Washoe County Human Services Agency

Regulations for Child Care Facilities Additional Requirements for the Care of III Children

SECTION 37 ADDITIONAL REQUIREMENTS FOR THE CARE OF ILL CHILDREN

- 37.1 <u>Care of ill children facilities</u>
 - A. Care of ill children may be provided by:
 - 1. A facility that is licensed by the Agency to provide care for only ill children;
 - 2. A child care center that designates a separate area for use by ill children;
 - 3. A family home; or
 - 4. A group home.
 - B. A licensee of a facility that provides care for ill children may care for a child who is prohibited from remaining in any other child care facility because he:
 - 1. Has a short-term or minor illness;
 - 2. Has a short-term physical disability; or
 - 3. Is recuperating from an acute episodic illness.
 - C. A facility must not provide care for an ill child for more than 14 hours in any 24-hour period.
- 37.2 <u>Exclusion</u>. The Director of a facility that provides care for ill children shall not admit a child who has the following conditions unless approved by the appropriate health authority:
 - A. Diarrhea:
 - 1. That is caused by shigella, salmonella, campylobacter or giardia;
 - 2. That is accompanied by dehydration or loss of fluid;
 - 3. That is accompanied by blood, mucous or loss of color in the stools;
 - 4. That is accompanied by poor fluid intake;
 - 5. That is accompanied by marked lethargy; or
 - 6. For more than three days, unless the parent provides evidence that the child is under the care of a physician.
 - B. Difficulty breathing or rapid breathing.

- C. Asthma and a severe upper respiratory infection, unless the parent provides evidence that the child is under the care of a physician.
- D. Episodes of vomiting for over a six hour period.
- E. Yellowish skin or eyes.
- F. A fever and:
 - 1. Mucous that has a foul odor or is yellow or green;
 - 2. An undiagnosed rash; or
 - 3. A sore throat.
- G. Severe coughing.
- H. Chicken pox, pertussis, measles, mumps, rubella, diphtheria or herpes simplex and is contagious.
- I. Untreated scabies, tinea corporis or capitis (ringworm).
- J. An ear infection, unless the parent provides evidence that the child is under the care of a physician.
- K. Untreated head lice.
- L. Any other condition that precludes his admission to the facility, as determined by the Director.

37.3 Contract with a physician

- A. Except as otherwise provided in Subsection C, a licensee of a facility that provides care for ill children shall employ or enter into a contract with a physician.
- B. The physician shall:
 - 1. Be on call when the facility is in operation;
 - 2. Make quarterly inspections of the facility;
 - 3. Act as a liaison to all appropriate health officers; and
 - 4. Assist in the development of standards for the operation of the facility.

C. If the Director of the facility is a physician, the licensee is exempt from the requirements of Subsection A and the Director shall carry out the provisions of Subsection B.

37.4 <u>Written standards</u>

- A. The licensee of a facility that provides care for ill children shall develop and carry into effect written standards for the operation of the facility.
- B. The standards must include:
 - 1. An admission policy;
 - 2. Procedures for the control of infection;
 - 3. Methods for the daily care of children;
 - 4. Procedures for recording information about a child;
 - 5. Plans for the training of staff;
 - 6. Procedures for the care and referral of a child with worsening symptoms;
 - 7. Procedures for communication by staff to parents and health care providers;
 - 8. Procedures for feeding and bathing a child;
 - 9. Procedures for a daily examination of each child in accordance with Section 37.13 of this regulation;
 - 10. Procedures for providing emergency health care, including community resources and referrals;
 - 11. Procedures for the use and administration of medication in accordance with Section 37.5 of this Regulation;
 - 12. Procedures for cleaning the facility;
 - 13. Procedures for administering first aid; and
 - 14. Procedures for storage of sanitizing material;
 - 15. A requirement that each room in which an ill child resides must have a sink for washing hands that is equipped with soap and paper towels; and

