

LEECH LAKE BAND OF OJIBWE



LICENSING REQUIREMENTS FOR FAMILY AND GROUP CHILD CARE

Oct 2007

Disqualifications Revised 9/12/12
Caregiver Health 7/15/15

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FAMILY AND GROUP CHILD CARE LICENSING PROCESS

PROGRAM OPTIONS

A license holder may provide one or more of the following programs:

- A. A “day” program means a program operated during the traditional hours of 6:00 a.m. to 6:00 p.m.
- B. An “extended hour” program means a program operating before 6:00 a.m., after 6:00 p.m. and/or during the weekends.

OPERATIONAL GUIDELINES

A license to operate a family child care residence must be obtained from the Leech Lake Child Welfare Commission.

- A. The applicant shall be the person who will be the primary provider of care in the residence, present during the hours of licensed operation, and who shall be legally responsible for the operation of the residence.
- B. The applicant or applicant’s spouse must be an enrolled member of a federally recognized tribe
- C. Residence must be located within the Leech Lake Reservation boundaries.
- D. An application for license is complete when all forms are completed, signed and submitted with supplemental documentation needed for licensure to the Child Welfare Commission and the Child Welfare Commission receives all inspection, zoning, evaluation and investigative reports and other information required.
- E. A license holder is not allowed to provide or advertise for licensed child care until final approval by the Child Welfare Commission.
- F. A license holder shall not be issued a license to operate more than one child care residence.
- G. A license holder must post the license in a conspicuous place within the residence.
- H. A license holder must comply with all Leech Lake Band of Ojibwe Licensing Requirements for Family and Group Child Care

Agency Responsibilities

- A. The Leech Lake Child Care Services shall review and process all license applications.
- B. The Leech Lake Child Care Services shall conduct the initial license study of the residence, the investigation of caregiver qualifications, the renewal of license every two years and the routine on-site monitoring and health & safety inspections.
- C. A Health & Safety Officer or representative that is approved through the Child Welfare Commission will conduct the initial and renewal health & safety inspections.
- D. The Leech Lake Child Care Services shall process and make recommendations for license suspensions, probation and terminations.
- E. The Leech Lake Child Care Services shall keep all original files on record for a minimum of 3 years from the date of licensure.
- F. The Child Welfare Commission shall review and approve all recommendations for suspension, probation or termination.
- G. The Child Welfare Commission shall evaluate applications and approve or deny a licensure within 60 days after they have in its possession all completed and signed forms, reports, evaluations, information and documentation required from the applicant and all inspection, zoning and investigative reports required.
- H. If a recommendation cannot be made by the Child Welfare Commission within 60 days after all information has been received, the Leech Lake Child Care Services must inform the applicant in writing why a recommendation cannot be made.

License Terms – The license must indicate:

- A. Number and age groups of children who may receive care at any one time;
- B. The expiration date of the license and location of the residence;
- C. The Program Option for Child Care;
- D. The names and physical & mailing address of the provider; and
- E. That the provider is licensed under the Leech Lake Band of Ojibwe Licensing Requirements for Family and Group Child Care.

License Study and Monitoring Visits – The applicant shall give the Leech Lake Child Care Services and its representative's access to the residence for the following license study purposes.

- A. An initial and/or renewal health & safety inspection of the residence by an Environmental Health Specialist or Health & Safety Officer to determine compliance with the regulations set by the Leech Lake Health Division.
- B. Annual health & safety inspections to determine compliance with Leech Lake Band of Ojibwe licensing requirements.
- C. Quarterly monitoring visits to determine compliance with the Leech Lake Band of Ojibwe Licensing Requirements for Family and Group Child Care.

Access to Residence – The provider shall give authorized representatives of the Leech Lake Child Care Services access to the residence during the hours of operation to determine whether the residence complies with the standards. Access shall include:

- A. The residence occupied by children in care;
- B. Any adjoining land or buildings owned or operated by the applicant or provider in conjunction with the provision of child care and designed for use by the children in care;
- C. Non-interference in interviewing all caregivers and household members present in the residence on a regular basis and present during the hours of operation; and
- D. The right to view and photocopy records and documents.

Change in License Terms - The licensed holder must apply to the Child Welfare Commission and a new license must be issued before the license holder:

- A. Changes the ages and/or increases the number of children served;
- B. Changes the child care program options provided by the license holder; or
- C. Moves services to another residence
 - a. A new Health and Safety Inspection must be completed and approved before child care services continue.

Background Study - Criminal and human services background checks shall be completed when there is an addition of any adult or child age 13 years and over who is an employee, volunteer or will be regularly present in the center. Criminal background checks may be collected through any means as long the check is processed through the Bureau of Criminal Apprehension. Human Services background checks must be processed through the county in which the facility resides and the Leech Lake Family Services Department of the Child Welfare Program.

Non-Compliance - In the event a licensed child care provider is found to be in non-compliance with the Leech Lake Band of Ojibwe Licensing Requirements for Family and Group Child Care, they will be given a time period of no more than 30 days to become in compliance. (At risk situations do not apply). If the provider is still in non-compliance after the given time period, the following events will occur with approval of the Child Welfare Commission. A letter from the Child Welfare Commission will be sent to the provider indicating the terms of the negative licensing action.

- A. Probation – Provider may provide care and will be monitored for a period of time stated in negative license action letter
- B. Suspension – Provider shall not provide care for a period of time not to exceed three months.
- C. Termination – Provider file will be closed and provider shall not provide care. Provider shall immediately return license to the Leech Lake Child Care Services. Provider will not be able to re-apply for a child care license for a period of two years.

A license shall be suspended or made probationary if:

- A. The provider, or any other person living in the child care residence or present during the hours children are in care or working with the children, is awaiting trial for a crime listed in the disqualifications requirement.
- B. Persons under the influence of alcohol or illegal drugs are allowed in the childcare setting.
- C. Monitoring visits show a consistent pattern of non-compliance issues.

If the family child care is in non-compliance or under a probationary, suspension or termination status, they will not be eligible for provider services through the Leech Lake Child Care Services program. Notification will be sent to applicable agencies regarding the status of the program.

License Renewal – The following provisions must be followed when reviewing a license for renewal for as long as the provider maintains a license.

- A. The license holder must complete a new application process to determine continued compliance once every two years prior to expiration
- B. To determine compliance a Health & Safety Officer or other representative approved through the Child Welfare Commission must conduct a Health and Safety Inspection of the residence.
- C. Routine “Monitoring Visits” will be conducted of the residence to ensure continued compliance.
- D. The Leech Lake Child Care Services must submit the new application, a summary of the monitoring visits, and all complaints received during the period of licensure to the Child Welfare Commission to be used in determining continuation of the license.

Inactive License - A provider may request to temporarily stop providing care for up to 6 months of the licensing period. This inactive period may not exceed more than twelve months total within the same licensing period.

