

# ASHOE COUNTY

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STAFF REPORT **BOARD MEETING DATE: May 24, 2016**  CM/ACM Finance\_\_\_ DA LARisk Mgt

HR Grants Mgt. ---

DATE:

April 26, 2016

TO:

**Board of County Commissioners** 

FROM:

Amber Howell, Director, Department of Social Services

775.785.8600 ahowell@washoecounty.us

THROUGH: Kevin Schiller, Assistant County Manager

SUBJECT:

Approve changes to the Regulations for Child Care Facilities in Washoe County to incorporate changes approved by the Legislative Subcommittee on Regulatory Changes as well as the Department of Health Services, Division of Public and Behavioral Health, Child Care Licensing Program.

(All commission Districts)

# **SUMMARY**

Approve changes to the Regulations for Child Care Facilities in Washoe County to incorporate changes approved by the Legislative Subcommittee on Regulatory Changes as well as the Department of Health Services, Division of Public and Behavioral Health, Child Care Licensing Program.

Strategic Objective Supported by this item: Safe, Secure and Healthy Communities

# PREVIOUS ACTION

On December 14, 2010, the Board approved changes to the regulations for Child Care Facilities in Washoe County to incorporate changes approved by the Legislative Subcommittee on Regulatory Changes as well as the Department of Health Services, Division of Public and Behavioral Health, Child Care Licensing Program.

# **BACKGROUND**

Chapter 45 of Washoe County Code as well as Nevada Revised Statue and Nevada Administrative Code 432A allow for the Department to adopt Child Care Facility regulations, guidelines, and standards and to amend them as necessary due to local or state changes. Changes must be at least as restrictive as the statutory and regulatory requirements.

Guidelines shall be based upon ordinance, applicable local, state and federal laws and the policies and standards as established by the Board of County Commissioners. Child Care Facility regulations seek to set a minimum standard for safety, quality and expectation of care provided to children while not accompanied by their parents or guardians and set definitions of that circumstance. This is done through the public hearing process both at the state and local levels and is approved by the Board of County Commissioners. The intent of proposed regulatory amendments is to protect the health and safety of children at child care facilities.

The proposed changes were codified by the state 6/23/14. Changes were addressed and approved locally at the Child Care Advisory Board on 1/28/15 and 7/30/15.

# FISCAL IMPACT

There is no fiscal impact to the Department's FY16 adopted budget related to the proposed regulation changes.

### RECOMMENDATION

Approve changes to the Regulations for Child Care Facilities in Washoe County to incorporate changes approved by the Legislative Subcommittee on Regulatory Changes as well as the Department of Health Services, Division of Public and Behavioral Health, Child Care Licensing Program.

# **POSSIBLE MOTION**

Should the Board agree with staff's recommendation, a possible motion would be to "move to approve changes to the Regulations for Child Care Facilities in Washoe County to incorporate changes approved by the Legislative Subcommittee on Regulatory Changes as well as the Department of Health Services, Division of Public and Behavioral Health, Child Care Licensing Program."

# **Regulations for Child Care Facilities**

**Definitions** 

#### SECTION 1 DEFINITIONS

As used in these Regulations, unless the context otherwise requires, the words and terms defined in this section have the meanings ascribed to them.

- 1.1 Accommodation facility means a child care facility which is operated:
  - A. By a business which is licensed to conduct a business other than the provision of care to children; and
  - B. As an auxiliary service provided for the customers of the primary business.
- \*1.2 <u>Bleach</u> means standard, unscented, liquid household bleach containing <del>5.25% to 6</del>8.25% sodium hypochlorite with no added soaps or cleaning compounds.

This regulation change is pursuant the Washoe County Health Department recommendation due to manufacturers' change to the concentration of bleach.

- 1.3 Board means the Board of County Commissioners of Washoe County.
- 1.4 <u>Caregiver</u> means any natural person 16 years of age or older who meets the qualifications set forth in these Regulations and who is responsible for the direct care, supervision, guidance and education of children in a child care facility.
- 1.5 Care of ill children facility means a child care facility providing care to only ill children.
- 1.6 Child means a person who has not reached his 18<sup>th</sup> birthday.
- 1.7 <u>Child care</u> means the care, supervision, and guidance of children, unaccompanied by parents, guardians, or custodians, on a regular basis for periods of no more than 14 hours in any 24-hour period in a child care facility as herein defined.
- 1.8 <u>Child care center</u> means any facility which regularly provides care for 13 or more children, and which is developmentally appropriate for those children.
- 1.9 Child care facility means:
  - A. Any dwelling or establishment which furnishes care on a temporary or permanent basis, during the day or overnight, to two or more children under 18 years of age, if compensation is received for the care of any of those children; or
  - B. An on-site child care facility; or
  - C. An outdoor youth program.
  - D. Child care facility does not include:

# Regulations for Child Care Facilities

- 1. The home of a natural parent or guardian, foster home, or maternity home; or
- 2. A home in which the only children cared for are related to the care provider by blood, adoption, or marriage within the third degree of consanguinity, i.e., child, grandchild, niece, or nephew; or
- 3. A home in which a person provides care for the children of a friend or neighbor for not more than four weeks if the person who provides care does not regularly engage in that activity.
- E. For the purposes of these regulations a child care facility does not include:
  - 1. Where parents on a mutually cooperative basis exchange care of one another's children; or
  - Care given to children on site while their parents are attending religious services or other recognized instructions or programs not to exceed the duration of the services or programs;
  - 3. A baby-sitting agency licensed by the county or the city; or
  - 4. Day camp or camp type operations serving children who are enrolled to participate in a full-day, required educational program (private or public school) and who conduct their activities off the premises of a child care facility.
    - a. Any child care facility which operates a day camp shall notify, in writing, the parents of children served and the Department that the day camp operation is not licensed or regulated by the Washoe County Department of Social Services.
    - Any advertisement/brochure regarding day camps conducted in conjunction with the child care facility shall indicate program is not licensed by Washoe County Department of Social Services.
- 1.10 Child care institution has the meaning ascribed to it in NRS 432A.0245.
- 1.11 Child care systems means an organization of individual child care facilities wherein each facility is associated with a licensed central operator by exclusive contractual agreement which provides for the admission of children and requires the central operator to provide the facility with central services, including consultation, technical assistance, training, supervision, evaluation, and the provision of health and social services or the referral to other persons or entities for health and social services.
- 1.12 <u>Child with special needs</u> means a child who does not function according to expectations appropriate to his age and who regularly requires special assistance or accommodations.

# Regulations for Child Care Facilities

- 1.13 <u>Communicable disease</u> means a disease which is caused by a specific infectious agent or its toxic products, and which can be transmitted, either directly or indirectly, from a reservoir of infectious agents to a susceptible host organism.
- 1.14 Consultant means a person who provides activities in the area of his specialty to enrich the basic program for the children, but is not part of the direct caregiving staff.
- 1.15 <u>Department</u> means Washoe County Department of Social Services.
- 1.16 <u>Department Director</u> means Director of Washoe County Department of Social Services.
- 1.17 Department of Social Services means Washoe County Department of Social Services.
- 1.18 <u>Developmentally appropriate care and education</u> means the provision of care or education in a manner that takes into account:
  - A. The universal, predictable sequences of child development; and
  - B. The particular sequences of child development of each child cared for in a facility; and
  - C. The principle that children learn best when learning is meaningful to them and is based on "first hand" experiences.
- 1.19 <u>Director</u> means either the licensee or a person appointed by the licensee who is responsible for the daily operation, administration and management of the facility.
- 1.20 <u>Disability level</u> means the group category, i.e. mildly retarded, moderately retarded, or severely retarded, appropriate to the disabled child's functional level and skill capabilities in the areas of mobility, speech and language, mental/ cognitive, social/emotional, visual, hearing, self-care, and perceptual/motor. A disabled child's level of disability shall be determined by an appropriate professional's diagnosis.
- 1.21 <u>Early care and education program</u> means a program in which developmentally appropriate care and education are provided to children based on the ages of the children served and on the type of setting within which that care and education are provided.
- 1.22 <u>Educational child care institution</u> means a child care institution that is recognized by the Department of Education as providing educational opportunities primarily for privately placed children of school age.
- 1.23 <u>Excludable disease or condition</u> means a disease or condition requiring exclusion under either subsection 22.5 or subsection 26.15 of these Regulations.
- 1.24 <u>Exclusion</u> means the denying admission to and the removal of an ill child, volunteer, caregiver or other staff member from the child care facility.

#### **Regulations for Child Care Facilities**

- 1.25 Extended care accommodation facility means an accommodation facility that:
  - A. Provides temporary care to children for an amount of time that is more than 3 ½ hours but is within the limits of time set forth in section 32 of these Regulations, and:
  - B. Provides such care while the person responsible for placing the child in the extended care accommodation facility remains on the premises of the business establishment which operates the extended care accommodation facility.
- 1.26 <u>Facility</u> means a child care facility.
- 1.27 <u>Facility for special events</u> means a facility which is operated by a business that is licensed to conduct a business other than the provision of care to children, and is located on the premises of a business at which a special event is held.
  - A. For the purposes of these Regulations, a facility for special events does not include care to children that is provided in a hotel or motel room or in the private home of a person who is attending a special event.
- 1.28 <u>Family child care home</u> is any facility in an occupied private residence where the licensee resides and care is provided to at least two but not more than six children.
- 1.29 <u>Fever</u> means an oral temperature of greater than or equal to 101°F, or an axillary (armpit) temperature of greater than or equal to 100°F.
- 1.30 <u>Group child care home</u> is any facility in an occupied private residence wherein the licensee resides and regularly provides direct care for no less than seven but no more than 12 children.
- 1.31 <u>Health Authority</u> means the district health officer of the Washoe County District Health Department or the Health Officer's designee.
- 1.32 <u>Health care provider</u> means a physician, nurse, or physician assistant licensed in accordance with state law.
- 1.33 Individual assessment means an empirical process that determines and documents if, and to what degree, a person has disabilities and what intervention and services are needed to enable the child to move toward increasing independent functioning. The individual assessment identifies the present functional level and skill capabilities of the child; the condition that impedes his development; recommendations for program placement, program adjustments, and related services required by the child; and where possible, the etiology of the disability.
- 1.34 <u>Individual program plan</u> means a written plan of intervention for the child which is developed and modified at frequent intervals. The plan identifies the child's functional

# Regulations for Child Care Facilities

**Definitions** 

status and skill capabilities along a continuum of objectives, and outlines the materials, equipment, techniques and activities which are conducive to successful progression along this continuum.

- 1.35 <u>Infant and toddler nursery</u> is a facility which provides an early care and education program for four or more children under the age of two and which may provide care up to the third birth date. The program has established specific goals to enhance the cognitive, social, emotional, physical and creative development of each child at the facility. An infant and toddler nursery may be a distinct part of a child care center provided that the operations of the infant and toddler nursery shall be kept separate from the child care center. Infant and toddler nursery does not include:
  - A. Family child care home if the licensee does not provide care to more than four children under two years of age.
  - B. Group child care home if the licensee does not provide care to more than eight children under three years of age.
- 1.36 <u>Institution</u> means a child care institution.
- 1.37 <u>Licensee</u> means the individual, corporation, partnership, voluntary organization, or other public or private organization ultimately responsible for the development and enforcement of policies, program and procedures of a child care facility and adherence to these Regulations by the facility.
- 1.38 <u>The Nevada Registry</u> means the organization that operates the statewide system of career development and recognition created to:
  - A. Acknowledge and encourage professional achievement in the early childhood care and education workforce in the State:
  - B. Establish a professional development system in this State for the field of early childhood care and education;
  - C. Approve and track all informal training in the field of early childhood care and education in this State; and
  - D. Act as a statewide clearinghouse of information concerning the field of early childhood career and education.
- 1.39 NRS means the Nevada Revised Statutes.
- 1.40 Outbreak means the occurrence of cases in a community, geographic region or particular population at a rate in excess of that which is normally expected in the community, geographic region or particular population.

# **Regulations for Child Care Facilities**

- 1.41 Outdoor youth program means a program for the provision of services, while living outdoors, to persons under 18 years of age who have behavioral problems, problems with mental health or problems with the abuse of alcohol or drugs. The term does not include any facility, activity or program:
  - A. Operated by or on behalf of a governmental entity; or
  - B. Licensed by the health division of the County/State.
- 1.42 <u>Partial Investigation</u> means, at a minimum, checking the Statewide Central Registry for the Collection of Information Concerning the Abuse or Neglect of a Child established by NRS 432.100 and performing a background check with local law enforcement.
- 1.43 Parent means the child's natural parent, guardian, or any other person or organization legally responsible for the child.
- 1.44 <u>Person</u> means the singular and the plural and shall include individual persons, partnerships, firms, corporations, or associations.
- 1.45 <u>Private kindergarten</u> means a facility licensed by the State Department of Education. If a kindergarten is a part of a child care facility, the area of the kindergarten must also be licensed by the Department of Social Services.
- 1.46 Provisional license means a temporary license authorizing facility operation issued when:
  - A. There is a change in ownership of the facility; or
  - B. The facility has failed to completely meet all standards mandated by these regulations and agrees to effect the necessary changes.
    - A provisional license may be issued at the discretion of the Department for a maximum of one year and only when no life safety risks, as determined by the Department, are involved.
- 1.47 <u>Reportable Disease or Condition</u> means a disease or condition listed in Addendum VI of these Regulations.
- 1.48 Resident of facility is any adult person who lives in the facility or who has access to the children in care by virtue of his physical presence.
- 1.49 Residential child care institution means a child care institution:
  - A. Which provides care and psychoeducational services to children who are diagnosed as severely emotionally disturbed (as defined in NRS 433B.045); and

### **Regulations for Child Care Facilities**

- B. In which the treatment goals and length of stay of a child are dependent upon the needs of the child with regard to his physical, social, emotional, moral and educational development.
- 1.50 Respite care means temporary or drop-in care for relief of parents, guardians, or foster parents.
- 1.51 <u>Sanitizing agent means the following:</u>
  - A. Bleach added to water that is prepared fresh daily and made in accordance with the sanitizing instructions contained in Addendum X; or
  - B. Use of a dishwasher that meets the requirements of subsection 29.3 (E) (3) (a); or
  - Quaternary ammonium and iodine solutions approved by the U.S. Environmental Protection Agency and used in accordance with the manufacturer's directions for sanitizing; or
  - D. Other sanitizing agents approved by the U.S. Environmental Protection Agency and the Health Authority and used in accordance with the manufacturer's directions for sanitizing.
- 1.52 <u>Shelter care institution</u> means a child care institution which provides residential care on a 24-hour basis to children who are in the custody of an agency which provides child welfare services (as defined by NRS 432B.030) and who are in need of temporary protection and care.
- 1.53 Special needs facility means a child care facility providing care to children with special needs in which those children comprise 40 percent or more of the total number of children for whom the facility is licensed to provide care.
- 1.54 <u>Work permit</u> is a sheriff's work permit for child care issued under Washoe County Code Chapter 45.

# **Regulations for Child Care Facilities**

License Application

#### SECTION 5 LICENSE APPLICATION

- 5.1 <u>All applications for license</u> shall be made to the Department on a form provided by the Department and shall be accompanied by a nonrefundable license fee. Refer to Section 5.4 of these Regulations for the license fee structure.
- 5.2 Applicant must be at least 18 years of age.
- 5.3 <u>Contents of the application</u>. Applicants shall reply in writing to any and all questions requested by the Department pertaining to the issuance or renewal of a child care license.
  - A. <u>Corporation</u>. In all cases where the applicant for a child care license is a corporation, the names and addresses of all officers of the corporation shall be listed on the application.
  - B. Personal data. If the applicant is an individual, the application shall state his name and place of residence, date and place of birth, whether or not he is a citizen of the United States, whether or not he is a bona fide resident of Washoe County, and whether or not he has been convicted of a felony under the laws of any state. The applicant must also list any and all previous arrests, convictions, or pending litigation, except minor traffic citations, and certify that this information is true and complete.
  - \*C. Fingerprinting. The applicant shall present himself to the sheriff's office to be fingerprinted. The sheriff shall require such other information as to the identity of the applicant to enable him to properly investigate the applicant's reputation, character, arrest and conviction, and any pending litigation record. Upon completion of such investigation, the sheriff shall verify the accuracy and completeness of the application and report his findings to the Department Director. A person shall not have contact with a child in a child care facility without supervision before the investigation of the background and personal history of the person has been completed (NRS 432A.170).

