chapter 124.

In these circumstances individuals are prohibited from involvement with child care for five years from the date of the conviction or founded child abuse report. After five years the department assesses the circumstances of the incident and the person to determine whether or not the person can work in a child care center. This same review process is used for other types of criminal convictions or founded abuse.

In addition, parents should be informed that Department staff will notify them if a founded abuse (confirmed and placed on the Registry) ever occurs in the center,

When the Department conducts the child abuse record check on a staff person who has a founded child abuse report for an abuse that occurred in the center, the child care consultant is required to notify parents in writing of the incident. Law requires the notification to parents. The notice sent to parents does NOT identify the name of the perpetrator or the child, or the specific circumstances of the abuse. The letter indicates to parents that:

- ◆ A founded child abuse has been confirmed on a staff member at the center.
- ◆ The staff person has a right to appeal the decision.
- ◆ The Department will evaluate the staff member for continued employment.
- ◆ The center or the Department has taken other corrective action, if applicable.

When the Department must send out a letter to parents, you **must** cooperate with the Department upon request of the consultant by immediately providing the names and addresses of the parents or guardians of the children served. Failure to do so could jeopardize the status of your license.

Being the subject of notification to parents of an abuse is an uncomfortable position for a center to find itself in. On the premise that an up-front disclosure usually alleviates more fears than an unexpected letter from the Department, one strategy that other directors have found of assistance, is for the center to initiate its own letter to parents.

You can inform parents that a founded abuse has occurred, that corrective action has been taken to remedy the situation or prevent reoccurrence, and that they will be receiving additional correspondence from the Department regarding this matter.

If a staff person leaves the center following an investigation that results in a founded determination, the Department is still required to notify the parents that a founded abuse occurred. If a staff person leaves employment and is later rehired, a new record check must be completed.

Iowa Department of Human Services Child Care Center Licensing Provider Handbook Regulations	SECTION: 109.7 Professional Growth and Development	SUBJECT: Required Training Within First Six Months
	<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised	Date: 4/1/98
	Rule Citation: 441 IAC 109.7(1)	

RULE

The center director, on-site supervisor, and staff counted as part of the staff ratio shall meet the following minimum staff training requirements:

Required training within the first six months of employment. During their first six months of employment, all staff shall receive the following training:

- a. Two hours of Iowa’s training for mandatory reporting of child abuse.
- b. At least one hour of training regarding universal precautions and infectious disease control.

RATIONALE AND RECOMMENDATIONS FOR IMPLEMENTATION

Iowa’s Child Care Provider Training Registry is an online tool where child care professionals can locate and enroll for DHS approved professional development. Center directors and other designated staff can enroll employees and track their professional development in a centralized location. To access and enroll for DHS approved professional development opportunities, please click <https://ccmis.dhs.state.ia.us/trainingregistry/>.

Mandatory Reporting

Effective May 1, 2002, all child abuse mandatory reporter training must be training approved by the Abuse Education Review Panel in the Iowa Department of Public Health. All child abuse mandatory reporter training received before May 1, 2002, is good for five years from the date of training.

The child care resource and referral in your area has approved training and can work with you in getting your staff trained. You can find the address and telephone number of the child care resource and referral agency for your county on page 22 of this manual. You can also find a list of approved training at the Department of Public Health’s website under the program name, Abuse Education Review Panel. The address to this web site is as follows: http://www.idph.state.ia.us/bh/abuse_ed_review.asp

The employee is responsible to ensure that a certificate showing the completion of training is obtained. An employee who changes jobs, going from one center to another, should take the certificate or a copy of the certificate to the new center. Mandatory reporter training must be renewed every five years.

Universal Precautions

Universal precautions is an approach to infection control (it is also referred to as “Blood-Borne Pathogen” or “Standard Precautions” training). All blood and bodily fluids are treated as if known to be infectious for HIV, Hepatitis B, or other blood-borne pathogens. Infectious materials include body fluids or waste products. The materials of most concern are human body fluids like blood, semen, vaginal secretions, saliva in dental procedures, any body fluid that visibly contains blood.