Return of License – When a provider stops giving care or if a license is suspended, terminated or not renewed, the provider shall return the license to the Leech Lake Child Care Services, stop all advertising and refrain from providing licensed care to children.

Variations – An applicant or license holder may request a variance. When reviewing a variance request, the Child Welfare Commission shall assess whether alternative methods are identified by the applicant or license holder to ensure the health, safety and protection of the children in care. A variance may be granted if:

- A. the applicant or license holder complies with all applicable laws and regulations;
- B. any variance to the safety provisions is approved by a certified inspector and alternative measures are identified to ensure the safety of the children;
- C. any variance of the provisions relating to sanitation, health, water, food and nutrition are approved by a health officer and alternative measures are identified to ensure the health of the children;

- D. any variance of the provisions relating to stairways, decks and sewage disposal are approved by a certified inspector and alternative measures are identified to ensure the health and safety of the children; and
- E. any variance to the “disqualification factor” must have clear and convincing evidence presented by the applicant or license holder that no threat or harm whatsoever will result to the children in care due to the granting of the variance. The Child Welfare Commission shall consider the nature of the issue and the amount of time which has elapsed without a repeat of the instance.

Variance Procedure – Request for variance must comply with and be handled according to the following procedures.

- A. An applicant or license holder must submit a written request for a variance to the Leech Lake Child Care Services. The request must include the following information:
 - 1. the sections which the applicant or provider cannot comply;
 - 2. the reasons why the applicant or provider needs to depart from specified sections;
 - 3. the period of time for which the applicant or provider requests a variance; and
 - 4. the specific equivalent alternative measures which the applicant or provider will provide so the health, safety and protection of the children in care are ensured if the variance is granted.
- B. An applicant or provider must submit to the Child Welfare Commission., written approval from a certified inspector of a variance request and the alternative measures identified to ensure the safety of the children in care when a variance of the fire safety provisions on physical environment is requested. These are means of escape, occupancy separations, heating and venting systems, locks and latches, interior walls and ceilings, extinguishers, smoke detection systems and electrical systems.
- C. An applicant or provider must submit to the Child Welfare Commission., written approval from a health officer of a variance request and the alternative measures identified to ensure the safety of the children in care when a variance on sanitation, health, water, food and nutrition are requested.
- D. An applicant or license holder must submit to the Child Welfare Commission., written approval from a building official of a variance request and the alternative measures identified to ensure the health and safety of the children in care when a variance is requested of the standards relating to stairways, decks and sewage disposal.

Agency Records – The Leech Lake Child Care Services shall maintain the following records for each provider for a period of three (3) years:

- A. A copy of the completed licensing and renewal application forms signed by the applicant and the Child Welfare Commission.
- B. The physical health reports on any adult giving care in the residence on a regular basis.
- C. Any written reports from a Health & Safety officer or business official.

- D. The initial and any renewal licensing study.
- E. Monitoring visits and evaluations
- F. Documentation of any variances and variance requests.
- G. Criminal and Human Services background check records on any person living or working in the child care residence.
- H. Documented complaints

Data Privacy – The Leech Lake Child Care Services or its representatives shall have access to provider records on children in care to determine compliance. The provider shall not disclose any records on children in care to any persons other than the parents of the child, the Leech Lake Child Care Services., its representatives and medical or public safety persons if information is necessary to protect the health and safety of the child.

Reporting to Agency - The provider shall inform the Leech Lake Child Care Services

- A. within 30 days, of any change in the regular membership of the household of the child care residence or the addition of an employee or volunteer who will regularly be providing care.
- B. immediately, of any suspected case of physical or sexual abuse or neglect.
- C. immediately, after the occurrence of a fire that requires the service of a fire department so the Child Welfare Commission may determine continued substantial compliance.
- D. immediately, after the occurrence of any serious injury or death of a child within the child care residence. A serious injury is one that requires treatment by a physician.
- E. Immediately, after any occurrence of a child bitten by an animal while in care.

Child Care Insurance Coverage - A provider is not required to carry insurance although they shall:

- A. Give written notice of the level of liability coverage to parents of all children in care prior to admission or when there is a change in the amount of insurance coverage. The provider shall maintain copies of the notice signed by the parents to indicate they have read and understood it, in the providers records on the residence

Mandated Reporting - All adult caregivers of the licensed providers' residence are mandated reporters by virtue of their jobs in working with children. Any caregiver, who knows or has reason to believe a child is being neglected or physically or sexually abused, shall immediately report the information to the Leech Lake Child Welfare Program – Family Services Department. Any reports made after 4:30 p.m. must be reported to the Leech Lake Tribal Police Department.

Leech Lake Child Care Services, Leech Lake Child Welfare Program – Family Services Department and the Leech Lake Tribal Police Department preserves the confidentiality of all records pertaining to child abuse, sexual abuse, mental injury, threatened injury and neglect in accordance with applicable state or local law. Consistent with this policy, a caregiver shall not undertake, on his or her own, to treat cases of child abuse and neglect.

CHILD CARE FOR CHILDREN WITH SPECIAL NEEDS

When a provider admits a child, the provider must ask the parent if the child has any diagnosed special needs and if so, what services the child is being provided.

If a child has an official Individual Family Service Plan or an Individual Education Plan, the child care provider is encouraged to be involved in activities of those plans.

EXTENDED HOUR PROGRAMS

A provider operating an extended hour program must comply with this part as well as with requirements of the Leech Lake Band of Ojibwe Licensing Requirements for Family and Group Child Care. The child care program plan between the hours of 6:00 p.m. and 6:00 a.m. must emphasize quiet activities. The outdoor activity area, outdoor activities and outdoor equipment requirement for children enrolled need not be provided if child care is exclusively provided between the hours of 6:00 p.m. and 6:00 a.m.

Meals and Snacks – The provider must ensure that a child who will be present during the hours of 6:00 p.m. to 6:00 a.m. has had or will be provided with an evening meal. The provider may choose to provide the evening meal or mandate that the parents provide a sack lunch meal for their child. A bedtime snack must be available for all children in attendance.

Furnishings – Each child enrolled in an extended hour care program must be provided with a crib, bed or cot with rest mat. A crib and two sets of clean linens must be provided for each infant and meet the standards set forth in the Leech Lake Band of Ojibwe Licensing Requirements for Family and Group Child Care. Infants must have a sleep area separate from the play and activity areas.

Bedtime Preparation – A child's bedtime must be scheduled in consultation with the parent. The provider must ensure that all children are put to bed in garments for sleeping as designated by the child's parent. In rooms used for sleep during the children's bedtime, a night light must be provided. The provider must ensure that all children have the personal effects needed to clean up and prepare for sleep. The effects must include an individual washcloth, towel, toothbrush, toothpaste and liquid soap. The provider must ensure that children are able to wash up and clean their teeth before bedtime and be assisted when necessary. To ensure privacy, school age boys and girls must be separated during washing and changing activities.