This change was made to align the Washoe County Regulations for Childcare with the State Regulations.

- D. <u>Fingerprint information</u>. All fingerprints required under the terms of these Regulations and all information obtained by reason of such fingerprints shall be maintained by the sheriff in a confidential file to be open for the inspection only of child care licensing inspectors, law enforcement officers, and peace officers of the state of Nevada.
- E. <u>Information confidential</u>. All information other than criminal history information of a confidential nature supplied under the terms of these Regulations shall be maintained by the Department Director in a confidential file, to be open for the inspection only of child care licensing inspectors, law enforcement officers, and peace officers of the State of Nevada.

# **Regulations for Child Care Facilities**

License Application

- 5.4 <u>License fees</u>. The following annual license fees shall be paid at the time of application and are not refundable:
  - A. Family child care home thirty dollars (\$30)
  - B. Group child care home sixty dollars (\$60)
  - C. Child care center
    - 1. 13 to 50 children one hundred dollars (\$100)
    - 2. 51 or more children two hundred dollars (\$200)

Regulations for Child Care Facilities

Inspections and Permits Required for Approval

#### SECTION 6 INSPECTIONS AND PERMITS REQUIRED FOR APPROVAL

#### 6.1 Inspections

- A. No application for a license required by Washoe County Code Chapter 45 and these Regulations may be approved until the building and equipment of such child care facility has been approved by the city/county planning department, building department, fire department, Washoe County District Health Department, and the Washoe County Department of Social Services.
- B. Thereafter, at least annually, the fire department and Washoe County District Health Department or a designee, shall inspect the facility to ensure that fire and health standards are being met and maintained.
- C. The Department shall conduct semiannual inspections as a minimum.
- D. The Department may request other departments or agencies to conduct inspections or investigations. The licensee or applicant shall cooperate with the person conducting the inspection/investigation by providing entry and access to the building, records, and staff of the facility. Failure to provide such entry and access is a ground for revocation of a license or denial of an application for a license.
- Tuberculosis tests. Each applicant and other adult person, whether a full or part-time employee, volunteer, substitute caregiver or trainee, whether paid or unpaid, who works, resides or renders services in a licensed child care facility, shall obtain written evidence that they are free from communicable tuberculosis. The evidence must be in the form of a report that states that they are free from active tuberculosis as required pursuant to subsection A or B.
  - A. Before a person, including a person who has received a bacillus Calmette-Guerin (BCG) vaccination, begins employment at a facility, he/she must, within the 12 months immediately preceding the first day of employment at the facility, have submitted to a:
    - 1. Mantoux tuberculin skin test: or
    - 2. Chest radiograph and examination by a provider of health care who is authorized to diagnose active tuberculosis.
  - B. At least once every 24 months after the date the skin test or chest radiograph and examination were conducted, every person shall submit to and provide negative results of:
    - 1. Mantoux tuberculin skin test; or
    - 2. If a positive result was given previously, an examination by a provider of health care who is authorized to diagnose active tuberculosis.

# Regulations for Child Care Facilities

Inspections and Permits Required for Approval

- 6.3 <u>Certificate of Immunization</u>. The applicant shall also provide proof of immunization for every child who resides in the facility.
- 6.4 <u>Cardiopulmonary Resuscitation</u>. Before issuance of a license, each applicant for a license shall complete a course in cardiopulmonary resuscitation. Whenever a facility is in operation, at least one caregiver on duty must be certified in CPR. The certification course must meet the requirements listed in Section 22.2.G of these Regulations.
- 6.5 Prevention and Control of Communicable Diseases in the Child Care Setting. Within 90 days each applicant and full or part-time caregiver, other than in an accommodation facility or a facility that provides care to ill children, shall complete a course in Prevention and Control of Communicable Disease in the Child Care Setting taught and/or approved by the Washoe County District Health Department which includes training in the recognition of signs and symptoms of illness.
- 6.6 <u>First Aid Training</u>. Whenever a child care facility is in operation, at least one of the caregivers on duty must have completed a program in the training of administering first aid. Such training must meet the requirements listed in Section 22.2.H of these Regulations.

#### 6.7 Work permit

- \*A. <u>Licensees and residents</u>. Before the issuance of a license, each applicant for a license and all residents of a facility who are at least 18 years of age, other than a resident who remains under the jurisdiction of a court pursuant to NRS 432B.594, shall obtain a work permit.
- \*B. <u>Employees</u>. Within three working days24 hours after the commencement of employment, each full or part-time employee, trainee, or substitute of a facility shall obtain a work permit.
- \*C. Volunteers and others who visit or render service in a facility may obtain a work permit. Every volunteer, other than parent volunteers, who is at least 18 years of age and regularly works—15 hours or more per week in the facility, is required to obtain a work permit within three working days24 hours after the commencement of the volunteer position. An educational intern who provides care for a period of less than six months would not be required to obtain a work permit if the intern has provided the facility with verification of a background check that meets the requirements set forth in this section which was performed in order to secure the internship. Note Section 17.15 of these Regulations.

These changes to 6.7.A.B.C were made to align the Washoe County Regulations for Childcare with the regulation changes made by Assembly Bill 93, signed by the Governor 5/24/13, and codified by the State on 6/23/14.

# Regulations for Child Care Facilities

Inspections and Permits Required for Approval

- D. <u>Work permit denial or revocation</u>. A work permit shall be denied to or revoked from any person who fulfills any description given in Section 3.3.A through Section 3.3.G of these Regulations.
- \*6.8 Partial background investigations. A partial investigation into the qualifications and background of every resident of the facility, employee, or volunteer, other than parent volunteers, who regularly works 15 hours or more per week-in the facility, will be conducted on those who are at least 16 years of age but less than 18 years of age. The partial investigation will be repeated every two years from the date it was initially completed unless the individual has turned 18 years of age, in which case, a full work permit would be required.

This change was made to align the Washoe County Regulations for Childcare with the regulation changes made by Assembly Bill 93, signed by the Governor 5/24/13, and codified by the State on 6/23/14.

Washoe County also chose to be more restrictive than the State due to the County's ability to run partial background checks for youth 16-18 years of age.

\*A. A volunteer, other than a parent volunteer, who regularly works fewer than 15 hours per week-in a facility must be reported to the Department by the facility within three working days-24 hours after the date of his presence in the facility so that a background investigation through the Statewide Central Registry for the Collection of Information Concerning the Abuse or Neglect of a Child established by NRS 432.100 can be conducted.

This change was made to align the Washoe County Regulations for Childcare with the regulation changes made by Assembly Bill 93, signed by the Governor 5/24/13, and codified by the State on 6/23/14.

# **Regulations for Child Care Facilities**

Insurance

# SECTION 7 INSURANCE

- 7.1 Required amounts. Every licensed child care facility shall be required to have and maintain in full force and effect at all times during each license period, a policy of liability insurance sufficient for the protection of children, employees, volunteers, and any visitors to the facility covering personal injuries with limits not less than:
  - A. Three hundred thousand dollars (\$300,000) in any facility licensed to care for six or less children; and
  - B. One million dollars (\$1,000,000) in any facility licensed to care for seven or more children.
- 7.2 <u>Certificate of insurance</u>. A copy of the policy or a certificate of insurance shall be provided to the Department prior to issuance of a license. Said certificate shall evidence type of coverage and policy amount.
- \*7.3 <u>Endorsement</u>. Each insurance policy shall contain an endorsement to provide notice providing for thirty (30) days' notice to the Department prior to the effective date of cancellation, lapse or non-renewal of the policy.
  - This change was made to align Washoe County Regulations for Childcare with the State regulations codified 6/23/14. The words, "to provide notice" were added at the suggestion of Doreen Ertell, Washoe County Risk Management to clarify what the purpose of the endorsement is.
- 7.4 <u>Governmental agencies</u>. The Department may waive upon request, the above insurance requirements for any government agency or subdivision of a government which operates a child care facility and is self-insured for its general liability exposures with the concurrence of the County Risk Manager, after the review of the entity's annual fiscal audit.

#### **Regulations for Child Care Facilities**

Violation of Regulations

#### SECTION 13 VIOLATION OF REGULATIONS

- 13.1 <u>Unlicensed care</u>. If the Department has reason to believe that a facility is operating without a license, the Department will investigate.
  - A. <u>A notice of violation</u> will be issued if the person providing unlicensed care agrees to become licensed or to cease providing child care immediately.
  - B. A citation will be issued immediately if:
    - 1. The person refuses to cooperate;
    - 2. If the health or safety of any of the children appears to be in danger; or
    - 3. If the caregiver was given a prior opportunity to be licensed and did not follow through.
- 13.2 <u>Licensed facilities</u>. If the Department has reason to believe that a licensed facility is not complying with the conditions of the license, Chapter 45 of the Washoe County Code, or these Regulations, the Department will investigate to determine the facts. The Department staff may enter and inspect the premises which are believed to be in non-compliance and may conduct such other investigations as it deems necessary.
- 13.3 <u>Denial, suspension, revocation, or limitation of license</u>. The Department may deny an application for a child care license or may suspend, revoke, or limit a child care license for the following acts by the applicant, members of the household, licensee, staff, or volunteers:
  - Violation of any standard contained in Chapter 45 of the Washoe County Code or these Regulations;
  - B. Conviction of violation of any law:
  - C. Aiding, abetting, or permitting the commission of any such violation:
  - Conduct which is inimical to the public health, morals, welfare or safety of the people
    of the State of Nevada in the maintenance or operation of the facility for which a
    license is issued;
  - E. Conduct which is detrimental to the health or safety of the occupants or employees of the facility;
  - F. Failure or refusal to permit any investigation or inspection by the Department or to admit authorized representatives of the Department at any reasonable time to investigate or inspect the facility;

# **Regulations for Child Care Facilities**

Violation of Regulations

- G. Failure or refusal to submit any required report to the Department or refusal to make available to the Department any records required by it in investigating the facility for licensing purposes;
- H. Findings by the Department that the licensee, staff, or members of the household no longer meet the standards outlined in Chapter 45 of the Washoe County Code or these Regulations; or
- Failure to maintain compliance with standards for safety from fire and other emergencies or standards for health and sanitation as determined by the Department after an inspection of any building or premises of the facility conducted by Department or other agency staff.
- 13.4 <u>Citations</u> may be issued for violations of any standard contained in the Regulations. The use of citations as a sanction will generally precede the revocation, suspension, or limitation of a license.
- 13.5 Immediate revocation/suspension. Notwithstanding any of the notice and appeal provisions specified in these Regulations, if the Director of the Department finds that the health and safety of the children so requires, the Department Director may order the immediate revocation/suspension of the license and shall give to the licensee a written notice of the order by personal service. The order shall become effective as indicated in the notice. The notice will contain a statement of the reasons for revocation/suspension and will inform the licensee of his right of appeal.
- \*13.6 <u>Notice of Violations.</u> If an inspection of a facility reveals that the person who operates the facility is in violation of any standard contained in the Regulations, the Department may issue a notice of violation. The notice of violation must:
  - A. Be in writing and describe the nature of the violation:
  - B. Include the time permitted to correct the violation; and
  - C. Inform the person who operates the facility that the Department may impose an administrative fine.
- \*13.7 <u>Administrative Fines.</u> The Department may impose a \$100 administrative fine for the following violations.
  - A. An injury to a child which is the direct result of the negligence of the licensee or an employee of the licensee;
  - B. Failure to satisfy requirements of regulations relating to background checks and personal history requirements two or more times during the licensing period; or

# **Regulations for Child Care Facilities**

Violation of Regulations

C. Failure to satisfy requirements of the staff-to-child ratio, outlined in Section 24.4.C inclusive, two or more times during the licensing period of the facility.

### \*13.8 Fines Protocol

- A. Administrative fines shall not be more than \$100 per day for the failure to correct any other violation of the provisions of the Regulations within the time frame specified in the notice of violation.
- B. The Department may impose an administrative fine of \$200 in addition to any administrative fine if a violation results in an injury to any person.
- C. The licensee, caregiver, or director on whom the Department imposes an administrative fine may appeal the action as outlined in Section 14.5.
- D. The administrative fine will be paid to Washoe County's General Fund.

Changes to 13.6.7.8 were incorporated to align the Washoe County Regulations for Childcare with the changes made to chapter 432A of the Nevada Administrative Code, codified 6/23/14. 13.8.D was added by Washoe County to designate that funds received pursuant to the Administrative Fine Protocol will be paid to the Washoe County General Fund.

#### **Regulations for Child Care Facilities**

Appeal Procedure

#### SECTION 14 APPEAL PROCEDURE

- 14.1 <u>Denied work permit</u>. Any applicant who is denied a sheriff's work permit shall follow the appeal procedure provided in Washoe County Code Chapter 45.
- \*14.2 Right to appeal. Any applicant, licensee, caregiver, or applicant for a director position who is dissatisfied with the decision (substantiation of a complaint, violation noted in an inspection, or administrative fine under \$250) of the Department Social Worker that affects his situation causes a hardship shall be given the opportunity to appeal that decision. He may appeal to the Social Worker's Supervisor within 30 calendar days of receiving the Social Worker's decision by mail. The Supervisor will then make a determination within ten calendar days of meeting with the applicant, licensee, or caregiver.

This regulation change was made to clarify the previous wording of the appeals process to make the procedures more clear and concise.

\*14.3 Notification. An applicant for a child care license who was denied a license, a person whose director application was denied, or a licensee whose license may be suspended, revoked, er-limited, or have an administrative fine imposed shall be notified by letter. The written notice of the action or proposed action shall be sent by certified mail to the address shown in the record. The notice shall specify the reasons for and the effective date of the administrative fine, denial, suspension, or revocation. If a Social Worker substantiates a complaint on a facility, the results will be sent through regular mail.

This regulation change was made to clarify the previous wording of the appeals process to make the procedures more clear and concise.

- 14.4 <u>Decision pending appeal</u>. The decision of the Social Worker will be in effect from the date given in the notice pending the result of the appeal.
- \*14.5 Appeal hearing. Any director, licensee, or caregiver, whose application was denied, license suspended, revoked, limited, or has an administrative fine imposed over \$250 has the right to an appeal hearing.
  - \*A. If the appellant is dissatisfied with the Supervisor's decision, he The director, licensee, or caregiver may request an appeal hearing by filing such a written request with the Department Director within ten calendar days of receipt of the Supervisor's decision.
    - This regulation change was made to clarify the previous wording of the appeals process to make the procedures more clear and concise.
  - B. The Department Director or designee shall schedule a hearing within 20 calendar days of receipt of the appeal and notify all parties involved of the hearing date, time, and place.

# **Regulations for Child Care Facilities**

Appeal Procedure

- C. Notice of the hearing must be given no less than five days before the date of the hearing.
- D. An impartial hearing officer selected by the Department shall conduct the informal hearing in accordance with established informal hearing procedures.
- E. If the appellant fails to appear at the hearing within 15 minutes of the designated time, the hearing officer will formally adjourn the proceedings. The Department will notify the appellant that within five calendar days a written statement setting forth the reason(s) for the appellant's failure to appear at the hearing must be submitted to the hearing officer.
- F. The hearing officer, after review of the reason given by the appellant for his failure to appear, may schedule another hearing within ten calendar days thereafter. Should the hearing officer deem the reason inadequate or without sufficient merit, the hearing shall not be rescheduled. Only one such rescheduling of a hearing will be considered or granted.
- G. The hearing officer may extend the hearing for a reasonable period of time in order to hear all evidence either side has to offer. At the conclusion of the hearing, the matter shall stand submitted for decision. Within ten calendar days after the hearing, the hearing officer shall mail a written decision to the appellant and the Department.
- Appeal of hearing officer's decision. Upon receipt of the decision of the hearing officer, the Department or appellant may within 30 days appeal that decision to a court of competent jurisdiction in the County. The decision of the hearing officer becomes final if no appeal is filed within the 30-day period.