- 16. A requirement that separate areas must be provided for changing the diapers of children who are ill and children who are well.
- 37.5 <u>Administration of medication</u>. Procedures for the use and administration of medication must include the following provisions:
 - A. Only the Director or a person designated by him may administer medication to a child or provide assistance to a child who administers medication to himself.
 - B. All prescription medications must be:
 - 1. Authorized by a physician;
 - 2. In the original container which must have a child proof lid;
 - 3. Labeled with the name of the child, the date and directions for administration; and
 - 4. Refrigerated, if required.
 - C. All nonprescription medications must be:
 - 1. Authorized by a physician, health care provider or emergency care provider;
 - 2. Labeled with the name of the child, the date and directions for administration;
 - 3. Refrigerated, if required; and
 - 4. Kept in the original container which has a child proof lid.
 - D. Except as provided in Subsection 37.5.J, the Director may administer medication to a child after receiving an oral order from a physician if the Director requests a written confirmation of the order from the physician.
 - E. Except as otherwise provided in Subsection F, all medications must be locked and inaccessible to children.
 - F. Medications that require refrigeration must be kept separate from food and inaccessible to children.
 - G. Unused medication must be returned to a parent and outdated medicine must be discarded.
 - H. The Director shall post a chart in a conspicuous place that includes:
 - 1. Information on the health and medication of the children in the facility; and

- 2. A record of the administration of medication to each child.
- I. A member of the staff shall note in the record of a child and the Director shall advise a parent of:
 - 1. All medication administered to a child; and
 - 2. The occurrence of any health problem, including diarrhea, vomiting, continuous hunger, refusal to eat, a nosebleed, a skin rash or high temperature.
- J. Only persons trained in the administration of medication by a health care professional or a parent of a child cared for in a facility authorized pursuant to NRS 453.375 or 454.213 may administer medication to the child.
- 37.6 <u>Admittance</u>
 - A. Before a child is admitted into a facility that provides care for ill children, the Director:
 - 1. Shall conduct an assessment of the health of the child; and
 - 2. Receive from the parent:
 - a. A medical history of the child, which must include allergies and dietary problems, on a form provided by the facility;
 - b. A medical release form provided by the facility and signed by the parent;
 - c. The name, address and telephone number of the child's physician, health care provider or emergency care provider and any other information needed for obtaining emergency medical care;
 - d. The record of immunizations of the child; and
 - e. A statement of the current and recent illnesses or disabilities of the child, his medical needs and any symptoms that require notification of a parent or physician.
 - 3. Shall develop a plan of care for the child with the parent. The plan must be in writing and signed and dated by the parent.
 - B. The Director may:
 - 1. Admit a child only after evaluating the medical history, symptoms and physical condition of the child; and

2. Require an examination of a child by a physician, including a diagnosis, treatment and prognosis, before accepting the child.

37.7 Director qualifications

- A. The Director must be:
 - 1. A physician as defined in NRS 630.014;
 - 2. A physician's assistant as defined in NRS 630.015;
 - 3. An advanced practitioner of nursing, as defined in NRS 632.012, who has a specialty in pediatrics;
 - 4. A registered nurse as defined in NRS 632.019; or
 - 5 A licensed practical nurse, as defined in NRS 632.016, who has two years of experience in pediatric nursing.
- B. The Director shall complete a total of 60 hours of initial training in:
 - 1. The control of communicable diseases; and
 - 2. The recognition of symptoms and the care of childhood illnesses.
- C. The Director must be at least 21 years of age.

37.8 <u>Staff qualifications</u>

- A. Each member of the staff of a facility that provides care for ill children:
 - 1. Must be at least 18 years of age.
 - 2. Must be trained and certified in first aid and cardiopulmonary resuscitation (CPR) as outlined in Section 22.2.G in these Regulations.
 - 3. Shall earn a total of three hours of training each year in the control of communicable diseases and the recognition and treatment of childhood illnesses.
 - 4. Shall earn a total of three hours of training each year in a course directly related to the developmentally appropriate practices of young children.
 - 5. Shall provide to the facility his record of immunizations before beginning employment.