Iowa Department of Human Services Child Care Center Licensing Provider Handbook Regulations	SECTION: 109.9 Records	SUBJECT: Personnel Records
	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised	Date: 6/1/10
	Rule Citation: 441 IAC 109.9(1)	

RULE

Personnel records. The center shall maintain personnel information sufficient to ensure that persons employed in the center meet minimum staff and training requirements and do not pose any threat to the health, safety, or well-being of the children. Each employee’s file shall contain, at a minimum, the following:

- a. A statement signed by each individual indicating whether or not the individual has any conviction by any law of any state or if the individual has any record of founded child abuse or dependent adult abuse.
- b. A copy of Form 595-1396, *DHS Criminal History Record Check*, Form B, or any other permission form approved by the department of public safety for conducting an Iowa or national criminal history record check.
- c. A copy of Form 470-0643, *Request for Child Abuse Information*.
- d. Copies of the results of Iowa records checks conducted through the SING for review by the department upon request.
- e. Copies of national criminal history check results.
- f. Any department-issued documents sent to the center related to a records check, regardless of findings.
- g. A physical examination report. Personnel shall have good health as evidenced by a pre-employment physical examination. Acceptable physical examinations shall be documented on Form 470-5152, *Child Care Provider Physical Examination Report*. The examination shall include any necessary testing for communicable diseases; shall include a discussion regarding current Advisory Committee on Immunization Practices (ACIP)-recommended vaccinations; shall be performed within six months prior to beginning employment by a licensed medical doctor, doctor of osteopathy, physician assistant or advanced registered nurse practitioner; and shall be repeated at least every three years.
- h. Documentation showing the minimum staff training requirements including current certifications in first aid and cardiopulmonary resuscitation (CPR) and Iowa’s training for the mandatory reporting of child abuse.
- i. A photocopy of a valid driver’s license if the staff will be involved in the transportation of children.

RATIONALE AND RECOMMENDATIONS FOR IMPLEMENTATION

The listed items are the minimum requirements for a center to maintain in a personnel file. Original first aid and CPR certificates should be in the file for documentation of training. Photocopies must have the instructors and employee signatures.

You may want to require additional items, such as proof of age for staff under 18; proof of employment, education, or training that documents how staff meet qualifications; information regarding a staff person's specific medical or health needs; or emergency contact information.

In addition to completing the required record checks, Iowa law requires that you have all prospective employees sign a statement indicating whether they or not they have a record of:

- ◆ A founded child or dependent adult abuse
- ◆ A conviction in any state for any crime

Prospective employees need to be informed that a criminal history and child abuse check will be conducted if they are offered or accept a position. While the record check and subsequent evaluations might not be completed before the employee starts to work, you need to initiate the process at the point you offer the person a position.

Iowa law requires that the employment physical be a pre-employment physical. The physical examination must be completed every three years. The decision as to who bears the cost of an employment physical examination is an issue to be agreed upon between you and the employee.

If an employee leaves a center and then returns or begins working at a new site within the same corporation or organization, a new physical examination does not have to be submitted if the previous examination is less than three years old. Provide a copy of the examination to the new center. (You may establish more restrictive policies for when a new examination is required.)

Tuberculosis has been on the rise around the country, and remains an issue in Iowa. Employees are required to be tested for tuberculosis at the time of their physical. A person who tests positive for tuberculosis should have a statement from the physician indicating whether or not the person is restricted in any manner from providing care. Staff are at greater risk of encountering tuberculosis in areas with a high prevalence of transient, migrant, or immigrant populations, particularly Hispanic populations. Staff working in centers serving these populations may not want to wait until their examination is due before being tested.

An employee is not required to be tested for all communicable diseases, given their number. However, the physician must verify that the employee is either status-free or, if a person has been exposed to a communicable disease, the physician should determine if the person's health status impedes or limits the person's ability to care for children in a child care center. Medical conditions that do not affect the performance of the employee in the capacity employed or the health and safety of the children do not prohibit employment.