SECTION I CAREGIVER PRACTICES/QUALIFICATIONS/TRAINING

A. RATIOS AND CAPACITY

Principle

Adequate staffing ratios are important for providing quality care to children and retaining staff.

Why This Is Important

- Lower ratios allow for direct supervision and consistent care giving.
- Children benefit from interaction in smaller groups.
- Smaller groups and lower ratios reduce stress on individual caregivers.
- Close supervision ensures the physical safety of the children and allows for better maintenance of sanitation routines.
- It is important for children to build long-term, trusting relationships with caregivers. Having a small number of caregivers contributes to forming these relationships.

Standards

- Caregivers shall meet or exceed Leech Lake Licensing Requirements caregiver to child ratios and group size limits.
- Caregivers shall directly supervise infants, toddlers, and preschool children by sight and hearing at all times, even when the children are in sleeping areas.
- Caregivers shall know the whereabouts of the children in their care at all times.

Requirement – Age Definition, Staff Ratios and Group Size

- “**Infant**” means a child who is at least 6 weeks of age but less than 12 months of age.
- “**Toddler**” means a child who is at least 12 months of age but less than 30 months of age.
- “**Preschool**” means a child who is at least 30 months of age up to enrollment in the first day of kindergarten in the local school district.
- “**School Age**” means a child who is of age to be enrolled in the first day of kindergarten in the local school district. but less than 13 years of age.

FAMILY CHILD CARE

Type	Licensed Capacity	Adult Caregivers	Total children under school age	Age Restrictions
A	10	1	6	Of the total children under school age, no more than 3 shall be infants and toddlers. Of this total no more than 2 shall be infants.

SPECIALIZED INFANT AND TODDLER FAMILY CHILD CARE

Type	Licensed Capacity	Adult Caregivers	Total children under school age	Age Restrictions
B1	5	1	3	No more than 3 shall be infants.
B2	6	1	4	No more than 2 shall be infants.

GROUP CHILD CARE

Type	Licensed Capacity	Adult Caregivers	Total children under school age	Age Restrictions
C1	10	2	8	Of the total children under school age, no more than 3 shall be infants and toddlers. Of this total no more than 2 shall be infants.
C2	12	2	10	Of the total children under school age, no more than 2 shall be infants and toddlers. Of this total no more than 1 shall be infants.
C3	14	2	10	Of the total under school age, no more than 4 shall be infants and toddlers. Of this total no more than 3 shall be infants.

SPECIALIZED INFANT AND TODDLER GROUP CHILD CARE

Type	Licensed Capacity	Adult Caregivers	Total children under school age	Age Restrictions
D	9	2	7	Of the total children no more than 4 shall be infants

Requirement - Licensed Capacity

Capacity limits - Family child care providers shall comply with “Child/Adult Ratios & Age Distribution Restrictions”, which limits the total number of children and the number of children in each age category who are required to be present.

- A. Providers shall be licensed for the total number of children up to age 13 years old, who will be present in the residence at any one time. The licensed capacity must include all children of any caregiver when the children are present in the residence.
- B. Within the licensed capacity, the age distribution restrictions specify the maximum number of children, by age category that may be in care at any one time.
- C. Licensed capacity of the child care residence is limited by the amount of usable indoor space available to children.

Requirement - Supervision and Use of Substitutes/Volunteers

A licensed provider must be at least 18 years of age, be the primary provider of care in the residence and supervise children in care.

A substitute is a paid individual 18 years or older who provides care in place of the primary caregiver on an emergency or as-needed basis. The use of a substitute caregiver must be limited to a cumulative total of not more than 30 days in any 12 month period.

A volunteer is a non-paid individual 13 years or older who assists with care during times determined by the provider. A volunteer must be supervised by an adult caregiver at all times and may not be considered in the staff to child ratio requirements.

A helper is a paid individual age 13-18 years of age and assists with care on a regular basis. A helper may be used in place of a second adult caregiver when there are no more than 1 infant or toddler present.

B. CAREGIVER QUALIFICATIONS

Principle

Children must be cared for and directly supervised by knowledgeable, responsible and caring individuals.

Why This Is Important

- Children need to receive the highest quality of care available.
- Children thrive emotionally, physically, and developmentally in a high quality, nurturing childcare environment.

Standards

- The Leech Lake Child Care Services shall have a policy for conducting background checks consistent with the Indian Child Protection and Family Violence Prevention Act.
- Employment or character references shall be completed for all caregivers.
- All caregivers shall be physically able to care for children.

Requirement – Caregiver Qualifications Revised 7/15/15 see. Attachment

Age: An applicant for family child care shall be at least eighteen years old at the time of licensure.

Health: All caregivers shall be physically and emotionally able to care for children.

GENERAL – All staff that has direct contact with children must meet these general qualifications: It is recommended by Leech Lake Child Care Services that the physical health requirement change as follows.

- A. All adult members of the household, must have completed a physical examination upon initial license. Complete physicals are required every two years thereafter. The physical examination must indicate good health, any limitations in the ability to provide care and job responsibilities; up-to-date immunizations and that they do not present a risk of transmission of a reportable communicable disease.
- B. All adult members of the household, must have on file a negative Mantoux (TB) test upon initial license or within 20 days of hire. All are required to be retested every 5 years. The Cass Lake Indian Health Service Policy on Targeted Tuberculin Testing Plan Effective 5/11/15 will be followed. A positive mantoux test will require that physician recommendations are followed.
- C. The Child Care Services Program may, at its own discretion, require a physical examination and/or Mantoux test of any caregiver or adult household member if there are concerns of physical limitation or probable cause indicating a risk of transmission of a reportable communicable disease.
- D. The Child Care Services Program may, at its own discretion, require an evaluation by a Mental Health Specialist of any caregiver or adult household member that exhibits a mental health concern.
- E. In a case of previous chemical or alcohol dependency of the caregiver, the applicant must provide a notarized signed statement that they have been free of chemical and alcohol use problems for the past two years.
- F. The license holder shall immediately notify the Child Care Services Program if they are aware of any communicable or infectious disease in the child care program.
- G. All adult caregivers, household members and children over 13 years who are or will regularly be present in the residence shall complete a criminal and human services background check.
- H. All adult caregivers, household members and children over 13 years who are or will regularly be present in the residence must pass annual criminal and human services background checks.

- I. Be trained and certified in Cardiopulmonary Resuscitation, First Aid and the treatment of obstructed airways.

The Leech Lake Child Care Services may consult with a specialist in such areas as health, mental health, or chemical dependency to evaluate the abilities of the applicant to provide a safe environment for children. The Leech Lake Child Care Services and the specialist must evaluate each applicant individually. The Leech Lake Child Care Services must request a release of information from the applicant prior to assigning the specialist to evaluate the applicant. The licensing agency must tell the applicant why it is using a specialist to evaluate the applicant.