Regulations for Child Care Facilities

Requirements for Administration of a Facility

### SECTION 17 REQUIREMENTS FOR ADMINISTRATION OF A FACILITY

# 17.1 Written policies

- A. Every facility shall adopt and comply with a written statement which:
  - 1. Sets forth the general services to be offered to each child;
  - 2. Provides for the special needs of each child;
  - 3. States the requirements for admission and procedures for enrollment;
  - 4. Sets forth fees and any plan for payment of fees;
  - 5. Provides rules relating to personal belongings brought to the facility;
  - 6. Covers arrangements for transportation;
  - 7. Requires written parental permission for trips and activities outside the facility;
  - 8. Provides for parental involvement in the general functions of the facility;
  - 9. Gives either or both parents the right to observe the program of the facility before enrollment and anytime after enrollment of the child;
  - 10. Sets forth the procedures for the handling of emergencies and illnesses of each child:
  - 11. Notifies either or both parents of the contents of any plan created to ensure that the staff of the facility is prepared to respond to an emergency; and
  - Notifies either or both parents of the requirement that at least one caregiver who has current CPR certification must be on duty whenever the facility is in operation.
  - 13. Notifies either or both parents that smoking of tobacco in any form is prohibited in the facility at all times.
- B. In addition to the information required in Section 17.1.A, a licensee for a facility that provides care for ill children shall adopt criteria for admission that set forth:
  - 1. The illnesses and disabilities that are acceptable;
  - 2. The illnesses and disabilities that are not acceptable;
  - The ages of children served by the facility;

# Regulations for Child Care Facilities

- 4. The information required from a parent before a child can be admitted to the facility; and
- 5. The procedures to be followed by the staff of the facility in the event of an emergency.
- 17.2 <u>Policy Statement</u>. Every facility shall provide a copy of its policy statement to each paid or volunteer staff member, to each parent of a child enrolled in the facility, and to the Department.
- 17.3 <u>14-Hour Limit</u>. At the time of enrollment, except in a child care institution, the facility shall advise the parents of the 14 hour limit. The parents shall sign a form acknowledging that they are aware of the time limitation and designate the time they will return for the child.
- 17.4 <u>Telephone/emergency numbers</u>. The name, business address, and business telephone number of any person who has legal or administrative responsibility for the facility must be provided to each parent of a child enrolled in the facility and to the Department. Each facility shall have a working telephone which is listed in a local directory. A current list of emergency telephone numbers, including health agencies, fire and police departments, and ambulance services shall be posted adjacent to the telephone.
- \*17.5 <u>Employee list</u>. The facility shall notify the Department of all staff changes exclusive of substitutes prior to new personnel commencing employment. Licensees providing child care in occupied residences shall within three working days24 hours notify the Department of changes in the household composition.
  - This change was made to align the Washoe County Regulations for Childcare with the regulation changes made by Assembly Bill 93, signed by the Governor 5/24/13, and codified by the State on 6/23/14.
- 17.6 <u>Change in director</u>. A licensee shall notify the Department, within three working days, of the resignation or termination of the approved director.
- 17.7 <u>Change in services</u>. The facility shall notify each parent of a child enrolled in the facility and the Department of significant changes in services offered by the facility.
- 17.8 <u>Confidentiality</u>. The facility shall not disclose information pertaining to any child to any person who is not a member of the facility staff or a Department representative unless:
  - The parent has granted written permission for the disclosure (the facility shall have forms available which allow a parent to release information pertaining to his child); or

# Regulations for Child Care Facilities

Requirements for Administration of a Facility

- B. There is an emergency, as determined by the facility director or a staff member who is in charge at the time of the emergency.
- 17.9 Reporting child abuse/neglect. Every licensee or employee of a facility who has reason to believe child abuse/neglect may be occurring in the facility, in the child's home, or elsewhere shall report his beliefs to the Department and to the appropriate authority as required in NRS 432B.220. For the purposes of these Regulations, immediately is defined as within one (1) hour.

### 17.10 Procedures for admission

- A. <u>Admission Records</u>. Before the admission of a child to a facility, the caregiver shall obtain the following information from the parent. The caregiver shall make a record for each child and maintain each record in good order. The record shall state the date the record was prepared and the date of the first day the child attends the facility and include:
  - 1. The child's full legal name, date of birth, sex, current address, and preferred name;
  - 2. The name, address, and home and business telephone numbers of each parent responsible for the child and any special instructions needed to reach the parent during the hours the child is in the facility;
  - The name, address, and telephone number of any person who can assume responsibility for the child and is authorized to take the child from the facility if the parents cannot be reached;
  - 4. Information concerning the health of the child, including any special needs of the child. Refer to Section 26 for Immunization and Health of Children;
  - 5. A written authorization signed by a parent which allows emergency surgical and medical care;
  - 6. The name, address, and telephone number of the child's physician; and
  - 7. The name, address, and telephone number of all persons authorized by the parents to take the child from the facility.
- B. <u>Infant/toddler admission procedures</u>. The director or a designated member of the staff of a nursery for infants and toddlers or other facility that enrolls infants and toddlers shall discuss policies concerning the health of an infant or toddler with the parents before enrollment of the child. Every parent must be given a description of and agree in writing to the following matters concerning the child:
  - 1. Feeding:

# **Regulations for Child Care Facilities**

- 2. Diapering;
- 3. Changes of clothing, which are to be provided by parents;
- 4. Bathing, including, without limitations, the kind of soap to be used;
- 5. Precautions against infectious disease;
- 6. Sleeping;
- 7. Toilet-training;
- 8. Daily reports to the parents;
- 9. Any special precautions regarding the health and safety of the child; and
- 10. Any other information deemed necessary by the facility or Department.
- C. Each facility must develop written guidelines concerning the methods used by the staff of the facility for toilet training and the use of appropriate equipment and clothing for such training.
  - 1. The guidelines concerning toilet-training must be distributed to each parent of each child being cared for at the facility who is not yet toilet-trained.
  - 2. The guidelines must require that the staff of the facility shall:
    - a. Not force a child to remain on the toilet for a prolonged period of time or punish a child for wetting or soiling his clothing;
    - b. Not leave a child unattended while the child is sitting on a potty-chair or on the toilet;
    - Instruct and assist the children in washing their hands after using the toilet;
       and
  - 3. If a potty-chair is used to train a child to use the toilet the facility shall:
    - a. Place the potty-chair on a washable, impervious floor:
    - b. Use the potty-chair in accordance with the instructions from the manufacturer;
    - c. Ensure that the potty-chair is stored and used in an area that is not in close proximity to an area used for the preparation of food;

# Regulations for Child Care Facilities

- d. Empty the potty-chair into a toilet immediately after each use;
- e. Thoroughly clean and disinfect the potty-chair after each use; and
- f. Disinfect the utility sink where the potty-chair was cleaned.
- D. <u>Information provided to parent at enrollment</u>. Each facility must provide the following items to a parent/guardian of a child who enrolls the child in the facility, at or before the time of enrollment, or upon request when considering enrollment:
  - 1. A copy of the license issued to the facility, and
  - Summaries of any complaints and reports of any investigations conducted by the Department which result in an outcome that is substantiated or inconclusive in the previous twelve months, and
  - 3. A report of any disciplinary action taken against the facility in the previous twelve months.
- 17.11 Requirements for the care of infants or toddlers. Any facility which provides care to one or more infants or toddlers must adhere to the following requirements:
  - A. A caregiver must be assigned to a specific group of infants on a continuing basis.
  - B. Each infant and toddler must be under direct visual observation by a qualified caregiver at all times, except as provided for the napping area.
  - C. Each infant and toddler must be given undivided attention by the same caregiver for at least 30 minutes in the morning and 30 minutes in the afternoon, including periods of feeding and bathing. The caregiver shall, during this time:
    - 1. Hold and talk to the child;
    - 2. Encourage the development of the child's coordination by allowing him to reach for, grasp, creep, crawl, or pull up:
    - 3. Give toddlers the opportunity to develop the large muscles of the body by activities such as climbing and walking; and
    - 4. Encourage the child to interact socially through playing, using language and solving problems using materials and equipment that are appropriate for the age of the child. Infants under six months of age must be provided an additional period of not less than two hours of activity each day out of the crib, for example, in a playpen or other suitable area.

# Regulations for Child Care Facilities

- D. Each licensee of a facility must provide an indoor area which is covered by a soft or nonabrasive material and is protected from traveled walkways and where crawling children can be on the floor for at least a part of the day.
- E. A caregiver may take the infant or toddler assigned to him/her outside or to areas of the facility other than their usual room for a part of each day to provide a change in their physical surrounding and to increase opportunities for social interaction.
- F. When weather permits, each toddler over 12 months of age must be taken outside for a portion of each day. If the weather is extremely hot, the toddler must be kept in a shaded area while outdoors.
- G. An infant who is awake must not be left in a crib for long periods without direct adult care and never for more than 15 minutes at a time.
- H. The staff of each facility shall:
  - Provide appropriate and adequate seating for the children at the facility during snacks and meals;
  - 2. If a high chair is used, ensure that the chair:
    - a. Is in good condition;
    - b. Has a wide base; and
    - c. Has a safety belt for the child and that it is used while a child is in the chair.
  - 3. Wash with a detergent and disinfect after each use any chair or table that is used during a snack or meal:
  - 4. Allow, encourage and assist each child to feed himself, including, without limitation, encouraging a child to hold and drink from a cup, use a spoon and use his fingers to feed himself;
  - 5. Offer each child drinking water at times other than during his regular feedings;
  - 6. Transfer commercially prepared baby food from a jar to a dish before feeding it to a child or if fed directly from the baby food jar discard the jar after use;
  - 7. Discard any food that is left in a dish after a meal;
  - 8. Ensure that bottles and containers of food are not kept in water longer than five minutes, and stir, shake and test a bottle or container of food before using the bottle or container to feed an infant;

# Regulations for Child Care Facilities

- 9. Not hold an infant while preparing food;
- 10. On a daily basis, empty, clean and sanitize any pot used to warm a bottle or food;
- 11. Store each bottle of formula and container of food in accordance with the instructions from the manufacturer of the formula or food:
- 12. Label each bottle of formula and container of food with the name of the child to whom it belongs and the date the formula or food was prepared by the facility or was prepared or purchased by the parent;
- 13. Immediately refrigerate and label each container of breast milk provided by a parent;
- 14. Return each prepared bottle to the appropriate parent each day;
- 15. Return any unused, open container of food to the appropriate parent each day if the child was not fed directly from the container of food; and
- 16. Develop with the parents of a child a plan for feeding the child, which must include, without limitation:
  - a. Instructions for feeding;
  - b. Any special dietary restrictions, including, without limitation, any allergies to food;
  - c. A schedule of times for feeding;
  - d. Whether the child will be fed breast milk, formula or solid food;
  - e. If the child will be fed breast milk or formula, when to begin feeding solid food; and
  - f. Likes and dislikes of certain foods.
- 17. Support breastfeeding mothers by offering a designated place in the facility for the mother to breastfeed her infant; and
- 18. Discard any expressed breast milk if it presents a threat to a baby under the following conditions:
  - a. If the breast milk is stored in an unsanitary bottle;
  - b. If the breast milk has been unrefrigerated for one hour or more; and

# Regulations for Child Care Facilities

- c. If the breast milk has been fed over a period of time that exceeds one hour from the beginning of the feeding.
- A child who is fed with a bottle and does not hold his own bottle must be held by a
  caretaker while being fed with a bottle. The bottle must not be propped for feeding. A
  child who demonstrates a preference for holding a bottle during feeding may hold his
  own bottle and need not be held by a caretaker if the caretaker is directly observing
  the child.
- J. The staff of a facility may feed a child commercially prepared baby food directly from the jar in which it was packaged or from a separate dish. If the staff feeds the child from the jar, the staff shall discard the jar after it is used.
- K. The staff of a nursery for infants and toddlers shall separate the infants from the toddlers while the toddlers are engaging in physical activities.
- L. There must be a resilient surface under equipment that is used for playing and climbing at a nursery for infants and toddlers. Such equipment must be appropriate for the age of the children using the equipment.
- M. The staff of a nursery for infants and toddlers shall promote the healthy development of toddlers by:
  - 1. Expressing feelings with words;
  - 2. Giving directions that are worded in a positive manner;
  - 3. Modeling desirable behavior; and
  - 4. Redirecting behavior.
- N. The staff of a nursery for infants and toddlers shall not discipline or punish an infant or toddler by confining him to a crib, playpen or other such piece of furniture or equipment.
- O. <u>Record keeping</u>. The staff of a nursery for infants and toddlers shall prepare a daily report for each child 0 to 24 months of age for whom it provides care. The report must be posted in a conspicuous place in each room used to care for the infants and must include, without limitation, information concerning the feeding, diapering, and sleeping of each infant. Records shall specify time, date and amount of food given.
- P. Naps must be provided according to the needs of the infants and toddlers. There must be direct supervision of the children while they nap.

# Regulations for Child Care Facilities

- Q. <u>Consultant</u>. Infant nurseries shall arrange to have a currently licensed Nevada nurse (RN or LPN) with experience in infant care available to consult regarding the general care of children. It is suggested that the public health nurses be consulted to satisfy this requirement.
- 17.12 Responsibility for children. The facility shall assume responsibility for a child between the place where he is called for and the facility and from the time he leaves the facility until he is delivered to his parents, legal guardian, or other person designated by his parents or legal guardian.
- 17.13 Arrangements for transportation of school-age children shall be by agreement between the facility and the child's parents, i.e., whether the child is to walk, ride his bicycle, or travel in a car. The facility shall exercise reasonable caution to see the child arrives at the facility from school when expected and to follow-up on his whereabouts if he should be late.
- 17.14 Procedures for overtime/abandoned children except in child care institutions.
  - A. If the parents do not pick up the child at the expiration of the 14-hour period, the facility shall take immediate steps to locate the parents.
  - B. The following procedures shall be followed by the facility when a child has been left at the facility in excess of 14 hours within any 24-hour period or appears to be abandoned:
    - If the facility is unable to contact the parents or other person designated by the
      parents, the facility shall notify the Department's Child Protective Services
      Division. The Child Protective Services Supervisor shall consult with the
      facility director to determine appropriate action on an individual case basis.
      After regular business hours, the facility director shall notify law enforcement
      authorities who in turn will contact Department staff.
    - On the first day of each month the facility director shall report to the Department all incidents of children who have been left at the facility in excess of the 14 hour maximum allowable time.
- 17.15 <u>Lack of valid work permit</u>. No person who lacks a valid work permit may be permitted in the presence of any child unless the holder of a valid work permit is also present and situated in a position where view of the child is unobstructed.
- 17.16 Reporting complaints or arrests. The licensee or director of a facility shall report in writing within ten days all arrests or complaints filed in criminal, civil or juvenile court involving the child care facility, licensee, or members of the household. The licensee or facility director shall report all such known complaints or arrests filed against facility staff which affect the child care operation. Failure to do so shall be a violation of these Regulations.