You may choose to maintain staff records, including the physical examination report, in a central repository due to confidentiality concerns, lack of locked storage space, etc. This practice is permissible as long as the records are available to the child care consultant during normal business hours. However, you should maintain emergency contact and medical information on the staff at the sites so that you can respond to a staff's health emergency.

Iowa Department of Human Services Child Care Center Licensing Provider Handbook Regulations	SECTION: 109.10 Health and Safety Policies	SUBJECT: First-Aid Kit
	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised	Date: 8/8/08
	Rule Citation: 441 IAC 109.10(9)	

RULE

The child care center shall establish definite health policies, including the criteria for excluding a sick child from the center. The policies shall be consistent with the recommendations of the National Health and Safety Performance Standards and shall include, but are not limited to:

First-aid kit. The center shall ensure that a clearly labeled first-aid kit is available and easily accessible to staff at all times whenever children are in the center, in the outdoor play area, and on field trips. The kit shall be sufficient to address first aid related to minor injury or trauma and shall be stored in an area inaccessible to children.

RATIONALE AND RECOMMENDATIONS FOR IMPLEMENTATION

At a minimum, first aid kits in the center and kits used on field trips should contain, supplies to address pediatric first aid. The first aid kit shall contain at least the following items:

- ◆ Adhesive strip bandages, tape bandages, plastic bags for cloths, gauze, and other materials used in handling blood
- ◆ American Academy of Pediatrics standard first aid chart or equivalent first aid guide
- ◆ Bandage tape
- ◆ Cell phone
- ◆ Cold pack
- ◆ Disposable nonporous gloves (similar to gloves used in hospitals; also called latex gloves)
- ◆ Emergency medication needed for children with special needs
- ◆ Emergency phone numbers:
 - Parent's home and work phone numbers
 - Poison Control Center phone number (1-800-222-1222)
- ◆ EMS
- ◆ Eye patch pad
- ◆ Flexible roller gauze
- ◆ Hand sanitizer
- ◆ Non-glass thermometer to measure a child's temperature
- ◆ Pen or pencil and note pad
- ◆ Rescue breathing mouthpiece
- ◆ Safety pins
- ◆ Scissors
- ◆ Small plastic or metal splints
- ◆ Splints finger
- ◆ Sterile gauze pads
- ◆ Triangular bandages
- ◆ Tweezers
- ◆ Water

When the outdoor play area is immediately accessible to the center, the first aid kit may be a fanny pack with disposable nonporous gloves, gauze, plastic bag for materials used for handling blood and crushable ice pack. When staff does not have immediate accessibility to the center because of a need to maintain minimum staffing ratios or the outdoor play area is a distance from the center a field trip first aid kit shall be available in the outdoor play area.

Iowa Department of Human Services Child Care Center Licensing Provider Handbook Regulations	SECTION: 109.10 Health and Safety Policies	SUBJECT: Recording Incidents
	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised	Date: 2/1/14
	Rule Citation: 441 IAC 109.10(10)	

RULE

The child care center shall establish definite health policies, including the criteria for excluding a sick child from the center. The policies shall be consistent with the recommendations of the National Health and Safety Performance Standards and shall include, but are not limited to:

Recording incidents. Incidents involving a child, including minor injuries, minor changes in health status, or behavioral concerns, shall be reported to the parent on the day of the incident. Incidents resulting in an injury to a child shall be reported to the parent on the day of the incident. Incidents resulting in a serious injury to a child or significant change in health status shall be verbally reported to the parents, guardian, and legal custodians immediately. The parents, guardians, and legal custodians of any child included in incidents involving inappropriate, sexually acting-out behavior shall be notified immediately after the incident.

A written report, fully documenting every incident, shall be provided to the parent or person authorized to remove the child from the center. The written report shall be prepared by the staff member who observed the incident and a copy shall be retained in the child's file.