Requirement - Disqualifications

An applicant shall not be issued a license or the license shall be terminated, not renewed or suspended if the applicant, provider or any other person living in the day care residence or present during the hours children are in care or working with children:

- A. Has a conviction of, has admitted to, has been charged with and is awaiting trial for, or there is substantial evidence indicating that the person:
 - 1. has committed an act of physical or sexual abuse;
 - 2. has committed murder or manslaughter;
 - 3. has committed a felony relating to the endangerment of children;
 - 4. has or has had a case of major neglect according to a human service agency
- B. Abuses prescription drugs or uses controlled substances, or abuses alcohol to the extent that the use or abuse has or may have a negative effect on the ability of the provider to care or is apparent during the hours children are in care. Caregivers who have abused prescription drugs or have been dependent on controlled substances or alcohol, such that the use, abuse or dependency has had a negative effect on the ability to give care, was apparent during the hour's children are in care, or required treatment or therapy, must have 12 months of verified abstinence before licensure.
- C. Has mental illness and the behavior has or may have a negative effect on the ability of the provider to give care or is apparent during the hour's children are in care.
- D. Has had parental rights terminated or currently has parental rights suspended.
- E. Refuses to give written consent for the disclosure of criminal history records.
- F. Has had a child placed in foster care within the past 12 months and the Child Welfare Commission determines the reasons for placement will reflect on the ability of the provider to give care. A license may not be denied if the primary reason for the placement was due to a physical illness of the parent, mental retardation of the child, a handicap of the child, or for temporary care of an infant being relinquished for adoption.
- G. Has had a child placed in residential treatment within 12 months for emotional disturbance or antisocial behavior and the Indian Child Welfare Commission determines the reasons or placement reflect on the ability of the provider to give care.

The Leech Lake Child Care Services Licensing Coordinator will review disqualification factors. The applicant will be notified of their license status and time limit for which the disqualification will be void.

C. CAREGIVER TRAINING

Principle

Well-trained caregivers can provide a healthy and high-quality environment for the children and will provide for a professional attitude in their personal development.

Why This Is Important

- Caregivers are important people in the development of young children and should have all the tools necessary to provide children with optimal care.
- Training ensures caregivers have access to current knowledge and techniques.
- Training can be an opportunity for professional development and networking with other child care providers.
- Joint training with members of the community (physicians or fire safety officials, for example) can expand the level and quality of care for children.
- Child Care providers can support families as partners in the child's education and care.

Standards

- A written plan shall be in place to ensure the training of caregivers in all required areas.
- Caregiver training shall be documented.

Requirement – Agency Training Role

The Leech Lake Child Care Services shall ensure that:

- A. The center complies with required trainings specified in this part;
- B. The training files will be verified during monitoring visits,
- C. The required health and safety certifications training is available annually;
- D. Other applicable training is scheduled on weekends, evenings or at times and locations convenient to the majority of providers who are licensed through the Leech Lake Band of Ojibwe;
- E. Training information is distributed to each provider who operates a licensed child care on the Leech Lake Reservation at least twice per year.

Requirement – Initial and Ongoing Training

Health & Safety Certifications

The license holder, and all adult caregivers employed in the residence on a regular basis, will be expected to obtain the following training within 3 months of their first year of licensing to be in compliance with the licensing requirements.

- 1. Adult & Infant CPR
- 2. First-Aid
- 3. Basic Nutrition
- 4. Mandated Reporting
- 5. Fire Safety and Fire Extinguisher Use
- 6. Sanitation & Infection Control
- 7. Sudden Infant Death Syndrome

8. Child Car Seat Safety
9. Shaken Baby Syndrome

Additional Training

1. In addition to the required trainings (1-9), providers are expected to obtain a minimum of 12 additional training hours of their choice within their second year of licensing that relates to the field of early childhood.

Helpers who assist with care on a regular basis must complete eight (8) hours of training within 3 months after the date of initial placement.

SECTION II PROGRAM POLICIES

A. ADMISSION & ENROLLMENT

Principle

Established enrollment and admission policies ensure all families and providers are notified of information pertaining to the service provided.

Why This Is Important

- Written policies assure parents of the quality of care their child will receive and reduce misunderstandings between the childcare provider and family members.
- Written policies help improve family member and caregiver job satisfaction and morale.

Standards

- Written policies shall be established, implemented, maintained, available, and on file.
- Policies related to program operation shall be shared with parents of children in care.
- All caregivers, helpers and volunteers shall be trained in implementation of the policies.

Requirement – Admission Records

When enrolling a child, the provider and parents shall review the parent handbook. Parents must verify the review by signing the Parent Handbook signature page. The provider shall have the following information available for parents, the Leech Lake Child Care Services or it's representing agencies:

- A. The ages and numbers of children accepted
- B. The hours and days of operation
- C. Fees and financial arrangement policies
- D. Authorization for picking up child policy
- E. That parents have unlimited access to their children
- F. Accident and Injury Procedure
- G. Behavioral Policy that outlines positive methods of guidance appropriate to the ages of the children enrolled
- H. Missing Child Procedure
- I. Parent Visitation Policy
- J. Meals and snacks requirements with menu posted
- K. Sleeping and rest arrangements
- L. Policies for the care of ill children, disease notification procedures, and immunizations
- M. Policies for the administration of medication and additional products
- N. Disaster and emergency plans with posted drill log.
- O. Policy regarding transportation and field trip requirements
- P. Plans for a helper and a substitute for emergencies, vacations or holidays
- Q. The presence of pets in the residence
- R. Insurance coverage
- S. Grievance policy
- T. No smoking policy

- U. Telephone number of the Leech Lake Child Welfare Program and Leech Lake Child Care Services.

Requirement – Enrollment Records

The provider shall obtain the following information required from parents prior to admission of a child. Completed and signed admission and arrangements forms must be kept up-to-date and on file in the provider's home for each child for 3 years.

1. Name and birth date of the child
 2. Full name of parents
 3. Home address, work/school address and telephone number of where parents may be reached
 4. Name, address and telephone number of physician, dentist and hospital to be used for emergencies when parents cannot be reached
 5. Name, address and telephone number of persons to be notified, in case of emergencies when parents cannot be reached
 6. Names of all persons authorized to remove the child from the residence
 7. Enrollment dates and schedules
 8. Financial arrangements
 9. Insurance notification
 10. Parent Handbook review verification
 11. Special instructions from the parent obtained in writing and followed about toilet training, eating, sleeping or napping, allergies and any health problems
- B. The caregiver shall ask parents for information regarding the child's development, health and behavioral status.

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

The license holder shall not disclose a child's record to any person other than the child, the child's parent or guardian, the child's legal representative and the Leech Lake Child Care Services unless the child's parent or guardian has given written consent or as otherwise required by law.

B. NURTURING AND ENRICHING ENVIRONMENT

Principle

A nurturing and enriching child care environment stimulates learning across all domains of a child's development: social, emotional, cognitive, and physical.

Why This Is Important

- The quality of a child's surroundings can have a significant effect on his or her happiness and emotional well being.
- Children who are encouraged to respect the feelings and rights of others engage in positive relationships that build social competence.
- Healthy child development and brain growth requires human contact as well as interesting and stimulating surroundings.