B. Evidence that a member of the staff has completed the requirements of paragraphs 2, 3, 4 and 5 of Subsection A must be included in his personnel file kept at the facility.

37.9 <u>Staff-to-child ratio</u>

- A. A licensee of a facility that provides care for ill children shall have on duty at least the following number of staff:
 - 1. If all children in the facility are younger than two years old, one member of the staff for every three children;
 - 2. If all children in the facility are between two years and three years old, one member of the staff for every four children;
 - 3. If all children in the facility are between three years and six years old, one member of the staff for every five children;
 - 4. If all children in the facility are older than six years, one member of the staff for every seven children.
- B. If the Director provides care for ill children, he may be included in calculating the ratio of staff to children.
- C. If a facility that provides care for ill children contains children from more than one of these age groups, the required number of staff is determined by computing the average of the ages of all children attending the facility and using the average age to determine the applicable ratio of staff to children.
- D. Only staff providing direct care to the children will be counted in the ratio of staff to children.

37.10 Isolation area

- A. A facility that provides care for ill children must have an area to isolate, if necessary, and care for a child whose condition has worsened until the child is removed from the facility.
- B. A child who is in an area of isolation must be under constant visual observation by a member of the staff.

37.11 Notification to parents

- A. The Director of a facility that provides care for ill children shall:
 - 1. Immediately notify a parent of any significant change in his child's illness or injury received in the facility more serious than a minor cut or scratch; and

- 2. Obtain instructions from the parent for a course of action.
- B. If the Director determines that a child's illness or injury exceeds the maximum level of care for which the facility is licensed, the parent must be notified and the child must be removed from the facility. If the parent cannot be contacted, the Director shall follow the provisions for emergency care on the medical release form.

37.12 Dual facility additional requirements

- A. A facility that provides care for ill children in conjunction with a child care center must:
 - 1. Keep on file a daily schedule of work for all members of the staff.
 - 2. Not transfer a child from the facility to the center during any day that the child began at the facility.

37.13 Initial evaluation

- A. The Director may admit a child to a facility that provides care for ill children only if a parent brings the child to the facility and releases the child to a member of the staff.
- B. An initial evaluation of each child must be conducted upon his arrival by the Director or a physician, a physician's assistant, an advanced practitioner of nursing, a registered nurse or a licensed practical nurse who has the qualifications required by Subsection A of Section 37.7 of this Regulation.
- C. The initial evaluation must include:
 - 1. An assessment and the name of the person making the assessment;
 - 2. The status of the child's illness, including contagion and duration;
 - 3. A recommendation for the number of evaluations of the child to be conducted by a member of the staff during the day; and
 - 4. Recommendations for the diet and activity level of the child.

37.14 Ongoing evaluations

- A. A member of the staff shall conduct evaluations of each child as recommended by the Director or health care provider who performed the initial evaluation of the child.
- B. After each evaluation the member of the staff shall record:
 - 1. The date and time of each evaluation;

- 2. The temperature, pulse and respiration of the child;
- 3. The amount of food and fluid ingested by the child;
- 4. The color, consistency and number of the child's stools; and
- 5. A description of the activity of the child, including sleep, rest and play.
- 37.15 <u>Activities</u>. The Director of a facility that provides care for ill children shall:
 - A. Provide a child with activities during the day that meet the needs of the child, including:
 - 1. Activities that take place inside or outside and which are consistent with the developmental level, ability and physical condition of the child and the plan of care for the child;
 - 2. Rest and relaxation;
 - 3. Eating and drinking; and
 - 4. Toileting and personal hygiene.
 - B. Modify the plan of care for each child daily.
 - C. Monitor the records completed by staff.
 - D. Notify a parent of his child's progress.

37.16 Nap/rest period

- A. A licensee of a facility that provides care for ill children must provide:
 - 1. An area for each child to rest without disturbance from other activities; and
 - 2. A bed or crib for each child that must be a least six inches above the floor.
- B. A member of the staff shall supervise a resting child.