# Regulations for Child Care Facilities

- 17.17 Operation and maintenance of facility. The operation and maintenance of a child care facility shall promote the health, safety, and welfare of the children who are to be served in the facility by:
  - A. Assuring safe and adequate physical surroundings;
  - B. Assuring supervision and care of the children by capable, qualified personnel of sufficient number;
  - C. Assuring an adequate program of activities and services to enhance the development of each child.
- 17.18 Release of children. The facility shall release a child only to the child's legal custodian(s) or to a person designated by the child's legal custodians.
- 17.19 Record Retention. Any records required to be kept on the care of or service to a child will be kept on site for 90 days unless specified otherwise.
- 17.20 <u>List of Excludable Diseases</u>. Upon registration of a child, the child care facility shall give to the parent(s) or guardian a written list of excludable diseases and conditions described in subsection 26.15.
- 17.21 Notification to the Child Care Facility when a Child has an Excludable Disease. Upon registration of a child, the child care facility shall give written notification to the parent(s) or guardian that states the parent(s) or guardian must inform the childcare facility of their child's illness when the illness is one described in subsection 26.15. The notification to the childcare facility must occur within 24 hours of the parent(s) or guardian becoming aware of the illness.

# **Regulations for Child Care Facilities**

**Program Standards** 

#### SECTION 19 PROGRAM STANDARDS

- 19.1 <u>Program requirements</u>. Every program of a facility must meet the basic needs of children for:
  - A. Good health and normal physical development;
  - B. Optimal mental growth;
  - C. Stimulating language and communicative experiences;
  - D. The attention, acceptance, and affection of others;
  - E. Opportunities to experience success and to test mental, physical, and social skills;
  - F. Self-identity and a sense of competence and worth;
  - G. The security provided by gentle discipline;
  - H. Relations with others which set forth the rights of adults and the rights of children;
  - I. Learning experiences planned with the aid of the child's parents which insure harmony with the life style and cultural background of the child;
  - J. Activities which facilitate social growth and adjustment; and
  - K. The time and opportunity to learn independence and personal care.
- 19.2 <u>Early care and education program</u>. Each facility, including, without limitation, a family home child care and a group home child care, shall have an early care and education program.
  - A. Each facility shall develop a written plan of curriculum for the children enrolled in the facility. The plan must:
    - 1. Be made available for parental review;
    - 2. Be prepared before the early care and education program becomes effective;
    - 3. Be kept on file at the facility for at least one year;
    - 4. Include a program of speaking and listening to English;
    - 5. Integrate age appropriate key areas of instruction, including, without limitation, literacy, mathematics, science, social studies, creative expression and the arts, and health and safety;

### Regulations for Child Care Facilities

Program Standards

- 6. Incorporate instruction, concepts and activities that foster the social, emotional, physical, linguistic and cognitive development of children; and
- 7. Provide for the involvement of parents in learning activities at the facility and at home.
- B. Each facility shall develop a written assessment plan which is designed to, without limitation:
  - 1. Identify the interests and needs of each child enrolled in the facility;
  - 2. Describe the developmental and educational progress of each child enrolled in the facility who is not attending public or private elementary school;
  - Identify the need for and referral of a child enrolled in the facility for developmental screening and the referral of the child for diagnostic assessment, if appropriate;
  - 4. Describe the methodology for developing curriculum for the children enrolled in the facility;
  - 5. Adapt teaching practices and the environment to the children enrolled in the facility;
  - 6. Facilitate the early care and education program; and
  - 7. Promote communication with the family of a child enrolled in the facility.
- C. In addition to the written assessment plan developed, each facility shall, within three months after a child enrolls in the facility, asses the child by use of, without limitation, portfolios, observations, checklists, rating scales, and screening tools. Such an assessment must be repeated biannually thereafter to monitor and support the learning and development of each child enrolled in the facility.
- D. Each facility shall provide materials and equipment to carry out the written plan of curriculum developed that:
  - 1. Reflect the lives of the children and the families of the children enrolled in the facility;
  - Reflect the diversity of the children in our society with regard to the gender, age, native language, ethnicity, culture and abilities of the children enrolled in the facility;

#### **Regulations for Child Care Facilities**

**Program Standards** 

- 3. Provide for the safety of the children enrolled in the facility while being appropriately challenging for the children;
- 4. Encourage the children enrolled in the facility to explore, experiment, and discover new information and ideas:
- 5. Are organized in a manner which facilitates independent use of the materials and equipment by the children enrolled in the facility;
- 6. Are rotated to reflect changes in the curriculum and to accommodate the different interests and skill levels of the children enrolled in the facility;
- 7. Allow for a variety of uses; and
- 8. Accommodate the special needs of the children enrolled in the facility.

#### 19.3 Personal hygiene.

- A. The child care facility shall implement a hand washing training program for caregivers, other staff members, volunteers and children who are developmentally able to learn personal hygiene. This training program shall teach the following hand washing procedures.
  - 1. Wet hands with warm running water and apply soap.
  - 2. Rub hands together with soap vigorously for 20 seconds.
  - 3. Rinse hands well under warm running water.
  - 4. Dry hands using a single-use paper towel or air dryer.
- B. The caregivers shall monitor and assist children who are developmentally able to wash their hands to ensure the children follow the above hand washing procedures.
- C. Caregivers shall wash the hands of infants, who are unable to wash their own hands and who are too heavy to hold safely at the hand washing sink, as follows:
  - 1. Thoroughly wipe the child's hands with a disposable wipe; or
  - Thoroughly wipe the child's hands with a damp single-use towel, moistened with liquid soap. Then wipe the child's hands with a damp single-use towel until the child's hand is free of soap. Then use a dry paper towel to dry the child's hands.
- D. The child care facility shall be responsible to monitor the caregivers, other staff members, and volunteers hand washing practices to ensure that proper hand washing procedures are being practiced.

# Regulations for Child Care Facilities

**Program Standards** 

- E. Caregivers, other staff members and volunteers shall wash their hands under any of the following conditions:
  - 1. Any time their hands come into contact with blood, mucus, vomit, feces or urine;
  - 2. Before preparing or handling food;
  - 3. Before engaging in any activity related to serving food, including, without limitation, setting the table;
  - 4. Before and after eating a meal or snack;
  - After using the toilet, helping a child use the toilet, changing a diaper with or without gloves or assisting a child with hand washing;
  - 6. After attending to an ill child;
  - 7. After handling an animal;
  - 8. After handling garbage or cleaning a container used to store garbage;
  - 9. After cleaning contaminated or soiled surfaces;
  - 10. Before and after giving medication; and
  - 11. Any time hands become visibly soiled.
- F. Children being cared for in the child care facility shall wash their hands under any of the following conditions:
  - 1. Any time that their hands come into contact with blood, mucus, vomit, feces or urine or garbage;
  - 2. Before handling food;
  - 3. Before and after eating a meal or snack;
  - 4. After outdoor play;
  - 5. After handling an animal;
  - 6. After the diaper or underwear of the child is changed;
  - 7. After playing in water;

# Regulations for Child Care Facilities

**Program Standards** 

- 8. After playing in a sandbox; and
- 9. Any time hands become visibly soiled.
- G. Hand sanitizers shall not be used as a replacement for thorough hand washing under warm running water.
- H. The use of free standing water for hand washing is prohibited.

#### 19.4 Outdoor playground requirements

- A. The play area of each facility must:
  - Be fenced or enclosed in a manner that prevents the unsupervised departure of children from the area. The enclosure shall be:
    - a. No less than 48 inches in height.
    - b. Gaps between the vertical fence components or the empty spaces under the fence shall not exceed 4 inches.
    - c. Gates shall be at a minimum 48 inches in height, self-closing and self-latching.
    - d. Designed so that the outdoor play area is visible to the caregiver.
  - Have an adequate drainage system;
  - 3. Be free of hazards, debris, and trash;
  - 4. Provide a shade area, or shade areas, during the months of April through September that is at least equal in size to the product of five square feet multiplied by the total number of children using the area;
  - 5. Have appropriate, as determined by the Department, depths and perimeter of resilient surfacing underneath and surrounding any elevated play equipment;
  - 6. Have adequate safety barriers around any elevated platforms;
  - Not have any dangerous or poisonous plants or other vegetative matter located within the boundaries of the play area or in an area that is accessible to children from the play area; and
  - 8. Not be in a location where any bodies of water are accessible to children.

# **Regulations for Child Care Facilities**

**Program Standards** 

- B. The playground equipment shall be maintained in a safe condition (refer to Addendum IX for standards on playground safety) and be:
  - 1. In good repair;
  - 2. Designed and constructed to minimize injury;
  - 3. Compatible with the age of the children in the facility;
  - 4. Spaced to reduce accidents; and
  - 5. Securely anchored.
- C. Playground staffing and supervision.
  - 1. Playgrounds shall be adequately supervised for the safety of the children. In all child care facilities, except in group homes where six or fewer children are in care or in family care homes, the minimum number of playground supervisors shall be one for each 20 or less children unless other factors (such as layout of the playground, the physical or developmental needs of the children, or the playground activity) require the presence of more supervision. If two-year-olds are present on the playground, the one-to-ten ratio of caregivers to children must be maintained. In no case shall a child be permitted out of view of the playground supervisor or other approved caregiver.
  - 2. At infant-toddler nurseries, the required ratio of caregivers to children must be maintained on the playground.
  - 3. To be in compliance with the staff-to-child ratio required in Section 24.4.C. all the remaining caregivers, not on duty on the playground, must remain on site.
- D. <u>Outdoor play</u>. If the weather permits, all children must have a daily period of outdoor play. A facility shall provide opportunities for periods of structured and unstructured active play which builds muscles, such as climbing, jumping, running, and playing with toys which have wheels. The quantity and quality of materials and equipment must be sufficient to avoid excessive competition between the children and long waiting periods to use the materials or equipment. If severe weather prohibits outdoor play, children must be offered a period of indoor physical activity.
- 19.5 Nap/rest period. The facility shall provide a cot, mat, or bed for each child. Every child under six years of age who is in the facility for more than five hours per day must have a period for a nap during the day. A child who cannot sleep must rest during the period provided for a nap. The rest period may include any activity not requiring use of large motor skills, i.e. books, puzzles, coloring. Napping children must be supervised and caregivers must remain awake and with the children.

# **Regulations for Child Care Facilities**

**Program Standards** 

- 19.6 <u>Play materials/equipment</u>. The amount, variety and arrangement and use of materials and equipment used in a facility must be appropriate to the developmental needs of the children cared for in a facility and:
  - A. Play equipment must be of sturdy, safe construction in good repair;
  - B. The facility shall provide a variety of games, toys, books, crafts, and other activity materials;
  - C. The facility shall provide sufficient quantity of appropriate equipment and materials necessary to conduct individual and group programming for the children in care;
  - D. The facility shall store materials in a manner that allows children to select, remove, and replace the materials independently or with minimal assistance;
  - E. Equipment and any material other than a toy that is used for play in a facility must be durable and free from characteristics that may be hazardous or injurious to a child who is less than two years of age, including, without limitation, such characteristics as sharp or rough edges, toxic paint or objects that are small enough for a child of that age to swallow and choke on;
  - F. Any object, or component of a toy that is accessible by a child who is less than three years of age at a facility must meet the federal size requirements set forth in the Code of Federal Regulations, Title 16, Part 1501;
  - G. Toys with sharp points or edges, plastic bags and objects made from Styrofoam must not be accessible to a child who is less than three years of age;
  - H. A toy or any other piece of equipment that is used for play must be made of a material that is capable of being sanitized;
  - The staff of a facility shall not provide a stuffed animal to any child unless the stuffed animal is laundered or disinfected not less than one time each day or more often if necessary;
  - \*J. Toys placed in a crib at a facility must be appropriate for the age of the child using the crib. The staff of a facility shall adhere to any requirement set forth on the label of a toy regarding the safe use of the toy
    - Washoe County chose to delete previous language as recommended by Regina Washington, Community Programs Coordinator with REMSA who is considered to be a local expert on SAFE SLEEP. New language makes it very clear that toys are prohibited in any crib.
  - K. Each room at a facility that is used for play and other activities for children must have:

### **Regulations for Child Care Facilities**

Program Standards

- 1. Low, open shelves to store toys;
- 2. An adequate supply of toys that are in good condition and appropriate for the age of the children;
- 3. Tables and chairs that are the appropriate size for the children; and
- 4. Any other equipment that is necessary to meet the needs of the children.

Refer to Addendum III for Code of Federal Regulations, Title 16, Part 1501 and Addendum IV for Suggested List of Materials.

- L. Any toy that is broken or has a missing part must be repaired or replaced before the toy may be used in the facility; and
- M. Walkers for children that are designed to be moved across the floor must not be used in a facility.
- 19.7 <u>Furniture</u>. Furniture must be durable, safe, and intended for use by children or appropriately adapted for use by children. Low chairs and tables or infant seats with trays are recommended for table play and meal time for children no longer being held for feeding. High chairs, if used, shall have a wide base and safety straps.
- 19.8 <u>Clothing storage</u>. A facility shall provide space for the storage of the children's clothing which is within easy reach of the children.
- 19.9 Environment: infants/special needs. A facility that serves children under three years of age or children with disabilities must provide an environment which protects the children from physical harm but is not so restrictive as to inhibit physical, intellectual, emotional, and social development.

Regulations for Child Care Facilities

**Qualifications and Requirements of Director** 

### SECTION 21 QUALIFICATIONS AND REQUIREMENTS OF DIRECTOR

### 21.1 Director qualifications

- A. Child care center. Every child care center that is licensed must have a director who is:
  - 1. At least 21 years of age and who has:
    - \*a. An associate's degree or higher degree in early childhood education and have at least 1,000 hours (6 months) of verifiable experience in a child care facility;
    - \*b. An associate's degree or higher degree in a related field and have completed at least 15 semester hours in early childhood education or related courses and have at least 2,000 hours (12 months) of verifiable experience in a child care facility;
    - \*c. A high school diploma or equivalent, or, if approved by the Administrator of the Division of Public and Behavioral Health, a general education development certificate, have completed at least 15 semester hours in early childhood education or related courses and have at least 3,000 hours (18 months) of verifiable experience in a child care facility;
    - \*d. A current "Child Development Associate" credential with an endorsement for the age of children working with, issued by the Council for Professional Recognition, or its successor organization, and have at least 2,000 hours (12 months) of verifiable experience in a child care facility; or
    - \*e. Have a combination of education and experience which in the judgment of the Department Director, is equivalent to the above.
  - \*2. Those directors that were qualified using previous approved regulations must comply with the current requirements by January 1, 2016, and no waiver will be accepted by the Department.
  - 1. A bachelor's or associate's degree and have completed at least 12 semester hours of education, of which:
    - At least six-semester hours are in child-development; and
    - -b. At least six semester hours are in child development, child psychology, education related to the health of children, or in courses directly related to these fields, of which not more than three semester hours may be in courses concerning the business of child care, and have at least six months verifiable experience which is satisfactory to the Department in a program related to child education, early childhood development, or child care; or

# Regulations for Child Care Facilities **Qualifications and Requirements of Director** A high school diploma, a general educational development certificate, if approved by the Department, and at least 12 semester hours of education, of which: At least six semester hours are in child development: and b. At least six semester hours are in child development, child psychology. education related to the health of children, or in courses directly related to these fields, of which not more than three semester hours may be in courses concerning the business of child care and at least two years of verifiable. satisfactory experience in a program related to child education, early childhood development, or child care; or A current credential as a Child Development Associate issued by the Council for Early Childhood Professional Recognition of the National Association for the Education of Young Children, Washington, D.C. 20005; or A certificate for Child Care Center Director from a program approved by the Department and at least one year of verifiable satisfactory work experience in a program related to child education, early childhood development, or child care; or A combination of education and experience which, in the judgment of the Department Director, is equivalent to subsections 1, 2, 3, or 4, These changes to Director Qualifications were made to align the Washoe County Regulations for Childcare with the regulation changes made by Assembly Bill 109, signed by the Governor 5/28/13, and codified by the State on 6/23/14. Infant-toddler nursery. Every infant-toddler nursery that is licensed must have a

- director who is at least 21 years of age and must:
  - Have completed the training required to become a professional nurse; or
  - Have completed the training required to become a licensed nurse, and have at least six months of verifiable experience which is satisfactory to the Department in a program related to the care of children under three years of age; or
  - 3. Hold a current credential as a "Child Development Associate for Infants and Toddlers" issued by the Council for Early Childhood Professional Recognition of the National Association for the Education of Young Children, Washington, D.C. 20005; or
  - 4. Have a high school diploma or, if approved by the Department, its equivalent, and have completed at least 12 semester hours of education, of which:
    - a. At least six semester hours are in infant and toddler development; and

### Regulations for Child Care Facilities

**Qualifications and Requirements of Director** 

- b. At least six semester hours are in child development, education related to the health of children or courses directly related to these fields, and at least two years of verifiable experience which is satisfactory to the Department in a program related to the care of children under three years of age; or
- 5. Have a combination of education and experience which, in the judgment of the Department Director, is equivalent to one of the requirements described in paragraphs 1 to 4, inclusive.
- C. <u>Special needs facility</u>. Every special needs facility that is licensed must have a director who is at least 21 years of age and has:
  - 1. A bachelor's or associate's degree with at least 12 semester hours of education of which three semester hours are in child development, six semester hours are in the education of children with special needs and three semester hours are in child psychology, education related to the health of children, the education of children with special needs, or courses directly related to these fields and six months of verifiable experience, satisfactory to the Department, in a program related to the education of children, early childhood development, child care or the education of children with special needs; or
  - 2. A high school diploma, a general educational development certificate, if approved by the Department and have completed at least 12 semester hours of education of which three semester hours are in child development, six semester hours are in the education of children with special needs and three semester hours are in child development, child psychology, education related to the health of children, the education of children with special needs or courses directly related to these fields and three years of verifiable experience, satisfactory to the Department, in a program related to child education, early childhood development, child care or the education of children with special needs; or
  - 3. A combination of education and experience which, in the judgment of the Department Director, is equivalent to the requirements of subsections 1 and 2.