Standards

- A written plan for daily activities shall be in place.

- The daily activities shall include the goals for children’s development and learning and the experience through which they achieve these goals.
- Daily routines shall be established to allow children to develop expectations and feel secure at the child care facility.
- Caregivers shall model respect for the feelings and rights of others, and provide an environment that respects gender, culture, ethnicity, family composition, and the special emotional, cognitive and development stages of the children in care.
- The child care setting shall include toys, activities and materials that are safe and appropriate for the various developmental stages of the children in care.
- All equipment in the setting shall be designed to support the abilities and developmental levels of the children served, with the adaptations made necessary to support children with disabilities.

Requirement – Activities and Equipment

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

- A. Be scheduled indoors and outdoors, weather permitting;
- B. Be appropriate to the developmental stage and age of the child;
- C. Include active and quiet activity; and
- D. Contain provider-directed and child-initiated activity.

The provider must have equipment in adequate quantities for the number and ages of children in care and carry out the activities specified in this part. Equipment may be new, used, commercial or homemade, as long as it is appropriate and safe for the ages of the children and activities for which it will be used.

Infant Activities and Equipment – The provider shall:

- A. Respond to the infant or newborn’s attempts to communicate.
- B. Provide freedom of movement to the infant or newborn during a large part of the waking day to the extent that safety and weather permits. The non-creeping child shall spend a large part of each day out of a crib or infant seat. The creeping infant shall have freedom to explore outside of the crib or infant seat.
- C. Give the infant or newborn opportunity to stimulate the senses by providing a variety of activities and objects to see, touch, smell, hear and taste.

- D. Provide activities for the infant or newborn that develops the child's manipulative and fine motor skills, self-awareness and social responsiveness.
- E. When bottle feeding, caregivers shall either hold infants or feeding them sitting up. Infants who are unable to sit shall always be held for bottle-feeding. The facility shall not permit bottle propping or infants carrying bottles throughout the day or night.
- F. Infants shall be placed to sleep on their backs unless otherwise directed by the child's physician to reduce the risk of Sudden Infant Death Syndrome (SIDS).
- G. Provide the following minimum equipment and materials for each infant or newborn:
 1. An infant seat or high chair
 2. A crib with a firm, waterproof mattress and no soft bedding materials such as comforters, pillows, fluffy blankets, or stuffed toys placed inside.

Toddler Activities and Equipment – The provider shall:

- A. Provide the toddler with freedom of movement and freedom to explore outside the crib or playpen.
- B. Talk to, listen to and interact with the toddler to encourage language development.
- C. Provide the toddler with large muscle activities and activities which develop the child's small muscle and manipulative skills.
- D. Develop and stimulate learning by reading stories to the child and looking at picture books together.
- E. Give the toddler opportunities to stimulate the senses by providing a variety of age appropriate activities and objects to see, touch smell, hear and taste.
- F. Provide each toddler with a mat, crib, cot, bed, sofa or sleeping bag.

Preschool Activities and Equipment – The provider shall:

- A. Encourage conversation between the child and other children and adults.
- B. Provide opportunity to play near and with other children; provide time and space for individual and group play; allow for quiet time to talk or rest; allow for unplanned time and individual play time.
- C. Foster understanding of personal and peer feelings and actions and allow for the constructive release of feelings and anger through discussion and play.
- D. Give assistance in toileting and provide time to carry out self-help skills and provide opportunity to be responsible for activities such as putting away play materials and helping around the house.
- E. Provide opportunity for each child to make decisions about daily activities and to take credit for the consequences of decisions.
- F. Provide time and areas for age appropriate large muscle play.
- G. Provide learning, small muscle, manipulative, creative or sensory activities.
- H. Read stories, look at books together and talk about new words and ideas with the child.
- I. Provide each preschooler with a mat, bed, cot, sofa or sleeping bag.

School Age Activities and Equipment – The provider shall:

- A. Provide opportunities for individual discussion about the happenings of the day and planning for activities.
- B. Provide indoor and outdoor space (weather permitting) and opportunity for games, activities or sports using the whole body.

- C. Provide space and opportunity for individual rest and quiet time.
- D. Allow increased freedom as the child demonstrates increased responsibility.
- E. Provide opportunities for group experiences with other children.
- F. Provide opportunities to develop and expand self-help skills or real-life experiences.
- G. Provide opportunities for creative and dramatic activity, arts and crafts and field trips.
- H. Provide each school age child with a mat, bed, cot, sofa or sleeping bag.

For children with special needs who require special therapy, program or behavior guidance, the parent, physician or therapist shall provide and the caregiver shall follow written instruction for any special needs.

Requirement - Behavior Guidance

Caregivers shall give guidance to each child that helps the child acquire a positive self-concept, self-control and teaches acceptable behavior within the following parameters:

- A. The provider shall discuss methods of behavior guidance with parents at the time of admission
- B. Parent’s standards shall be considered by the provider within the context of this part when guiding behavior of a child.
- C. Behavior guidance used by caregivers must be constructive, positive and suited to the age of the child.
- D. Methods of intervention, guidance and redirection must be used.

Requirement – Prohibited Action

The following shall apply to all caregivers when guiding behavior in children:

- A. No child shall be subject to corporal punishment or emotional abuse.
“Corporal punishment” means the non-accidental infliction of physical pain on a child by a caregiver. Corporal punishment includes, but is not limited to; rough handling, shoving, hair pulling, ear pulling, shaking, slapping, kicking, biting, pinching, hitting and spanking.
“Emotional abuse” means the infliction of verbal or psychological abuse on a child by a caregiver. Emotional abuse includes, but is not limited to, name calling, ostracism,

- shaming, derogatory remarks about the child or child’s family and threats that threaten, humiliate or frighten the child.
- B. Food, light, warmth, clothing and medical care shall not be withheld from the child.
- C. Discipline shall not be delegated to another child.
- D. The separation of a child from a group to guide behavior must be appropriate to the age of the child and circumstances requiring the separation.
- E. An infant or toddler shall not be separated from the group for disciplinary reasons.
- F. A child shall not be separated from the group for a period longer than ten minutes.
- G. A child separated from the group must be placed in an area or separate room that is well-lighted, free from hazards, ventilated and open to view of caregivers.
- H. No child shall be placed in a locked room to separate the child from the group.
- I. If toilet training is undertaken, the provider and the parent shall cooperatively develop a plan for the timing and method to training. A child shall be offered many opportunities for toileting. No child shall be punished for toileting accidents.
- J. No child shall be physically restrained by bonds, ties or straps for disciplinary purposes.
- K. If a child must be restrained for medical reasons, that restraint should occur in accordance with the instruction of the child’s physician and/or practitioner and permission of the parent.

Requirement – Parental Grievance Policy

The license holder shall develop policies and procedures for parents to report

- A. Suspected child maltreatment
- B. Complaints about the operation of the child care program.