RATIONALE AND RECOMMENDATIONS FOR IMPLEMENTATION

Serious injury means an injury that requires follow-up (observation or treatment) by the parent or requires a medical or dental examination and treatment outside the center's scope of care. Examples include a child who:

- ◆ Receives a laceration that requires stitches.
- ◆ Suffers a head injury.
- ◆ Loses consciousness or has a change in the level of consciousness.
- ◆ Receives an injury to the eyes, teeth, or bones.
- ◆ Exhibits convulsions.
- ◆ Has a nosebleed that doesn't stop after 15 minutes of pressure.
- ◆ Suffers an asthma attack that doesn't respond to medication.
- ◆ Has bleeding from the ears.
- ◆ Loses a permanent tooth.

Iowa Department of Human Services Child Care Center Licensing Provider Handbook Regulations	SECTION: 109.10 Health and Safety Policies	SUBJECT: Smoking
	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised	Date: 7/1/08
	Rule Citation: 441 IAC 109.10(11) as amended by HF 2212(16)(t) Sec 6	

RULE

The child care center shall establish definite health policies, including the criteria for excluding a sick child from the center. The policies shall be consistent with the recommendations of the National Health and Safety Performance Standards and shall include, but are not limited to:

Smoking. Smoking and the use of tobacco products shall be prohibited at all times in the center and every vehicle used to transport the children. Smoking and the use of tobacco products shall be prohibited in the outdoor play area during hours of operation.

Post nonsmoking signs at all entrances of the child care center and in every vehicle used to transport the children. All signs shall include:

- ◆ The telephone number for reporting complaints, and
- ◆ The Internet address of the Department of Public Health (<http://www.iowasmokefreeair.gov/>).

RATIONALE AND RECOMMENDATIONS FOR IMPLEMENTATION

Research has linked “second-hand smoke” or “environmental tobacco smoke” as contributing to a host of health problems. Infants and young children, especially those under age two, exposed passively to tobacco smoke are at increased risk of developing bronchitis, pneumonia, asthma, upper-respiratory infections, and ear infections.

Environmental tobacco smoke can also make recovering from colds more difficult and can cause stuffy noses, headaches, sore throats, eye irritation, loss of appetite, and fussiness. Separating smokers within a building does not eliminate the exposure to second hand smoke.

Iowa Department of Human Services Child Care Center Licensing Provider Handbook Regulations	SECTION: 109.10 Supervision and Access	SUBJECT: Supervision and Access
	<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised	Date: 6/1/10
	Rule Citation: 441 IAC 109.10(6)	

RULE

The center director and on-site supervisor shall ensure that each staff member, substitute, or volunteer knows the number and names of children assigned to that staff member, substitute, or volunteer for care. Assigned staff, substitutes, and volunteers shall provide careful supervision.

Any person in the center who is not an owner, staff member, substitute, or volunteer who has a record check and department approval to be involved with child care shall not have unrestricted access to children for whom that person is not the parent, guardian, or custodian.

A sex offender who has been convicted of a sex offense against a minor and who is required to register with the Iowa sex offender registry under the provisions contained in Iowa Code chapter 692A shall not operate, manage, be employed by, or act as a contractor or volunteer at a child care center.

The sex offender also shall not be present upon the property of a child care center without the written permission of the center director, except for the time reasonably necessary to transport the offender's own minor child or ward to and from the center.

Written permission shall include the conditions under which the sex offender may be present, including:

- ◆ The precise location in the center where the sex offender may be present; the reason for the sex offender's presence at the facility; the duration of the sex offender's presence; and description of the supervision that the center staff will provide the sex offender to ensure that no child is alone with the sex offender.
- ◆ Before giving written permission, the center director shall consult with the center licensing consultant. The written permission shall be signed and dated by the center director and the sex offender and kept on file for review by the center licensing consultant.

Iowa Department of Human Services Child Care Center Licensing Provider Handbook Regulations	SECTION: 109.11 Physical Facilities	SUBJECT: Environmental Hazards: Radon
	<input checked="" type="checkbox"/> New <input type="checkbox"/> Revised	Date: 4/1/98
	Rule Citation: 441 IAC 109.11(7)	

RULE

Environmental hazards.