### D. <u>Care of ill children facility</u>

- 1. The director must be:
  - a. A physician as defined in NRS 630.014;
  - b. A physician's assistant as defined in NRS 630.015;
  - c. An advanced practitioner of nursing, as defined in NRS 632.012, who has a specialty in pediatrics:
  - d. A registered nurse as defined in NRS 632.019; or

### Regulations for Child Care Facilities

Qualifications and Requirements of Director

- e. A licensed practical nurse, as defined in NRS 632.016, who has two years of experience in pediatric nursing.
- 2. The director shall complete a total of 60 hours of initial training in:
  - a. The control of communicable diseases; and
  - b. The recognition of symptoms and the care of childhood illnesses.
- 3. The director must be at least 21 years of age.

### 21.2 <u>Director requirements</u>. A director of a child care facility must:

- A. Provide a program for child care for the facility which meets the requirements of these Regulations;
- B. Maintain adequate enrollment, attendance, medical and all other records:
- C. Maintain organized separate personnel records for each staff, including volunteers, substitutes, and part-time employees, which must include:
  - A completed application for employment which lists the name, date of birth, place of birth, address, telephone number, Social Security number, education, training, work experience, three personal references, and person to notify in case of emergency; and
  - 2. Proof of results of current TB test.
  - 3. A copy of current work permit card.
  - 4. A copy of the Prevention and Control of Communicable Disease in the Child Care Setting certificate.
  - 5. Verification of current certification for the administration of cardiopulmonary resuscitation.
  - 6. A copy of each evaluation of his work performance.
  - 7. A copy of his registration as an alien, if applicable.
  - A copy of training certificates as required per Section 22 of these Regulations.
  - 9. Verification the employee received the orientation and basic training required per Section 23.1 of these Regulations.

### **Regulations for Child Care Facilities**

**Qualifications and Requirements of Director** 

- D. Notify the Department of new employees or volunteers prior to their commencing employment;
- E. Provide space for an office, the storage of records, conferences with parents, meetings of the staff, and all other needs of the child care program;
- F. Maintain responsibility for screening, scheduling, and supervising the staff of the facility, and for all conduct of any member of the staff of the facility;
- G. Ensure that each member of the staff of the facility who is not a caregiver, but whose job duties may directly impact children cared for in the facility, has the training necessary to protect the health and safety of the children and the health and safety of the other members of the staff, including, without limitation, training concerning proper nutrition, methods of sanitation and procedures for maintaining a safe environment in the facility;
- H. Work with parents and include them, whenever possible, in the programming and functioning of activities;
- I. Assure that the required staff-to-child ratio be maintained;
- J. Inform parents and other interested parties in writing about the goals, policies, and content of child care programs in the facility;
- K. Maintain a daily sign-in sheet that includes:
  - 1. The first and last names of staff and children;
  - 2. The times of arrival and departure for staff and children; and
  - 3. Sign-in sheets to be kept on file a minimum of two years and made available to the Department upon request.
- L. Cooperate with the Department and other agencies of government to improve the quality of child care and the competence of caregivers; and
- M. Be present in the facility 25 hours per week during its hours of peak operation. Peak hours are those when the maximum number of children are customarily present in the facility. In an infant toddler nursery which is a distinct part of a child care facility, the director or one caregiver who meets the qualifications of a director for the infant and toddler nursery, must spend at least one half of his time in the infant and toddler part of the facility.
- N. If the facility is in operation 25 hours or less per week, the director shall be present in the facility during at least half the hours of operation.

# Regulations for Child Care Facilities

Qualifications and Requirements of Director

O. Designate a member of the staff who is responsible for the operation of the facility when the director is not present at the facility.

Regulations for Child Care Facilities

**Qualifications and Requirements of Caregivers** 

### SECTION 22 QUALIFICATIONS AND REQUIREMENTS OF CAREGIVERS

22.1 <u>Specific caregivers</u>. The following sections apply to all caregivers, including family child care and group child care home licensees.

### 22.2 <u>Caregiver qualifications</u>

- A. Every caregiver must be:
  - 1. At least 16 years of age;
  - 2. Able to communicate adequately to summon emergency assistance and respond to or initiate contact with parents and licensing authority; and
  - Mentally and physically healthy and qualified to carry out a program which places emphasis on the development of children.
- B. A staff member under 18 years of age may not be used to supervise other staff.
- C. Licensees, including family child care and group child care home operators, must be at least 18 years of age.
- D. Any caregiver who is under 18 years of age must:
  - 1. Have completed a course in the development of children; or
  - 2. Be currently enrolled in and complete a course in the development of children while employed in a facility.

The course must be approved by The Nevada Registry or its successor organization, or any other agency designated by the Department to approve such courses. If The Nevada Registry or its successor organization has not approved the course, and the Department has not designated another agency to approve such courses, the Department may decide whether a course in the development of children is adequate to meet these requirements.

- E. Although subsection 22.2.A allows caregivers to be under the age of 18 in certain circumstances, a child care facility may not be operated unless a person who is 18 years of age or older is on the premises of the facility.
- F. No more than 50 percent of the caregivers in a child care facility may be under 18 years of age.
- G. Whenever a facility is in operation, at least one caregiver on duty must have current CPR certification. All caregivers of a facility must obtain certification in the

### Regulations for Child Care Facilities

Qualifications and Requirements of Caregivers

administration of cardiopulmonary resuscitation (CPR) within 90 days of commencing employment and provide documentation that such certification is current.

- The certification must be in the administering of CPR to children and to infants if
  the facility is licensed to care for children under the age of two years, and to
  adults if necessary to ensure that the person is certified to administer CPR to
  children of all ages for which the facility is licensed to care for.
- The course must be taught by a certified instructor who meets the standard of a
  nationally or internationally recognized provider of training in CPR, including,
  without limitation, the American Heart Association, the American Red Cross,
  MEDIC FIRST AID International, EMS Safety Services, or the American Safety
  and Health Institute.
- H. Caregivers must complete a program for the administration of first aid. The program must be provided by a licensed health care professional or a representative of a licensed health care agency or clinic, a community college, a university, the American Red Cross, the American Heart Association, an adult education program in home nursing, or an institution approved by The Nevada Registry or its successor organization. The training must include health information for children and responses to illness and emergencies, including the administration of first aid to victims of fire, serious injury, or the ingestion of poison.
- Upon request a facility must present to the Department evidence that any caregiver on duty has complied with training requirements.
- J. Each caregiver and staff member working directly with children, except as exempt in Section 31.7, shall complete and comply with a course in the recognition of the signs and symptoms of illness in children and the prevention of exposure to bloodborne pathogens as required in subsection 6.5 of these regulations as follows:
  - Prevention and Control of Communicable Diseases in the Child Care Setting as taught or approved by the Washoe County District Health Department. Certification must be completed within 90 days after the first day of employment in any licensed child care facility. This course must be completed at least once every 36 months. A copy of the most recent certificate shall be maintained at the facility.
  - 2. Whenever a facility is in operation, at least one caregiver on duty must have completed a course in Prevention and Control of Communicable Diseases in the Child Care Setting.
- K. Within 90 days after the caregiver commences employment in the facility, the caregiver must apply with The Nevada Registry or its successor organization, and annually renew his registration before the date on which it expires.

### Regulations for Child Care Facilities

**Qualifications and Requirements of Caregivers** 

- 22.3 <u>Caregiver requirements</u>. Caregivers must be able to:
  - A. Work with children without recourse to physical punishment or psychological abuse:
  - B. Communicate with children and their parents;
  - C. Praise and encourage children and provide them with a variety of learning and social experiences;
  - D. Recognize and eliminate hazards to the safety of children; and
  - E. Summon help in the event of an emergency.
- 22.4 <u>Tuberculosis test/immunizations</u>. Each caregiver and staff member shall comply with health verification requirements in subsection 6.2 of these Regulations as follows:
  - A. Written certification of negative results of a tuberculosis test taken within 12 months immediately preceding the first day of employment at the facility. Thereafter, every two years, a skin test or chest x-ray for tuberculosis is required. If a positive skin test is found, a chest x-ray is required.
  - B. Requirements in subsection A above will apply to any person residing in a family child care or group child care home. Children under the age of 18 living in the home must have a current record of immunization from the Washoe County District Health Department or authorized physician.
- 22.5 Health problems, exclusion of caregivers, other staff members, and volunteers
  - A. Each caregiver, other staff member, or volunteer who has an identified health problem that may affect his/her ability to provide adequate care to children in a facility shall:
    - Report the problem to the director of the facility or, if self-employed, to the Department; and
    - 2. Submit to the director of the facility or, if self-employed, to the Department, a written statement from a licensed physician attesting to the fact that the health of the caregiver does not endanger the children who are under his/her care in the facility.
  - B. Each director shall report to the Department any health problems reported to him/her pursuant to subsection 22.5.A.1. See also subsection 26.2 on the duty of the child care facility to report reportable diseases and conditions to the Department and Health Authority.
  - C. In the event of question regarding the physical or mental health of any child care personnel or facility resident, the Department or licensee may require him/her at any

### Regulations for Child Care Facilities

Qualifications and Requirements of Caregivers

time to undergo further medical/psychiatric examination. If, as the result of further examination, there is indication of a physical, emotional, or mental condition which could be hazardous to a child, other staff, or self, and which would prevent satisfactory performance, the employee/caregiver shall not be assigned or returned to a position until the condition is cleared to the satisfaction of the examining physician.

- D. The child care facility shall follow the Health Authority's directions on exclusion of the ill caregiver, other staff member, or volunteer with a reportable disease or condition. A caregiver, other staff member or volunteer who is excluded as a result of a reportable disease or condition shall not be allowed to return to the child care facility until permission to do so is given to the child care facility by the Health Authority. The following reportable diseases may require exclusion from child care per the direction of the Health Authority:
  - Amebiasis
  - Campylobacteriosis
  - Cholera
  - Cryptosporidiosis
  - E. coli 0157:H7
  - Giardiasis
  - Haemophilus influenzae type b invasive disease
  - Hepatitis A
  - Measles (rubeola)
  - Meninaitis
  - Meningococcal disease
  - Mumps
  - Pertussis
  - Pneumonic Plaque
  - Poliomyelitis
  - Rubella
  - Salmonellosis
  - Shigellosis
  - Tuberculosis
  - Typhoid fever
  - Yersiniosis
- E. The child care facility shall exclude volunteers, caregivers, and other staff members, who either have contact with the children or contact with anything with which children came into contact with, and who have the following:
  - 1. Respiratory illness, including uncontrolled coughing, difficulty breathing, or wheezing, until diagnosed not to be contagious;
  - Rash with fever or joint pain, until diagnosed not to be measles or rubella;

### Regulations for Child Care Facilities

**Qualifications and Requirements of Caregivers** 

- Multiple bouts of diarrhea, defined as 3 or more watery stools during the previous 24-hour period or one bout of bloody diarrhea, until either no diarrhea occurs for 24 hours or until diagnosed not to be contagious;
- 4. Vomiting illness (two or more episodes of vomiting in the previous 24 hours), until either no vomiting occurs for 24 hours or until determined by a treating health care provider not to be contagious;
- 5. Shingles, only if the blisters cannot be covered by clothing or a bandage until the blisters have crusted;
- 6. Skin infection, until 24 hours after treatment has been initiated:
- 7. Strep throat or other streptococcal infection, until 24 hours after initial antibiotic treatment and 24 hours after cessation of fever:
- 8. Head lice, from the end of the day of discovery, until after the first treatment;
- 9. Scabies, until after treatment has been completed;
- Purulent conjunctivitis (defined as pink or red conjunctiva with white or yellow eye discharge, often with matted eyelids after sleep, and including eye pain or redness of the eyelids or skin surrounding the eye), until 24 hours after treatment has been initiated;
- 11. Chickenpox (Varicella-Zoster) until all sores have dried and crusted (usually 6 days); or
- Ringworm of the scalp or body until 24 hours after treatment has been started.
- F. Caregivers or other staff members who have herpetic gingivostomatitis, cold sores or herpes labialis shall not be excluded from the child care facility, but shall:
  - 1. Cover lesions with a bandage, clothing or other appropriate dressing;
  - 2. Avoid hugging, kissing or other close contact with children;
  - 3. Avoid sharing food or drink with children or other caregivers or members of the staff of the facility;
  - 4. Avoid touching lesions; and
  - 5. Wash hands frequently and upon accidentally touching a lesion or upon touching or changing a dressing.

### Regulations for Child Care Facilities

Qualifications and Requirements of Caregivers

- G. The Health Authority may make a final determination on exclusion when a conflict exists between the treating health care provider and the exclusionary guidelines referenced in subsection 22.5 E.
- Alternate caregivers. Alternate or substitute caregivers can be used in a facility when a caregiver's absence is either planned or unplanned. The alternate caregiver is considered a member of the staff of the facility for 12 months from the last date in which they worked as an alternate caregiver. The alternate caregiver must meet all of the conditions of this section and sections 6.7.B and 23 of these Regulations. Please refer to section 31.7 regarding alternate caregivers in a family home child care.
- 22.7 <u>Volunteers</u>. For the purpose of these Regulations, a volunteer is a person at least 16 years of age working in a facility in an unpaid position.
  - \*A. A volunteer who is working directly with children and who is counted in the staff to child ratio or who is working at least 15 hours a week at the facility, will be counted as a member of the staff for the purposes of these Regulations and must meet all caregiver requirements.

Washoe County removed language to align the Washoe County Regulations for Childcare with the regulation changes made by Assembly Bill 93, signed by the Governor 5/24/13, and codified by the State on 6/23/14.

B. A volunteer for a child care facility, regardless of his age, may not provide direct care to a child at the facility unless the care is provided under the supervision of an employee at the facility who is 18 years of age or older.