The policies and procedures must include the telephone numbers of the local tribal and county child protection agencies for reporting suspected maltreatment, the County Human Services, Leech Lake Tribal Police and the Leech Lake Child Welfare Program – Family Services Department.

The policies and procedures must be provided to parents of all children at the time of enrollment in the child care program and must be made available upon request.

Requirement - Meals and Snacks

Well-balanced meals and snacks must be offered daily by following the guidelines below.

- A. Food served during the day must include servings from each of the basic food groups.
- B. The provider shall follow written instructions obtained from the parents, at the time of enrollment, on each child’s special diet or food needs. Parents shall be consulted about special food preferences.
- C. Flexible feeding schedules must be provided for infants and toddlers, and the infant or toddler’s usual diet and feeding schedule must be followed.

Feeding Schedules

- A. The caregiver shall provide nutritious meals according to a written plan.
- B. The caregiver shall ensure that:
 - 1. children in care for 8 and fewer hours shall be offered at least one nutritious meal and two nutritious snacks or two meals and one snack;
 - 2. children in care for 9 and more hours shall be offered at least two meals and two snacks or three snacks and one meal;
 - 3. a nutritious snack shall be offered to all children in midmorning and in mid-afternoon if caregiver is offering two snacks;
 - 4. children shall be offered food at intervals not less than 2 hours apart and not more than 3 hours apart unless the child is asleep.
- C. Caregivers shall feed infants on demand unless the parent provides written instructions otherwise.

C. EMERGENCY AND EVACUATION

Principle

Written policies and procedures assure that the provider, children and all parties are prepared should an emergency arise.

Why This Is Important

- Having a written procedure causes less confusion and prevents injury.
- Established policies for emergency situations and evacuation ensure the safety and well-being of all persons in the childcare setting.

Standards

- The childcare setting shall have and post emergency plans and procedures appropriate for the program, addressing potential disasters such as fire, blizzard, tornado, etc.

Requirement – Accidents, Emergencies and Evacuation

A plan must be in place and on file, in the event of an emergency that might take place in the residence or while on a field trip. The child care setting shall have:

- A. posted emergency plans and procedures appropriate for the program, addressing potential disasters such as fire, blizzard, tornado, etc.
- B. emergency phone numbers readily available. The numbers must be those of:
 - the local fire department, police department, emergency transportation and poison control center.
 - the parents, parent's preferred hospital, physician and dentist.
 - two emergency contact persons for each child if parent can not be reached.
 - the poison control center that shall be called immediately in case of a poisoning.
- C. permission slips, signed by parents or legal guardians, for emergency transport to health care facilities for the provision of emergency care.
- D. permission for emergency treatment.
- E. individual plans for children with special health care needs, including allergies, developed by that child's physician.
- F. a minimum of two unobstructed exits leading to safe, open areas.
- G. approved, properly maintained, multipurpose fire extinguishers, appropriate for the size of the home and caregivers shall be trained on their operation.
- H. an appropriately stocked first aid kit that is easily accessible to caregivers at all times, including during field trips and while transporting children. At a minimum the first aid kit shall include: emergency plans, disposable gloves, band-aids and bandages, tape, sterile gauze pads, roll gauze, scissors, emergency numbers, first aid resource guide and an insect sting kit.

- I. an appropriately stocked disaster kit that is easily accessible to caregivers at all times, including during field trips and while transporting children. At a minimum the disaster kit shall include the following items for each person: 3 pack of water, 2400 calorie food bar, solar blanket & poncho. Additional items for disaster kit shall include: radio flashlight siren, utility knife, duct tape, emergency whistle, box of water purification tablets, wet wipes, Red Cross Emergency Instructions, first aid kit (listed above), light stick, pliers, pair of leather palm gloves and a box of waterproof matches.
- J. prior arrangements made for a substitute to provide care during emergencies.
- K. a designated area within the residence that children shall go to for cover in case of severe storms or tornado
- L. a designated area within the community that children and staff shall go to in the event an evacuation is necessary from the residence
- M. an operable battery flashlight and portable radio or TV available
- N. emergency evacuation procedures in place and posted prominently within the child care setting to evacuate children as a first priority in the event of a fire or other emergency.

- O. a written fire escape plan and a log of monthly fire and storm drills on file in the residence and specify:
 - 1. emergency phone numbers;
 - 2. a place to meet outdoors for roll call;
 - 3. smoke detector and fire extinguisher locations;
 - 4. plans for monthly fire and tornado drill sessions; and
 - 5. escape routes to the outside from all levels used by children. In a building with three or more dwelling units, enclosed exit stairs must be indicated.

Fire extinguishers must be serviced annually by a qualified inspector and monitored throughout the year by the Leech Lake Child Care Services. The name of the inspector must be written on a tag attached to the extinguisher.

A list of emergency numbers must be posted next to the telephone. If a 911 emergency number is not available, the numbers listed must be those of the local fire department, police department, emergency transportation and poison control center.

D. TRANSPORTATION

Principle

Children shall always be transported in a safe manner

Why This Is Important

- Motor vehicle accidents are the leading cause of death for children in the United States.

Standards

- The provider shall have a written policy to ensure safety and that proper procedures are followed.

Requirement - Policies and Procedures

- A. Only licensed drivers shall be allowed to transport children.
- B. Copy of all driver licenses shall be in provider's file.
- C. Automobile insurance shall be maintained to meet or exceed minimum state standards.

- D. Copy of insurance shall be in provider's file
- E. Written permission slip signed by a parent or recognized guardian shall be on file.
- F. Children shall be fastened in the vehicle in an age-appropriate restraint positioned and installed.
- G. Children shall be required to use safety belts or, for children under age 4, federally-approved and properly installed child passenger restraint systems (car seats).
- H. Children shall never be transported in the rear of a pick-up truck.
- I. Children shall never be transported in the front seat of a vehicle.
- J. Children shall never be left unattended in vehicles.
- K. Appropriate caregiver to child ratios shall be maintained during the transportation of children.
- L. Strict policies shall be developed to prevent persons under the influence of alcohol or illegal drugs from operating vehicles while transporting children.
- M. Vehicles shall be routinely inspected and maintained to ensure that all safety features are operational and documentation in file.
- N. There shall be no smoking in vehicles when transporting children.
- O. When children are driven in a private car or van, a second adult must be present when more than two children under the age of five are being transported.

SECTION III

SAFE AND HEALTHY ENVIRONMENT

A. BUILDING AND PREMISES

Principal

Children require a safe and healthy physical environment to eat, sleep, and play.

Why this Is Important

- A clean and maintained environment supports each child's physical, cognitive, emotional, and social development.
- Proper attention to the issues of safety and sanitation protects the health of children and caregivers and prevents injuries.
- Prevention strategies can help improve family member and caregiver job satisfaction and morale, and reduce the number and seriousness of injuries and illnesses
- Established childcare health and safety policies ensure the safety and well-being of all persons in the childcare setting.