- b. Within one year of being issued an initial or renewal license, centers operating in facilities that are at ground level, use a basement area as program space, or have a basement beneath the program area shall have radon testing performed as prescribed by the state Department of Public Health at 641—Chapter 43.

Testing shall be required if test kits are available from the local health Department or the Iowa Radon Coalition. Retesting shall be accomplished at least every two years from the date of the initial measurement if test kits are available from the local health department or the Iowa Radon Coalition.

If testing determines confirmed radon gas levels in excess of 4.0 picocuries per liter, a plan using radon mitigation procedures established by the state Department of Public Health shall be developed with and approved by the state Department of Public Health before a full license being issued.

RATIONALE AND RECOMMENDATIONS FOR IMPLEMENTATION

Radon is a naturally occurring radioactive gas that is impossible to see, smell, or taste. While the gas is found in high levels in every state, a study by the Environmental Protection Agency (EPA) indicates that Iowa has relatively high levels of radon. The gas seeps into buildings through the surrounding soil via openings in basement walls and floors.

Radon is the second leading cause of lung cancer, based on studies conducted routinely since the 1950s. The higher the level of radon and the longer the exposure, the greater the risk. Homes and schools have historically been the structures most likely to have radon tests conducted.

A study of 66 child care centers in central Iowa in 1993 found that 83% of the centers had confirmed radon gas levels below the EPA “action level” of 4.0 picocuries per liter. However, child care centers remain a valid structure to assess, given the number of hours young children are present in the setting.

Centers are at higher risk if the structure is at ground level or has a basement. The age of the facility and the type of foundation do not in and of themselves increase or decrease the risk. Centers in buildings that have been converted from residential homes or churches are sometimes at higher risk for elevated levels due to poorer ventilation.

For more information on radon testing protocols, see <http://www.idph.state.ia.us/Radon/Test.aspx>.

As a general rule, you should assess all furniture, equipment and materials to ensure that:

- ◆ The items are stable and free of any safety hazards, such as sharp points or corners.
- ◆ No wood items are splintering or have peeling or chipping paint.
- ◆ No item has loose or hazardous small parts.
- ◆ No nails, bolts or screws are protruding.
- ◆ No toys have small or removable parts that pose a choking hazard to small children.
- ◆ No item presents a pinch or collapse hazard, such as the potential with folding chairs and gates.

If in doubt on any item, remove or secure the item until you can get further consultation.

Most products on the market today state on the item that it meets the standards of a federal or national certifying body, such as the Consumer Product Safety Commission, the American Society for Testing and Materials, or Underwriters Laboratory, or contain indications that the material is non-toxic, lead-free, etc. Ensuring that new equipment or furnishings has met a “seal of approval” can offer you some security that you are purchasing equipment and materials deemed to be safe.

The Consumer Product Safety Commission issues alerts and recalls on products. The child care consultant or child care health consultant may alert you to items of concern that you may have in your center. The child care resource and referral agency newsletter will also contain updates on product recalls or alerts.

Equipment for naps or rest: All children must have their own bed, cot, or mat and bedding that is appropriate for the comfort of the child. At a minimum, each bed, cot or mat must have a washable covering (waterproof mattress pad, sheet, etc.) over it for the child’s warmth and comfort and to allow for sanitation through washing. In addition, you must provide bedding such as blankets, sheets, and pillows for each child appropriate to the season.

As of June 28, 2011, all cribs sold in the United States must meet federal requirements for overall crib safety. These requirements include:

- ◆ Traditional drop-side cribs cannot be made or sold, immobilizers, and repair kits are not allowed.
- ◆ Wood slats must be made of stronger woods to prevent breakage.
- ◆ Crib hardware must have anti-loosening devices to keep it from coming loose or falling off.
- ◆ Mattress supports must be more durable.
- ◆ Safety testing must be more rigorous.