### **Regulations for Child Care Facilities**

Training

### **SECTION 23 TRAINING**

- Orientation. Within the first two weeks after commencing employment, newly employed members of the staff of a facility must be given a written and oral orientation program and be trained by the facility director, or a designee trained by the director, in the policies, procedures, and programs of the facility, including the requirements set forth in these Regulations. Training received as part of the orientation may not be applied towards the initial course of training or additional training as required in this section. The orientation must address, at a minimum:
  - A. Any Regulatory requirements that govern the facility;
  - B. The goals and philosophy and the policies and procedures of the facility;
  - C. Any planned programs or activities of the facility;
  - D. The policies and procedures for relating to parents;
  - E. Meal patterns and food-handling policies and procedures;
  - F. Dealing with occupational health hazards for caregivers, including, without limitation, paying attention to the physical health and emotional demands of the job and being aware of any special considerations of a caregiver who is pregnant;
  - G. The emergency health and safety procedures of the facility; and
  - H. The general health and safety policies and procedures of the facility, including, without limitation, policies and procedures concerning:
    - 1. Hand washing techniques and requirements as set forth in section 19 of these Regulations;
    - Techniques for diapering and for assisting in the use of a toilet if care is provided to children in diapers or children needing help with using a toilet as set forth in section 29 of these Regulations;
    - Identifying hazards and methods for preventing injuries;
    - Techniques for preparing, serving and storing food for employees who are involved in any of the activities concerning food for children at the facility;
    - 5. Excluding a child from the facility due to illness, and the manner in which illnesses are transmitted between persons:
    - 6. Methods for preparing formula if formula is prepared at the facility:

### **Regulations for Child Care Facilities**

Training

- Any precautions and other measures that should be taken to prevent exposure to blood and other bodily fluids, and policies and procedures to follow in the event of exposure to blood and bodily fluids; and
- 8. The administration of medication.
- 23.2 <u>Initial courses of training</u>. Every caregiver and each director who is employed in a child care facility, other than in a facility that provides care to ill children, shall complete, within 90 days after commencing his/her employment in any child care facility, an initial course of training which must include:
  - A. A course in Prevention and Control of Communicable Diseases in the Child Care Setting, which meets the requirements of subsection 22.2.J.1; and
  - B. Certification in the administration of cardiopulmonary resuscitation as required pursuant to Section 22.2.G; and
  - C. Two or more hours concerning the administration of first aid; and
  - D. Two or more hours in the recognition and reporting of child abuse and neglect; and
  - E. At least two hours concerning Sudden Infant Death Syndrome, if the person is employed at a facility that cares for children under the age of 12 months; and
  - F. Three or more hours in child development or guidance and discipline specific to the age group served by the facility in which the director serves or in which the person is employed.
  - \*G. The initial courses of training must be obtained if such training has not been completed within the 24 months prior to employment at the facility.

Washoe County chose to maintain this language despite the state choosing to delete this requirement. This provides that caregivers stay up-to-date on their training requirements as well as new and developing trends.

\*23.3 Additional Training. Within 12 months after commencing a position as a director or a caregiver in a child care facility, each person, in addition to completing the above listed training and training in child development as listed in section 22.2.D, shall complete at least 15 hours of training in professional development as required in section 23.4 of these Regulations. Each person who is employed in a child care facility that provides care for more than 12 children, other than in a facility that provides care for ill children, is required to complete additional training hours on the following schedule:

Before January 1, 2014, at least 15 hours of training; On or after January 1, 2014 and before January 1, 2015, at least 18 hours of training; On or after January 1, 2015 and before January 1, 2016, at least 21 hours of training; and

### Regulations for Child Care Facilities

Training

On or after January 1, 2016, 24 hours of training each year.

At least 2 hours of the additional yearly training hours must be devoted to the lifelong wellness, health and safety of children and must include training relating to childhood obesity, nutrition and physical activity.

This change was made to align the Washoe County Regulations for Childcare with the regulation changes made by Assembly Bill 109, signed by the Governor 5/28/13, and codified by the State on 6/23/14.

- A. The training required by this Section must be designed to:
  - 1. Ensure the protection of the health and safety of children; and
  - 2. Promote the physical, moral, and mental well-being of each child enrolled in the facility.
- \*B. The initial courses of training need not be obtained if such training was completed within the 24 months prior to employment at the facility.

This language was deleted from this section and was inserted as 23.2.G.

- \*C.B. If the facility is a Special Needs Facility, training must also be designed to provide information on the characteristics of handicapping conditions and appropriate programs for children with special needs. The training must be established or approved by an agency designated by the Bureau of Services for Child Care or by the Department.
- \*23.4 Continuing training. After completion of the initial courses of training, all caregivers must complete a minimum of 15 clock hours of training in professional development annually. A minimum of six of their the additional training hours 15 clock hours must be in courses directly related to the in developmentally appropriate practices for the care of young children, and not more than three hours may be training in how to perform cardiopulmonary resuscitation.

This change was made to align the Washoe County Regulations for Childcare with the regulation changes made by Assembly Bill 109, signed by the Governor 5/28/13, and codified by the State on 6/23/14.

Approval of training. Training requirements may be satisfied by taking an early childhood and education course offered by a community college or university, seminars, workshops or other forms of training. All qualified training must be approved by The Nevada Registry or its successor organization. If the training is not approved by The Nevada Registry or its successor organization, or any other agency designated by the Director of the Department to approve training, or if the Department has not designated another agency to approve

### **Regulations for Child Care Facilities**

Training

- training, the training must be approved by the Bureau of Child Care Services or by the Department. Training that has not been approved will not be used to satisfy the training requirements herein.
- 23.6 <u>Verification of training</u>. Evidence that an employee has completed the courses must be included in his personnel file at the facility and available for review upon request.
- 23.7 <u>Specialized training</u>. If required by the facility director or owner of the facility, a member of the staff shall participate in any specialized training related to child care which is offered in the community.
- 23.8 <u>Continuing training hours.</u> A director, licensee or caregiver may not receive credit toward the program of training required by this Section for hours of training received concerning the administration of first aid more than once every 36 months.
- \*23.9 <u>Volunteers</u>. For purposes of this Section, a volunteer who works at least 15 hours per week in in a facility and participates in specialized child care training as defined by the facility director, is a member of the staff of the facility.

This change was made to align the Washoe County Regulations for Childcare with the regulation changes made by Assembly Bill 93, signed by the Governor 5/24/13, and codified by the State on 6/23/14.

### Regulations for Child Care Facilities

Before/After-School Care

### SECTION 25 BEFORE/AFTER-SCHOOL CARE

- 25.1 <u>Permission to provide before/after-school care</u>. A facility may provide child care before or after normal school hours to a limited number of children in excess of the number specified on the facility's license if the facility meets the following conditions:
  - A. The facility must provide the Department with written verification from the appropriate local government entity which states that before/after-school care in the facility will not conflict with zoning or other local requirements;
  - B. The facility may not commence such care until it has received written permission from the Department to do so; and
  - C. The facility must post in a conspicuous place the Department's permission for before/after-school care.
- \*25.2 Age of children. Any child accepted for before/after-school care must be attending-first grade, or a grade-higher than first grade a full day educational program.

Washoe County chose to change this regulation in accordance with the State Regulations. By becoming less restrictive, children in Kindergarten will now be able to access before/after school programming.

- 25.3 <u>Time limit</u>. Any facility providing before/after-school care may exceed the number of children stated on the license for a period no longer than three consecutive hours.
- 25.4 <u>Before/after-school capacity</u>. The maximum number of before/after school children who may receive care is limited to:
  - A. In a family child care or group child care home, three children; and
  - B. In a child care center, three children or ten percent of the number stated on the license, whichever number is greater.
  - C. Children who live in the facility and are 11 years of age or less must be included in counting the additional children.
- 25.5 <u>Staff-to-child ratio</u>. A child care center which accepts children in excess of the number specified on their license before or after normal school hours must have one additional caregiver for up to 20 children so accepted, and must have one additional caregiver for every one through 20 additional children thereafter.

### **Regulations for Child Care Facilities**

Immunization and Health of Children

### SECTION 26 IMMUNIZATION AND HEALTH OF CHILDREN

26.1 <u>Nevada Revised Statutes</u> 432A.230 to 432A.280, inclusive, set forth the following requirements for the immunization of children attending a child care facility:

### A. 432A.230

- 1. Except as otherwise provided in subsection 3 and unless excused because of religious belief or medical condition, a child may not be admitted to any child care facility within this state, including a facility licensed by a county or city, unless his parents or guardian submit to the operator of the facility a certificate or certificates stating that the child has been immunized and has received proper boosters for that immunization or is complying with the schedules established by regulation pursuant to NRS 439.550 for the following diseases:
  - a. Diphtheria;
  - b. Tetanus;
  - c. Pertussis if the child is under six years of age;
  - d. Poliomyelitis;
  - e. Rubella:
  - \*f. Rubeola (measles); and

This change was made pursuant the Washoe County Health Department recommendation to make the language more clear.

- g. Such other diseases as the local board of health or the state board of health may determine.
  - 1) HIB
  - 2) Mumps
  - 3) Hepatitis A
  - 4) Hepatitis B
  - 5) Varicella
  - 6) Steptococcus Pneumoniae

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- \*2. The certificate must show that the required vaccines and boosters were given and must bear the signature of a licensed physician or his designee or a registered nurse or his designee, attesting that the certificate accurately reflects the child's record of immunization. An official printout will also be accepted.
  - This change was made pursuant the direction of the Washoe County Health Department to allow various sources of documentation to be accepted and recognized as "an official" printout.
- 3. A child whose parent or guardian has not established a permanent residence in the county in which a child care facility is located and whose history of immunization cannot be immediately confirmed by a physician in this state or a local health officer, may enter the child care facility conditionally if the parent or guardian:
  - \*a. Agrees to submit within 30 calendar 45 days documentation a certificate from the physician or local health officer that the child has received or is receiving the required immunizations; and

This change was made pursuant the direction of the Washoe County Health Department to allow a larger time-frame for parents to obtain required medical documentation.

- b. Submits proof that he has not established a permanent residence in the county in which the facility is located.
- \*4. If documentation of immunizationsa certificate from the physician or local health officer showing that the child has received or is receiving the required immunizations is not submitted to the operator of the child care facility within 3045 days after the child was conditionally admitted, the child must be excluded from the facility.
  - This change was made pursuant the direction of the Washoe County Health Department to broaden what is "allowable paperwork" to meet the documentation standards.
- 5. Before December 31 of each year, each child care facility shall report to the health division of the department, on a form furnished by the division, the exact number of children who have:
  - a. Been admitted conditionally to the child care facility; and
  - b. Completed the immunizations required by this section.
- B. <u>432A.240</u> If the religious belief of a child's parents or guardian prohibits the immunization of the child as required by NRS 432A.230, a written statement of this

### **Regulations for Child Care Facilities**

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- fact signed by the parents or guardian and presented to the operator of the facility exempts the child from the provisions of that section for purposes of admission.
- C. 432A.250 If the medical condition of a child will not permit him to be immunized to the extent required by NRS 432A.230, a written statement of this fact signed by a licensed physician and presented to the operator of the facility by the parents or guardian of such child exempts such child from all or part of the provisions of NRS 432A.230, as the case may be, for purposes of admission.
- D. 432A.260 If, after a child has been admitted to a child care facility, including a facility licensed by a county or city, additional immunization requirements are provided by law, the child's parents or guardian shall submit an additional certificate or certificates to the operator of the facility stating that such child has met the new immunization requirements.
- E. <u>432A.270</u> Whenever the state board of health or a local board of health determines that there is a dangerous contagious disease in a child care facility attended by a child for whom exemption from immunization is claimed pursuant to the provisions of NRS 432A.240 or 432A.250, the operator of the facility shall require either:
  - 1. That the child be immunized; or
  - 2. That he remain outside the school environment (or caregiver's home) and the local health officer be notified.
- F. <u>432A.280</u> Any parent or guardian who refuses to remove his child from the child care facility to which he has been admitted when retention in the facility is prohibited under the provisions of NRS 432A.230, 432A.260, or 432A.270 is quilty of a misdemeanor.

### 26.2 Reporting

- A. The child care facility shall immediately notify the Department and Health Authority of any reportable disease or condition at the child care facility, including any outbreak or suspected outbreak at the child care facility. See Addendum VI for List of Reportable Diseases and Conditions.
- B. The child care facility shall notify the Department, as soon as possible, of the death of any child who attends or lives in the facility.

### 26.3 <u>Health and immunization requirements</u>

A. Within 30 days after enrollment, other than enrollment in an accommodation facility or facility that provides care to ill children, the parent, guardian, or person having custody shall provide a written statement from a licensed physician or registered nurse attesting to the status of the child's health and stating that all known special conditions are under treatment and the child is capable of adjusting to the programs of the

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- facility. In the event of question regarding the physical or mental health of any child in care, the licensee or the Department may require the parents to provide another statement of good health from a licensed physician or registered nurse.
- B. Except as otherwise provided in subsection A, every child in the facility, whether dropin, part-time, or full-time, shall have proof of current immunization on file at the facility as described in NRS 432A.230. Verification shall be kept in the format determined by the Department and shall be readily available for each child in care.
- 26.4 Records maintenance. A facility shall keep a record for each child which includes any pertinent information about his health status, any special needs he may have, and immunization status. These records shall be kept for a minimum of 90 days after the child no longer attends the facility.
- 26.5 <u>Exclusions for religious beliefs</u>. For children whose parents adhere to a religious faith practicing healing by prayer or by other spiritual means:
  - A. A facility shall obtain a signed statement from the parents that no medical care is to be provided;
  - B. A facility shall report to the Department any accidents, injuries, or illnesses affecting such children.

### 26.6 First aid

- A. An easily understandable chart describing first aid and emergency treatment must be available in each facility.
- B. Each facility must have a well stocked first aid kit readily available at all times. Refer to Addendum VIII for suggested First Aid Kit supplies.
- 26.7 <u>Written health provisions</u>. Every facility, other than an accommodation facility, must have written provisions for:
  - A. Consulting with physicians or registered nurses regarding the health of the children;
  - B. Obtaining assistance in developing and maintaining current health policies; and
  - C. Providing health services and education for the children and members of the staff, including dental health and personal cleanliness and care.
- 26.8 <u>Emergency health services</u>. A written directory of emergency health services must be readily available in the facility and must include:
  - A. A hospital;

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- B. A clinic or other constantly staffed medical facility;
- C. A physician or registered nurse, if the parents of a child have signed a written agreement stating that the person is acceptable.
- Accident records. Upon the occurrence of any accident or injury which requires emergency professional medical care of a child, the director, operator, or owner of each facility shall report the occurrence to the Department as soon as possible and shall keep on file at the facility a report of the occurrence.
- 26.10 <u>Transportation</u>. If a member of the staff transports or accompanies a child for professional emergency care, he must remain with the child until the parents assume responsibility for the care of the child. Arrangements shall have been made for substitute or alternate staff so that supervision of the other children in the facility is not compromised.

### 26.11 Notification and isolation of ill or injured children

- A. If a child becomes seriously injured or has an illness that requires exclusion from the child care facility under subsection 26.15, the facility shall immediately isolate the child from other children and place the child under appropriate supervision.
- B. The parent(s), legal guardian or other person authorized by the parent or legal guardian shall be immediately notified when their child's condition requires exclusion. The child care facility shall also inform the parent(s), legal guardian or other person authorized by the parent or legal guardian that they must immediately come and take their child from the child care facility.
- 26.12 <u>Administering medical treatment</u>. Members of the staff of a facility shall not administer any medical treatment, except emergency first aid and prescribed medications to the child.

### 26.13 Medications

- A. Each prescribed medication must be kept in the original container which has a child-proof lid, be plainly labeled, contain the name of the child or adult for whom it is prescribed, and be stored in a locked cabinet or be made inaccessible to children. Non-prescription medication must be kept in a container with a child-proof lid, be plainly labeled, and be stored in a locked cabinet or be made inaccessible to children. Medications for external use must be kept in a separate section of the locked cabinet. Medications stored in a refrigerator must be kept in a locked metal box or other place which is inaccessible to children.
- B. In order to administer non-prescription medication, a facility must have a prescription on file from a physician.
- C. Except in an emergency, only one person designated by the facility may administer medications to children. A written record containing every medication administered,

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the name of the child to whom it was administered, and the date and time it was administered must be maintained on a weekly basis by the facility and kept in the child's file.