Standards

- Guidelines shall be developed to assure facilities are safe, and meet tribal fire and safety regulations.
- A plan shall be in place to ensure routine maintenance, and sanitation procedures shall be conducted to keep the structure clean, sound, and in good repair.

Requirement – Physical Environment

Facility Floor Plan and Designated Areas – Indoor and outdoor space to be used for child care must be designated on a facility floor plan. This space must be exclusively used for child care during the hours of operation. The initial application for license must contain a floor plan of the residence. Precise scale drawings are not required. The plan must include:

- A. Dimensions and location of all areas to be used for the provision of child care;
- B. Planned use of each area; and
- C. Site and location of areas used for outdoor activity.

Indoor Space - The following guidelines must be met:

- A. A minimum of 25 square feet of usable indoor space is required for infants and toddlers.
- B. A minimum of 35 square feet of usable indoor space is required for preschool and school age children.
- C. Bathrooms, closets, space occupied by major appliances and space not used by children may not be counted as usable space. Space occupied by adult furniture, if used by children, may be counted as usable indoor space.
- D. Usable indoor space may include a basement if it has been inspected by a health & safety inspector and is free of hazard and meets the minimum exiting standards.
- E. Usable space, equipment, and exit arrangements shall be adequate for the number, ages, and abilities of the children.
- F. Areas occupied by children must be checked daily and prior to use by children, for hazards.

- G. The residence must have the required amount of smoke detector and carbon monoxide detectors and follow tribal guidelines regarding the installation and appropriate use.
- H. During construction or remodeling, children shall not have access to dangerous construction or remodeling areas within or around the residence.
- I. The child care setting shall have a minimum of two unobstructed exits leading to safe, open areas.
- J. Approved, properly maintained, multipurpose fire extinguishers, appropriate for the size of the home shall be readily available.
- K. An operable telephone must be located within the residence.
- L. An appropriately stocked first aid kit shall be present and easily accessible to caregivers at all times.

Means of Escape - From each room of the residence used by children, there must be two means of escape. One means of escape must be a stairway or door leading to the floor of exit. The other must be a door or window leading directly outside. The window must be able to be opened without special knowledge. It must have a clear opening of not less than a 5.7 square feet area and have a minimum clear opening dimension of 20 inches wide and 24 inches high. The window must be within 44 inches from the floor.

Outdoor Space - The following guidelines must be met:

- A. There must be an outdoor play space of at least 50 square feet per child in attendance, within residence boundaries or adjacent to the residence for regular use, or a park, playground or play space within 2,000 feet of the residence.
- B. Usable space and equipment shall be adequate for the number, ages, and abilities of the children.
- C. Outdoor play areas shall be checked daily for hazards, and prior to use by children,
- D. On-site supervision must be provided by a caregiver for children of school age when play space not within the boundaries of the outdoor space of the residence.
- E. Fencing is required if located adjacent to rail, traffic, water and machinery hazards.
- F. Area must be free of litter, rubbish, toxic materials, water hazards, machinery, unlocked or junk vehicles, human or animal wastes and sewage contaminants.

Heating and Venting Systems - The following heating and venting guidelines must be met:

- A. Stove and heater locations must not block escape in case of fire.
- B. All heating and venting systems require an outside ventilation system in accordance with codes used by the Leech Lake Health Division. Ventilation shall be provided to prevent accumulation of harmful odors and fumes.
- C. Outside doors and windows used for ventilation in summer months must be screened.
- D. Combustible items must not be located within 36 inches of a furnace or other heating source.
- E. Fireplaces, wood burning stoves, solid fuel appliances, space heaters, steam radiators and other potentially hot surfaces, such as steam pipes, must be protected by guards to

prevent burns. All fireplaces, wood burning stoves, space heaters, steam radiators and furnaces must be installed in accordance to NEPA regulations.

- F. The furnace, hot water heater and any workshop area must be inaccessible to children and separated by a door, partition or gate. There must be allowance for air circulation to the furnace.
- G. Sufficient heating and cooling shall be provided within the child care setting to maintain a temperature that will not cause harm to the children. An average of 68 to 72 degree Fahrenheit must be maintained in indoor areas used by children.

Stairways & Decks - All stairways must meet the following conditions:

- A. Stairways of three or more steps must have a handrail.
- B. Any open area between the handrail and stair tread must be enclosed with a protective guardrail. The back of the stair risers must be enclosed.
- C. Gates or barriers must be used when children between the ages of 6 months to 24 months are in care.
- D. Stairways must be well lighted, in good repair and free of clutter and obstructions.
- E. Decks, balconies or lofts used by children that are more than 30 inches above the ground floor must be surrounded by a protective guardrail.
- F. Wooden porches or decks must be free of splinters and coated with wood preservation, paint or constructed with treated wood.

Locks & Latches - Door locks and latches must meet the following guidelines:

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

Requirement – Pets

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

- A. parents are notified prior to admission of the presence & types of pets in the residence;
- B. children handle animals only with supervision;
- C. rabies shots and tags are current for all dogs and cats;
- D. pet cages are located and cleaned away from any food preparation, storage or serving areas;
- E. play areas are free of animal excrement not confined to pet cages;
- F. parents of a child whose skin is broken by an animal bite or scratch, are notified of the injury on the day the injury occurs; and
- G. the health officer is immediately notified whenever a child in care is bitten by an animal. The provider shall take reasonable steps to confine the animal. Notification shall be given to the animal's owner before any steps are taken to destroy the animal.

Requirement – Hazardous Materials

Access and exposure to hazardous materials shall be prevented as follows:

- A. Poisons, toxic materials, cleaning supplies, sharp or pointed objects, plastic bags, matches, flammable liquids, drugs of any kind, insecticides, guns, and other hazardous materials shall be stored and/or locked, covered, or removed so as to be inaccessible to children.
- B. All water hazards such as pools and permanent standing water, shall be enclosed with a fence, or otherwise safeguarded to ensure that they cannot be accessed without supervision. When using a swimming pool or beach, an individual trained in CPR & first aid must be present.
- C. Electrical outlets accessible to children shall be covered with child-resistant safety plugs.
- D. Paint on both interior and exterior premises shall not be peeling and be free from hazardous quantities of lead.
- E. Smoking is prohibited on the premises where children will be cared for.
- F. Alcohol consumption shall be prohibited on the premises when children are present.

Requirement – Electrical Services

The following electrical guidelines must be met:

- A. All electrical receptacles accessible to children under first grade must be tamperproof or shielded when not in use.
- B. All major electrical appliances must be properly installed, grounded and in good working order.
- C. Extension cords shall not be used as a substitute for permanent wiring. Extension cords and flexible cords shall not be affixed to structures, extended through walls, ceilings, floors, under doors or floor coverings nor be subject to environmental damage or physical impact.
- D. Electrical wiring must be sized to provide for the load and be in good repair.