The date of manufacture of a crib is a permanent marking generally found on the mattress support or below the headboard or footboard. If the manufacture date of any crib in your program is before June 28, 2011, you should confirm that a Certificate of Compliance (COC) exists. Information about what must be on the COC (i.e., manufacture and model, name/address/contact info of tester, location of test, etc.) can be found on the CPSC website. Any documentation from a business selling cribs must specify that it complies with Code of Federal Regulations (CFR) 1219 for full-size cribs and Code of Federal Regulations (CFR) 1220 for non-full size. The documentation has to say more than “the crib meets new federal requirements.” A non-full size crib must come with its own mattress to be in compliance. A warning label on the mattress will refer consumers back to manufacturer if the mattress becomes non-useable.

For more information, go to <http://www.cpsc.gov/en/Safety-Education/Safety-Education-Centers/cribs/>.

You should assess all beds and cots to ensure that they do not pose an entrapment hazard for small children. Beds, cots and mats should be placed at a minimum of two feet apart. Doing so helps the caregiver attend to the needs of each child and may reduce the transmission of illness such as respiratory infections, which are transmitted by respiratory secretions or airborne particles (from sneezing, coughing, drooling, etc.)

Mats provide an alternative to beds and, like cots, allow centers to maximize floor space. If used, give the same precautions and considerations as are given to beds and cots. All mats should have nonabsorbent, washable, and flame retardant coverings around the foam, such as vinyl or plastic.

For the comfort and health of children, mats should be at least two inches thick. Three- to four-inch mats are preferable, as they raise the child farther off of the floor to avoid drafts and help to provide more padding under the child. One-inch pads may not provide enough comfort for the child, particularly if they are laid on hardwood or linoleum. If used, give extra consideration to the bedding provided for each child to ensure the child remains warm.

All bedding and coverings should be washed at a minimum of weekly, or more often if the material becomes soiled or wet. As all children are to have their own bed, cot, or mat with appropriate bedding, you should change the bedding and sanitize the equipment between occupants.

Cots and bed frames should be wiped down and sanitized at least monthly. Because mats have more direct contact with the floor and with other mats during storage, they should be wiped down and sanitized on a weekly basis.

Frequent and consistent procedures for cleaning and disinfecting may help to prevent the transmission of lice, ringworm, and scabies, three of the most infectious diseases that plague child care centers. If at all possible, mats should be stored so that they do not touch one another and contribute to the spread of disease. Bedding and bed and cot frames should be washed and sanitized more frequently if a child is ill or a particular illness has spread through the center.

While stackable cribs potentially provide another space-saving alternative to beds and cribs, they are discouraged for use in child care centers. The National Health and Safety Performance Standards recommend against their use, as research has shown that the incidence of illness and communicable disease increases with stackable cribs.

Because of the close proximity of each unit and the upper/lower crib structure, lower cribs can become contaminated with saliva, urine, fecal matter, or vomit from a child in the upper crib. The proximity for airborne respiratory particles raises another health concern.

Personal toilet articles: Soap and paper towels or individual cloth towels must be provided for the children. The parent may provide other items for use by the child, such as toothbrushes or hair combs and brushes. Because of the potential for disease transmission, all personal items should be individually labeled and stored in such a way so as not to have contact with another child's items. Toothbrushes should be stored upright in a manner that does not allow them to touch or drip down onto another brush and allows for air drying.

By the age of three, children typically have their first dental exam. Many parents begin encouraging the use of fluoride toothpaste, applied to the child's finger, as early as age two. As good nutrition and oral care are critical to the development of healthy teeth, the child care center provides an optimal setting to begin educating young children on the importance of good oral health care. A dental hygienist or educator can be invited to the center to conduct educational programming for children. Contact a local dentist or the county WIC or maternal and child health office for assistance.

Supervision: If appropriate to the age of the children served, staff are encouraged to sit at the table with the children in a family-style fashion and eat the same foods. Doing so not only provides for more prompt responses in the event of a choking emergency but also allows staff to prevent unsafe eating practices, such as children overstuffing their mouths, feeding each other, fighting over food, etc. In addition, meal times offer an opportunity to discuss exploration of new foods, engage children in social conversation, teach serving and eating techniques, and model appropriate table manners.