- D. The person designated to administer medication must be trained in the administration of medication by a health care professional or the parent of a child cared for in the facility and authorized to administer the medication pursuant to NRS 453.375 or 454.213.
- E. All medication must, upon discontinuance of use be promptly destroyed or returned to the child's parents.
- 26.14 <u>Parental response to emergency</u>. If a parent or the person designated by the parent does not respond to an emergency call, the facility shall notify the Department.

### 26.15 Exclusion of children

- A. Exclusion of children based on reportable diseases or conditions. The child care facility shall follow the Health Authority's directions on exclusion of an ill child with a reportable disease or condition. A child who is excluded as a result of a reportable disease or condition shall not be allowed to return to the child care facility until the Health Authority gives permission to do so. The following reportable diseases may require exclusion from child care per the direction of the Health Authority:
  - Amebiasis
  - Campylobacteriosis
  - Cholera
  - Cryptosporidiosis
  - E. coli 0157:H7
  - Giardiasis
  - Haemophilus influenzae type b invasive disease
  - Hepatitis A
  - Measles (rubeola)
  - Meningitis
  - Meningococcal disease
  - Mumps
  - Pertussis
  - Pneumonic Plague
  - Poliomyelitis
  - Rubella
  - Salmonellosis
  - Shigellosis
  - Tuberculosis
  - Typhoid fever

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### Yersiniosis

- B Other conditions requiring exclusion of children. The child care facility shall exclude children if they have any of the following conditions:
  - 1. Respiratory illness, including uncontrolled coughing, difficulty breathing, or wheezing, until diagnosed not to be contagious;
  - Fever as defined in subsection 1.29, accompanied by behavior changes or other signs or symptoms of illness until a treating health care provider finds the child is not contagious;
  - 3. Multiple bouts of diarrhea, defined as 6 or more watery stools during the previous 24-hour period or one bout of bloody diarrhea, until either no diarrhea occurs for 24 hours or until diagnosed not to be contagious;
  - 4. Rash with fever or behavior change, until a treating health care provider determines that these symptoms do not indicate a communicable disease;
  - 5. Vomiting illness (two or more episodes of vomiting in the previous 24 hours), until either no vomiting occurs for 24 hours or until determined by a treating health care provider not to be contagious and the child is not in danger of dehydration;
  - 6. Shingles, only if the lesions cannot be covered by clothing or a bandage until the blisters have crusted;
  - 7. Skin infections, until 24 hours after treatment has been initiated;
  - 8. Strep throat or other streptococcal infection, until 24 hours after initial antibiotic treatment and 24 hours after cessation of fever;
  - 9. Head lice, from the end of the day of discovery, until after the first treatment;
  - 10. Scabies, until after treatment has been completed;
  - Purulent conjunctivitis (defined as pink or red conjunctiva with white or yellow eye discharge, often with matted eyelids after sleep, and including eye pain or redness of the eyelids or skin surrounding the eye), until 24 hours after treatment has been initiated;
  - 12. Mouth sores with drooling, unless a treating health care provider determines that the child is noninfectious:
  - Chickenpox (Varicella-Zoster), until all sores have dried and crusted (usually 6 days);

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- 14. Ringworm of the scalp or body until 24 hours after treatment has been started;
- 15. Herpes simplex, until those children who do not have control of their oral secretions no longer have active sores inside the mouth. No exclusion is necessary for children who have recurrent infections (fever blisters and cold sores); or
- 16. The child has an illness and the child care facility determines it cannot care for the ill child without compromising either the health or safety of the ill child or the health or safety of the other children.
- C. The Health Authority may make a final determination on exclusion when a conflict exists between the treating health care provider and the exclusionary guidelines referenced in subsection 26.15.B.

### 26.16 Duty to cooperate

- A. The child care facility shall promptly cooperate with the health authority during:
  - 1. A communicable disease investigation of the circumstances or cause of a case, suspected case, outbreak or suspected outbreak.
  - The carrying out of measures for the prevention, suppression and control of a communicable disease, including procedures of exclusion, isolation and quarantine.

### Regulations for Child Care Facilities

**Environmental Health And Safety** 

### SECTION 29 ENVIRONMENTAL HEALTH AND SAFETY

- 29.1 <u>Authority to inspect</u>. The District Health Officer or his duly authorized agent shall have authority to enter, for purposes of inspection or investigation, all child care facilities and to inspect all food products, sewage disposal facilities, utensils, equipment, and all portions of buildings located upon the premises. The representative of the Washoe County District Health Department has the authority to enforce any part of these Regulations that pertain to the safe and proper operation of a child care facility.
- 29.2 Reports on file. Reports of inspections must be kept on file at the facility for a minimum of two years.
- 29.3 <u>Summary of standards</u>. The following is a summary of the applicable standards for environmental health. If a caregiver desires more information concerning the standards, he should communicate with the Washoe County District Health Department.
  - A. Every licensee or facility director shall insure that the programs and premises of the facility are designed to minimize the risk of accidental injury. The premises, furnishings, and equipment must be kept clean and in good repair to protect the health of the children and the members of the staff.
  - B. Chemicals must be stored and used as follows:
    - 1. Cleaning equipment, cleaning agents, and toxic materials must be stored in a location of the child care facility which is inaccessible to children, except for soap, and sanitizer at the diaper changing area. Sanitizer at the diaper changing area must be in a labeled spray bottle and kept out of the reach of children.
    - 2. Cleaning agents and any other toxic chemicals shall be clearly and accurately labeled as to contents.
    - 3. All caregivers shall be able to demonstrate the proper use of and precautions to follow while using chemicals within the child care facility.
    - 4. Cleaning agents shall neither be stored on shelves above those holding food items nor stored on the same shelf as those holding food items.
    - 5. Only pesticides approved by the Environmental Protection Agency for use in child care and food establishments may be used.
    - 6. All chemicals used at the child care facility, except for family child care homes, must have a Material Safety Data Sheet (MSDS) which shall be readily available during all hours of operation.
  - C. The procedure for cleaning floors is as follows:

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- 1. A carpeted floor or rug on a floor that is too large to wash in a washing machine must be vacuumed not less than one time each day or more often if necessary and professionally cleaned not less than one time every three months or more often if necessary. If the carpeted floor or rug is cleaned by a member of the staff of the facility using a carpet cleaning machine, the Department may require the carpeted floor or rug to be professionally cleaned if the carpeted floor or rug does not appear to be clean.
- 2. Each floor of a facility that is not carpeted must be swept and mopped not less than one time each day or more often if necessary.

### D. Cleaning and sanitizing schedule for specific items

- 1. Body fluids, feces, and tissue discharges shall be cleaned up immediately and the surface upon which the spill landed shall be sanitized.
- 2. If the child is suspected of having a communicable disease, all toys and other items the child uses shall be cleaned and sanitized after use.
- 3. Restrooms, including flush toilets, floors and fixtures shall be cleaned and sanitized daily or sooner if soiled.
- 4. Diaper changing tables and potty chairs are to be cleaned and sanitized after each use. See subsection 29.3.L for diaper changing procedures.
- 5. Wade pools shall be emptied, cleaned and sanitized after each use.
- Frequently touched toys and surfaces, in rooms in which infants and toddlers are cared for, including tables and high chairs, shall be cleaned and sanitized daily or sooner if soiled.
- 7. Toys and other surfaces in rooms where older, non-diapered children are cared for shall be cleaned and sanitized weekly or sooner if soiled.
- 8. Toys that are placed in children's mouths shall be set aside to be cleaned and sanitized before being handled by another child.
- 9. Tabletops used for eating must be cleaned and sanitized prior to and after use.
- Objects intended for the mouth including, thermometers, pacifiers, teething toys, and similar objects shall be cleaned, and reusable parts shall be sanitized between uses.
- 11. Sleeping devices, including cribs, portable cribs and playpens, shall be cleaned and sanitized at least once a week or sooner if soiled. Cleaning and sanitizing a

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sleeping device is required before a different child is allowed to use the same sleeping device.

- 12. Cloth, dress-up clothes (excluding hats and other items worn over the head), and cloth or plush toys, shall be laundered and placed into a hot dryer weekly or sooner if soiled. Hats and other items worn over the head shall be cleaned and sanitized after each child's use.
- 13. Reusable cloth rags shall be laundered separately and placed in a hot dryer between uses.
- 14. Mops shall be washed in detergent and water, then rinsed in water, then immersed in sanitizing solution, then wrung out as dry as possible after each use.
- 15. Phone receivers shall be cleaned and sanitized weekly.

Refer to Addendum X on how to mix bleach solutions used for sanitizing and refer to Addendum XI for table on cleaning and sanitizing guidelines for specific items.

### E. Cleaning and sanitizing procedures

- 1. Manual cleaning shall be done as follows:
  - a. Scrub the surface of the item with soap/detergent and clean water to remove all visible soil, then;
  - b. Rinse off soap/detergent residue with clean water.
- 2. Manual sanitizing after cleaning.
  - a. When using an approved sanitizing agent other than bleach, follow the manufacturer's directions for use. See subsection 1.51 for the listing of approved sanitizing agents.
  - b. When using bleach as a sanitizing agent staff shall:
    - 1) Prepare the bleach solution as a sanitizing agent, in accordance with the bleach solution mixing instructions contained in Addendum X; then
    - 2) Either immerse the item in a separate container of bleach sanitizing solution for 30 seconds or wet the surfaces of the item with the bleach sanitizing solution; then
    - 3) Either allow the item to air dry or wipe off liquid residue.
- 3. Mechanical cleaning and sanitizing nonporous items.

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- a. Dishwashers may be used for cleaning and sanitizing nonporous items, such as plastic and metals, under the following conditions:
  - 1) Dishwasher shall be operated in accordance with the manufacturer's guidelines for maintenance and operation; and
  - Dishwashers that are not National Sanitation Foundation (NSF) approved dishwashers must meet the equivalent standard for sanitization of an NSF approved dishwasher and be approved for use by the Health Authority.
- 4. Carpets, rugs and other porous items that have been contaminated by body fluids, including fecal matter, shall be treated as follows:
  - a. Clean the area by removing any solid matter present and then blot to remove the fluid as quickly as possible; then
  - b. Spot-clean with a detergent-sanitizing agent; then
  - c. Shampoo or steam-clean the contaminated surface.
- F. Bleach sanitizing agents shall not be scented or mixed with ammonia or any other cleaning agents, including but not limited to window cleaners, vinegar, dishwasher detergents, oven cleaners, hydrogen peroxide, toilet bowl cleaners, drain cleaners, rust-calcium-lime removal products, concrete cleaners, paints and insecticides.
  - This change was made pursuant Washoe County Health Department recommendation due to changes to bleach products. This change aligns the language with the changes made in the Definition Section (1.2) of the Regulations.
- G. Dirty linens must be stored separately from food, clean linens, and other supplies.
- H. Personal items, such as combs, hairbrushes, washcloths, towels, pacifiers, teething toys, personal clothing, bedding, and toothbrushes must not be used by more than one person. Such items shall be stored separately in a storage area that is labeled with the child's name.
  - 1. When children are permitted to brush their teeth at the child care facility the caregiver must comply with all the following:
    - a. Toothbrushes shall not be shared.
    - b. After use, toothbrushes shall be stored with their bristles up to air dry in such a way that the toothbrushes cannot contact or drip on each other and the

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bristles are not in contact with any surface. If a toothbrush becomes contaminated, it shall be discarded.

- c. If a toothbrush holder is used, the location in the holder for a given toothbrush shall be labeled with the child's name. Toothbrushes shall be physically separated at all times. The holder shall be maintained in a clean and sanitary condition and be protected from contamination.
- d. Toothpaste shall not be dispensed directly onto toothbrushes from a common tube
- I. Individual sleeping accommodations must be provided for naps and rests and must conform to the following:
  - 1. Each bed must have cleanable covers and be suitable for use by children;
  - No restraining device may be used in a crib or play pen unless such a device is ordered by a physician of the particular child;
  - 3. Every mat, cot, bed, crib, or play pen must be at least two feet apart and every aisle between them must be kept free of obstruction;
  - 4. Areas provided for napping or sleeping must be sufficiently lighted to provide for visual supervision of the children at all times;
  - 5. The staff of each facility shall:
    - a. Be readily accessible and available to be summoned to ensure the safety of the children, and shall maintain the staff to child ratio while children are napping as required in subsection 24.4 of these Regulations;
    - b. Use a safe, sturdy, well-constructed, single-level, free standing crib, portable crib or playpen for children to sleep in;
    - c. Equip any such sleeping device with a waterproof, firm-fitting mattress;
    - d. Ensure that each infant under 12 months of age is placed on his back on a firm mattress, mat or pad manufactured for use by an infant when the infant is napping or sleeping in a crib;
    - e. Ensure that each crib to be used by a child who is 6 months of age or younger is constructed with vertical slats that are not more than 2-3/8 inches apart;
    - f. Ensure that a child who is 18 months of age or younger sleeps in a crib which is appropriate for his age or in another sleeping device which has been approved by the Department;

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- g. Ensure that a child who is older than 18 months of age sleeps in an appropriate crib or on a cot or mat;
- h. Ensure that each sleeping device has appropriate bedding and a waterproof and washable covering;
- i. Ensure that the bedding that each child uses is used only for that particular child;
- j. Replace the bedding each time it is wet or soiled by a child or when the sleeping device is to be used by another child;
- k. Take any child who is awake from a nap in a crib out of the crib and engage the child in an appropriate activity within 15 minutes;
- I. Ensure that each child takes a nap as needed; and
- m. Napping children must be in an area where they can be heard and readily seen and must be physically checked by a caregiver at least every 15 minutes.
- 6. The staff of a facility shall not change the diaper of a child in a crib or other sleeping device.
- 7. Linen must be provided for each bed, cot, or crib. Cots with removable covers and sleeping mats which are covered in materials designed to be sponged or wiped clean need not be covered by bed linens. Bed linens, cot covers, and sleeping mats must be washed at least weekly and every time a different child is to use the equipment.
- 8. If bunk beds are used, they must not exceed two tiers and the upper level must have safety guardrails. Children under six years of age must occupy only bunks on the lower level.
- 9. A bed or crib must be furnished for each child who sleeps in the facility at night. Each bed must be at least six inches above the floor, at least 24 inches wide and of adequate length for the child. Cribs must be provided for children 18 months of age or younger.
- 10. For naps, children may use family beds in a domicile used by persons living in the facility if separate linens are laid over the beds and the child has his own blanket.
- \*11. The staff of a facility shall not use a waterbed, sofa, sofa mattress, pillow or any other soft surface on which to place an infant under 12 months of age to nap or sleep. No bumpers, pads, quilts, toys, or wedges used in cribs or port-a-cribs.

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This language was added as recommended by Regina Washington, Community Programs Coordinator with REMSA who is considered to be a local expert on SAFE SLEEP. New language makes it very clear that nothing shall be placed or used in any crib.

### 12. Sleeping quarters

- a. In a child care facility offering night care, no child over the age of one year shall sleep in the same room as an adult unless the adult is a non-sleeping caregiver.
- b. No child over the age of five years shall share sleeping quarters with persons of the opposite sex unless a non-sleeping caregiver remains in the room.
- J. Bathrooms must be kept clean, safe, and sanitary and have:
  - 1. Adequate illumination and ventilation;
  - 2. One hand wash sink for every 15 children;
  - 3. One toilet equipped with toilet paper on a wall mounted toilet roll dispenser for every 15 children.
- K. <u>Diapering area</u>. Each area in a facility that is used for changing diapers must:
  - 1. Have a smooth, nonabrasive, impervious surface;
  - 2. Except for a family child care home, be located within 5 feet of a hand washing sink that is not used for the preparation of food;
  - 3. Not be located in an area in which food is prepared;
  - 4. Have a smooth, nonabsorbent floor covering;
  - 5. Have nearby for wet or soiled diapers a washable receptacle that is lined with plastic and covered with a lid; and
  - 6. Be kept in good repair and in a safe condition.
- L. <u>Diaper changing and soiled clothing procedures</u>
  - 1. Single use diaper changing procedures shall be posted at each diapering area.
  - 2. The child care facility shall use the following procedure on single use diaper changing:

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- a. Gather all necessary supplies.
- b. Disposable liner is optional. If used, place disposable liner on the diaperchanging surface.
- c. Glove usage is optional. If used, place disposable gloves on.
- d. Carry the child to the changing table, keeping soiled clothing away from caregiver.
- e. Any soiled clothing shall be handled in the manner specified in subsection 29.3.L.4.
- f. Unfasten the soiled diaper.
- g. Use disposable baby wipes to clean the diaper area. Remove stool and urine from front to back.
- \*h. Fold the used diaper over and secure it with the tabs. If gloves are worn, remove gloves and dispose.pull the gloves inside out over the secured diaper as the gloves are removed.
- i. Dispose of all contaminated materials in a lined receptacle with a tightly fitting lid that is used for diapering materials only. The receptacle shall be emptied as often as needed to minimize odors and cleaned and sanitized at least once a day. The receptacle shall be inaccessible to children.
- \*j. Caregiver shall wipe their hands with a disposable wipe and then wipe the child's hands with another disposable wipe. Wipe hands with a disposable wipe.
- k. Apply skin care ointments as needed. Skin care ointments that are individually labeled for each child must not be shared with other children. If community skin care ointments are used they must be dispensed onto a clean, single service, disposable item prior to application to each child.
- \*I. Slide the clean diaper under the child<del>baby</del>, adjust and fasten it. The diaper must be able to contain urine and stool and minimize contamination.

The changes outlined in 29.3.L.2.h, j, & I were added pursuant Washoe County Health Department recommendation to enhance diaper changing sanitation. Additionally, child language was added to include any child that may be diapered.

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- m. Wash the child's hands as specified in either subsection 19.3.A or 19.3.C. Return the child to group.
- n. Dispose of table liner, if used.
- o. Clean and sanitize diaper changing table after each use in accordance with subsections 29.3.E.1 and 29.3.E.2.
- p. Caregiver shall then wash their hands as specified in subsection 19.3.A.
- q. Document any skin problems and report, to the parent or guardian, any rash on the child or unusual stool frequency, color, or odor.
- 3. The child care facility's cloth diaper changing procedure is the same as the single use diaper changing procedure, except as follows:
  - a. After a diaper change, the cloth diaper and waterproof cover shall be simultaneously removed as a unit and placed directly into a leak-proof container. The container shall be labeled with the child's name or diaper service and maintained inaccessible to children. The contents shall be sent home or picked up by the diaper service daily.
  - Cloth diapers shall not be rinsed or contents disposed of at the child care facility.
  - c. If the child care facility allows cloth diapers, the diapers shall be of a front closure design with an absorbent inner liner and waterproof outer covering. The diaper and cover shall be removed as a single unit, with no reuse of diaper or cover until cleaned and sanitized at the child's home or at a diaper service. The diaper must be able to contain urine and stool and minimize contamination.
- 4. The child care facility's soiled clothing changing procedure is as follows:
  - Caregivers shall promptly change a child's clothing that is soiled with fecal material or urine.
  - b. Clothing shall not be rinsed but free fecal matter may be disposed of in the toilet.
  - c. The soiled clothing shall be placed in a leak-proof container.
  - d. The container is to be identified as the child's and stored in a manner so it is inaccessible to children.
  - e. The caregiver shall then wash their hands as specified in subsection 19.3.A.

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f. The soiled clothing shall be sent home with the parent or legal guardian daily and shall not be washed at the child care facility.

### M. The staff of a facility shall:

- Discourage children from coming near an area that is used for changing diapers; and
- 2. Ensure that a child is not left unattended in the diaper changing area.
- N. Receptacles for the collection and storage of solid waste must conform to the Washoe County District Board of Health Regulations governing Solid Waste Management.
- O. Any refrigerator or freezer not in use must be securely locked, wrapped with chain, and locked or have its door removed.
- P. The premises of a facility must be free of accumulated refuse, dilapidated structures, vermin, dangerous conditions, or instrumentalities capable of harming children and any other health or safety hazard.
- Q. Pets are permitted in a child care facility under the following conditions:
  - 1. Handled in a manner which protects the well-being of the children and the pet;
  - 2. Free from fleas, ticks, and intestinal parasites;
  - 3. Inoculated as often as prescribed by a veterinarian, in good health, present no problems of sanitation;
  - 4. Pet vaccinations must be up to date and kept on file at the facility, regardless if the pet is kept inside or outside the facility;
  - 5. Restricted from areas where food is prepared and from eating areas while meals are being served;
  - 6. A "dog run" must be set aside for the use of household pets where the area is inaccessible to the children under care of the facility;
  - 7. Reptiles, including but not limited to turtles, lizards and snakes, are not to be handled by children;
  - 8. Dangerous or aggressive animals are prohibited at the facility;
  - 9. Animal cages, equipment and surrounding areas shall be kept in a clean and sanitary manner;

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- Animal cages shall be constructed and maintained in such a manner as to prevent escape of the animal;
- 11. Litter boxes must be kept out of the reach of children; and
- 12. Play areas must be cleaned of all animal feces before children are allowed access to the area.

### R. Requirements for hand washing sinks

- 1. Hand washing sinks shall be equipped to provide hot and cold potable running water or provide warm running potable water through a mixing valve.
- 2. Hand washing sinks that have a self-closing, slow closing, or metering faucet shall provide a flow of water for at least 15 seconds without the need to reactivate the faucet.
- 3. Hot running water in the hand washing sink shall not exceed 100 degrees Fahrenheit.
- 4. All hand washing sinks shall have a dispenser type soap located within 4 feet of the hand washing sink.
- 5. All hand washing sinks shall have a working hand-drying machine or individual single-use disposal towels in a dispenser at the hand washing sink.
- 6. All hand washing sinks, single-use towels and dispenser type soap shall be easily accessible.
- 7. Hand washing sinks shall not be used for food preparation or utensil washing.
- 8. At least one hand washing sign, indicating the proper procedure for hand washing specified in subsection 19.3.A, is to be posted in a plainly visible site in each restroom.
- S. Only single-use disposable towels, single-use disposable sponges, or reusable cloth rags may be used for cleaning. Reusable cloth rags shall be laundered separately and placed in a hot dryer between uses. After cloth rags have been used once, they shall be placed in a closed receptacle with a tight fitting lid until laundered. Refer to subsection 29.3.D for cleaning, disinfecting and sanitizing schedule for specific items.
- 29.4 <u>Pools, ponds, hot tubs, saunas and other bodies of water</u>. These regulations are to reduce the risk of injury or drowning.

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**Environmental Health And Safety** 

- A. If a swimming pool is on the premises and used by the children under care in the facility, the pool must comply with requirements of the Washoe County District Health Officer.
- B. Licensed homes with pools, ponds or other bodies of water must provide a fence capable of keeping children out of the pool, pond or other body of water and in any event, at least four feet high on all sides of the pool, pond or other body of water separating the pool, pond or other body of water from the general yard area. The fence must:
  - Have no vertical opening more than four inches wide.
  - Be of such design that young children cannot climb it or squeeze under it.
  - 3. Have no opening at the bottom of the fence greater than 4 inches in height.
  - 4. Allow a clear view of the pool, pond or other body of water.
  - 5. Have a self-closing gate with a self-latching mechanism in proper working order which is out of reach of young children.
- C. A reaching pole and ring buoy must be provided as minimum safety devices.
- D. Steps leading to an above-ground pool shall be removed when the pool is not in use.
- E. Saunas and hot tubs must be locked in a manner which prevents access by children.
- F. Wading pools may be used in a facility under the following conditions:
  - 1. The depth of the water in the wading pool does not exceed 6 inches;
  - 2. Children using wading pools must have direct supervision by an approved caregiver;
  - 3. Wading pools must be emptied when not in use;
  - Wading pools shall be emptied, cleaned and sanitized immediately after each use. Refer to subsection 29.3.D for cleaning and sanitizing schedule for specific items; and
  - 5. The wading pool must be maintained and used in a manner which safeguards the lives and health of the children.
- G. Children are prohibited from using hot tubs, spas, or saunas.
- H. All buckets and other pails of water shall be emptied immediately after each use.

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### 29.5 Water activities and ratios

- A. A facility which provides activities in water that has a depth greater than 6 inches, other than a swimming lesson which is taught at a public swimming pool, shall ensure that:
  - 1. No child is in water with a depth that is higher than the chest of the child while the child is standing;
  - 2. At least one caregiver is within arm's reach of each child who is less than three years of age;
  - 3. The children are not allowed to wade or swim in a moving body of water, including, without limitation, a stream, river, creek or irrigation ditch; and
  - 4. At least one person who is currently certified as a lifeguard or water safety instructor by the American National Red Cross or an equivalent water safety program is supervising the children. A public lifeguard may satisfy the requirement of this paragraph.
- B. A facility which offers a water activity must offer the activity as an optional activity.
- C. When children cared for in a facility are engaged in an activity in water that has a depth greater than six inches, the ratio of caregivers to children are as follows:
  - 1. For children less than three years of age, one caregiver for each child.
  - 2. For children at least three years of age but less than six years of age, one caregiver for every four children.
  - 3. For children six years of age or older, one caregiver for every six children, with the following exceptions:
    - a. If there for more than six children, but less than 12 children engaged in the water activity, there must be at least two caregivers for the group.
    - b. If there are at least 12 children, but less than 20 children engaged in the water activity, there must be at least three caregivers for the group.
    - c. If there are 20 or more children engaged in the water activity, there must be at least three caregivers for the group, plus one additional caregiver for every sixth child in excess of 20 children.

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D. Caregivers who are counted in the staff to child ratio for children who are engaged in a water activity may not count in the staff to child ratio for children who are engaged in the optional activity offered.

### 29.6 Smoking prohibition

- A. Smoking tobacco in any form is prohibited in the following locations:
  - 1. Within child care facilities.
  - 2. On playgrounds at child care facilities.
  - 3. Within 20 feet of entrances, exits, open windows, and ventilation systems of child care facilities.
  - 4. In vehicles when the vehicles are being used by the child care facility to transport children.
- B. "No Smoking" signs or the international "No Smoking" symbol shall be clearly and conspicuously posted at every entrance to the child care facility.
- C. All ashtrays and other smoking paraphernalia, with the exception of matches and lighters, shall be removed from the child care facility.
- 29.7 Pest control. The child care facility and grounds shall be kept free of vermin.
- 29.8 <u>Heating and cooling</u>. The child care facility shall maintain free of drafts and an ambient air temperature of at least 68 degrees Fahrenheit, but not more than 82 degrees Fahrenheit, during the months of April through September and at least 65 degrees Fahrenheit, but not more than 82 degrees Fahrenheit during the months of October through March in all interior areas of the building occupied by children, as measured 30 inches above floor level. The facility shall be heated, cooled and ventilated to maintain these temperatures and to avoid the accumulation of odors and fumes.
- 29.9 <u>Lighting</u>. Adequate lighting is required inside the child care facility, including in the play areas, restrooms, hallways, entrances, and nap areas. Adequate lighting is also required when children are reading, coloring, doing puzzles, and other close work.

### Regulations for Child Care Facilities

Family and Group Child Care Homes

# SECTION 31 REQUIREMENTS FOR FAMILY CHILD CARE HOMES AND GROUP CHILD CARE HOMES

- 31.1 Owner authorization. If the residence proposed for child care is rented or leased, the license applicant shall provide the Department written authorization from the owner approving child care on the premises.
- 31.2 <u>Responsibility</u>. The licensee of a family child care home shall be able to accept the extra responsibility of other children without jeopardizing his health or ordinary care of his children and family. The relationship of all members of a family child care home shall be such as to secure a wholesome atmosphere for children.
- 31.3 <u>Health requirements</u>. All adult members of the household must be in good health, physically and mentally, and free of disabilities which would adversely affect the care of children. Tuberculosis test requirements outlined in Section 22.4 shall apply.
- 31.4 <u>Income requirements</u>. The income of a licensee of a family child care home, including the licensee's spouse, whether from employment or other sources, must be regular and sufficient to maintain an adequate standard of living for the family.
- 31.5 <u>Work permit requirements</u>. All adult members of the household shall comply with the work permit requirements outlined in Section 6.7.
- 31.6 <u>Program requirements and record keeping</u>. Except as otherwise provided in subsection D, licensees and employees must comply with Section 22 and Section 23 of these Regulations and licensees must also:
  - A. Provide a child care program which meets the requirements of these Regulations;
  - B. Maintain enrollment, attendance, medical, and all other records:
  - Maintain personnel records for each staff, including volunteers, substitutes, and parttime employees. Refer to subsections C.1 through C.9 of Section 21.2.C for personnel record requirements;
  - D. Notify the Department of new employees or volunteers prior to their commencing employment;
  - \*E. Notify the Department within 24 hours three working days of any change in the composition of the household;

This change was made to align the Washoe County Regulations for Childcare with the regulation changes made by Assembly Bill 93, signed by the Governor 5/24/13, and codified by the State on 6/23/14.

### Regulations for Child Care Facilities

Family and Group Child Care Homes

- F. Maintain responsibility for screening, scheduling, and supervising the staff of the facility, and for all conduct of any member of the staff or resident of the facility;
- G. Work with parents and include them, whenever possible, in the programming and functioning of activities;
- H. Assure that the required staff-to-child ratio is maintained;
- I. Maintain a daily sign-in sheet that includes:
  - 1. The first and last names of staff and children;
  - 2. The times of arrival and departure for staff and children; and
  - 3. Sign-in sheets to be kept on file a minimum of 90 days and made available to the Department upon request.
- J. Cooperate with the Department and other agencies of government to improve the quality of child care and the competence of caregivers.
- 31.7 <u>Alternate Caregiver exemption</u>. Alternate caregivers are exempt from the requirements of Section 22.2.J and Section 23.

Addendum X

### **HOW TO MIX BLEACH SOLUTIONS**

How To Mix 8.25% Household Bleach Solutions With Water

Solution	General Sanitization		Disinfection For Spills of Blood or Blood-Containing Body Fluids (CDC Recommendation)		
Purpose	Dose				
	Use to sanitize toys, tables, diaper changing tables, cribs, sleeping mats, etc.		Use to disinfect surfaces that have come into contact with blood/blood containing body fluids. Use to disinfect surfaces that will <u>not</u> have contact with food or the mouth (e.g. floors, etc.)		
Item	Water	Bleach	Water	Bleach	
Amount	1 gallon	3 Tablespoons	1 gallon	1 ½ Cups	
	1 quart	2 teaspoons			
	1 pint	1 teaspoon			

### NOTE:

- Never mix bleach with ammonia or any other cleaning agent! Toxic gases or acids are produced which will cause choking, serious breathing problems, burns to skin and respiratory system.
- Make solutions fresh daily, use non-scented bleach, label with date and contents.
- Store bleach out of reach of children.
- FOR NOROVIRUS: 1 gallon water to 6Tbsp bleach (1 quart to 4 teaspoons, etc.)

WASH AND RINSE BEFORE YOU SANITIZE OR DISINFECT!!

### **Regulations for Child Care Facilities**

Addendum X

# Solution Purpose Use to sanitize toys, tables, diaper changing tables, cribs, sleeping mats, etc. Item Water Bleach (at 8.25% concentration) Amount 1 gallon 3 Tablespoons¼ cup 1 quart 2 teaspoons 1 tablespoon 1 pint 1/2 teaspoon

### **NOTE:**

- •Never mix bleach with ammonia or any other cleaning agent! Toxic gases or acids are produced which will cause choking, serious breathing problems, burns to skin and respiratory system.
- •Make solutions fresh daily, label with date and contents.
- •Clean items and surfaces before disinfecting.
- •\*Store bleach in a closed container and out of the reach of children.

This was added/deleted pursuant Washoe County Health Department recommendation due to the changes in bleach solution.