Water availability: The Healthy, Hunger-Free Kids Act of 2010 established a requirement to make potable water available to children in the CACFP. This new provision requires child care centers, at-risk afterschool programs, and shelters participating in CACFP to make drinking water available to children, as nutritionally appropriate. Throughout the day, including at meal times, water should be made available to children to drink upon their request, but does not have to be available for children to self-serve. While drinking water must be made available to children during meal times, it is not part of the reimbursable meal and may not be served in lieu of fluid milk.

Intervals of meals and snacks: Children who are cared for more than two hours a day must receive a meal or snack every two to three hours. Examples:

- ◆ Children arrive at center at 7:00 a.m. Either breakfast or snack should be provided no later than 10:30. If breakfast is provided at 7:30, a snack could be provided at 9:30 with lunch to follow after 11:30 and before 12:30.
- ◆ Children arrive at center at 6:30 a.m. Either breakfast or snack should be provided no later than 9:30.

Centers have an opportunity to serve as a model and teach young children sound nutritional practices that will have a positive impact on their development and lifestyles as adults. As such, in developing policies and procedures for children, you may want to restrict the use of candy or high-sugar foods as rewards and use other more nutritional food items or non-edible items -- such as stickers -- for positive reinforcements.



Record Check Evaluation

A. Agency/Provider/Person Requesting Evaluation			
Entity Requesting Evaluation	Requestor's Name	Phone	Fax
Street	City	State	Zip Code

The agency/provider/person listed above is requesting a Record Check Evaluation (RCE) on the following person after a background check revealed a criminal conviction (or deferred judgment), founded abuse (child or dependent adult), or a combination thereof. *In order to complete the evaluation, we need to have all information, including form 470-2310, SING, and Rap Sheet. Please ensure that all forms are dated within the 30 day period. All evaluation materials must be sent in together.*

B. Person Being Evaluated		
Last Name, First Name, Middle Initial	Maiden/Previous Names	Role/Position Applying For

The individual listed above requests an evaluation to determine whether they can be permitted to perform duties under the section "Role/Position Applying For."

I realize that the information I provide in Section D. may be verified with local law enforcement agencies, the district court, Iowa Department of Human Services, or other persons having knowledge of the incident.

Signature of Person Being Evaluated	Telephone	Email	Date
Street Address	City	State	Zip Code

C. Evaluation Determination/Notice of Decision	FOR DHS USE ONLY
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Record Check Evaluation (Investigación de antecedentes penales)

A. Agencia/Prestador/Persona Solicitante			
Entidad solicitante	Nombre del solicitante	Teléfono	Fax
Calle	Ciudad	Estado	Código postal

La agencia, el prestador o la persona mencionada anteriormente solicita una Investigación de Antecedentes Penales (*Record Check Evaluation*, RCE) de la siguiente persona debido a que una averiguación de antecedentes reveló una condena penal (o suspensión condicional de la sentencia), abuso fundado (de un menor o un adulto dependiente), o una combinación de los mismos. *Para realizar la investigación, debemos tener todos los datos, inclusive el formulario 470-2310, SING, y el expediente policial. Por favor, cerciórese de que todos los formularios tengan fecha dentro de los últimos 30 días. Debe enviar todo el material junto.*

B. Persona investigada		
Apellido, primer nombre, inicial	Apellido de soltera u otros nombres	Empleo o puesto solicitado

La persona mencionada solicita una investigación para determinar si el/la postulante tiene permitido realizar las funciones que se indican en la sección "Empleo o puesto solicitado".

Estoy consciente de que los datos provistos en la Sección D serán verificados con la policía, el juzgado del distrito, Iowa Department of Human Services, u otras personas con conocimiento del incidente.

Firma de la persona investigada	Teléfono	Correo electrónico	Fecha
Domicilio	Ciudad	Estado	Código postal

C. Resultado de la investigación/Notificación de la resolución	Para uso exclusivo de DHS
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