Requirement – Equipment

Equipment shall be maintained to reduce the possibility of injury as follows:

- A. Materials, toys, and furnishings shall be non-toxic, safe, age appropriate, durable, and maintained in good condition.
- B. The layout and maintenance of all indoor equipment and surfaces shall be carefully selected to minimize the possibility of injury to children.
- C. Equipment shall be stored in a safe and orderly fashion when not in use.

- D. Cribs, cradle boards and/or infant sleep equipment shall keep the infant safe from the dangers of suffocation, and will not allow a child to either fall, become entrapped, or having clothing tangled on protrusions.
- E. Playpens shall not be used for sleeping
- F. No child shall sleep on a bare, uncovered surface. Seasonally appropriate covering, such as sheets or blankets that are sufficient to maintain adequate warmth, shall be available and shall be used by each child below school age.
- G. Children shall not share bedding. Related children may share sleeping arrangements upon parental approval. Each item of sleep equipment (sheets, blankets, pillows, etc.) shall be assigned to an individual child and shall be used only by that child while he/she is enrolled in the facility. Each mat, cot, or crib mattress shall be covered with the child's individual sheet for exclusive use by that child.

B. INFECTION CONTROL

Principal

Proper policies and practices significantly reduce the spread of disease and ensures a healthy and safe child care environment.

Why This Is Important

- Many illnesses can be spread from person to person, particularly among young children in-group care where diapers, drooling, and frequent hand to mouth behavior increase the likelihood of disease transmission.
- Young children may be more vulnerable to certain vaccine-preventable diseases. Child care can provide a service by identifying children who need health services and referring them to receive required immunizations, appropriate health examinations, and other health services in the early years of life.
- Poor food preparation practices can lead to contamination and disease.
- Caregivers who are physically and emotionally healthy are likely to provide a higher quality of care to children.
- Children with more than mild infectious diseases can pose a safety hazard to other children by requiring a disproportionate amount of the caregiver's attention.

Standards

- Staff and helpers shall be trained in the policies regarding infection control.
- Policies must address the importance of sanitation and the operable condition of the residence and equipment.
- Policies must address the importance of children and caregiver health to ensuring a healthy and safe child care environment.
- A written policy for determining inclusion, exclusion, and dismissal of ill children shall be implemented.
- A written plan shall be in place for caring for an ill child.
- A written plan shall be in place addressing medication administration.

Requirement - Immunizations

Children receiving care shall be age-appropriately immunized in accordance with Indian Health Service (IHS) or the State Public Health Agency recommendations upon enrollment.

Immunization records must be kept current. The provider shall request, update and keep on file the dates of immunizations received by a child in regular attendance at the residence as follows:

1. for an infant, every six months;
2. for a toddler, annually;
3. for a preschool child, every 18 months; and
4. for a school age child, every three years.

Tribes may exempt:

1. Children whose parents or guardians object to immunization on religious grounds.
2. Children whose medical condition requires that immunizations not be given.

Requirement - General Sanitation

The following sanitary procedures must be used to reduce the spread of communicable disease.

- A. Any surface contaminated by body fluids (saliva, mucus, vomit, urine, stools, or bloods) shall be cleaned and disinfected immediately, and caregivers shall use universal precautions, including gloves, when cleaning contaminated areas.

- B. Toilet areas, including sinks, countertops, faucets, handles doorknobs, toilet bowls, toilet and seats, shall be cleaned immediately when soiled, or at least daily. Residence must have operable toilet facilities that conform to local septic system ordinances.
- C. Potty chairs and changing tables shall be cleaned and disinfected after each use.
- D. Floors shall be cleaned when soiled or at least daily. Carpets and rugs shall be shampooed when soiled and vacuumed at least daily.
- E. Toys shall be cleaned when soiled or at least weekly.
- F. Toys that children can place in their mouths shall be cleaned and disinfected after each use.
- G. Bedding and blankets must be washed weekly and when soiled or wet.
- H. The residence shall provide liquid hand soap, toilet paper and facial tissues and make them accessible to children.
- I. Separate towels, washcloths, drinking cups, combs and other personal articles must be used for each child.
- J. Garbage and rubbish shall be removed from rooms where children and adults will be present and stored in a closed container that prevents access by children, and animals including rodents, and insects.

Requirement - Diapers

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

- A. Diapers and clothing must be changed when wet or soiled.
- B. An adequate supply of clean diapers must be available for each child and stored in a clean place inaccessible to children.
- C. If cloth diapers are used, parents must provide a change of the outer plastic pants for each diaper change. Cloth diapers, except those supplied by a commercial diaper service, and plastic pants, if supplied by parents, must be labeled with the child's name.
- C. For disposable diapers, a covered diaper disposal container must be located in the diaper changing area and lined with a disposable plastic bag. The container must be emptied when full, and at least daily.
- D. Diapering must not take place in a food preparation area.
- E. The diaper changing area must be covered with a smooth, nonabsorbent surface. If the surface is not disposable, it must first be washed with soap and water to remove debris and then disinfected with a solution of at least two teaspoons of chlorine bleach to one quart of water after each diapering.
- F. Single service disposable wipes or clean disinfected cloths must be used for washing a soiled child before diapering.
- G. Cloth diapers, except those supplied by a commercial diaper service, plastic pants and soiled clothing must be placed in a plastic bag after removal and sent home with the parent daily.

Requirement - Food Service Sanitation

The following procedures shall be followed:

- A. Food preparation areas shall be separate from eating, play, toilet, bathroom, diaper changing areas and areas where animals are kept.
- B. Food preparation areas, including countertops and tabletops, shall be cleaned and disinfected, before and after each use.
- C. Dishes, highchair trays and food service utensils shall be cleaned after each use.
- D. There shall be separate basins/sinks for diaper changing cleanup and the cleaning of food service utensils.
- E. Dishes and food service utensils shall be allowed to air dry and stored in a manner that preserves their clean/disinfected status.

Requirement – Universal Precautions

Spills of body fluids (i.e., feces, blood, saliva, nasal discharge, eye discharge and injury or tissue discharges) shall be cleaned up immediately, as follows:

- A. For spills of vomit, urine and feces, floors, walls, bathrooms, tabletops, toys, kitchen countertops and diaper changing tables shall be cleaned and disinfected.
- B. For spills of blood or blood-containing body fluids and injury and tissue discharges, the area shall be cleaned and disinfected. Gloves shall be used in these situations unless the amount of blood or body fluid is so small that it can easily be contained by the material used for cleaning.
- C. Persons involved in cleaning contaminated surfaces shall avoid exposure of open skin sores or mucous membranes to blood or blood-containing body fluids and injury tissue discharges by using gloves to protect hands when cleaning contaminated surfaces.
- D. Mops shall be cleaned, rinsed in sanitizing solution and then wrung as dry as possible and hung to dry.
- E. Blood-contaminated material and diapers shall be disposed of in a plastic bag with a secure tie.

Illness may be spread in a variety of ways, such as by coughing, sneezing, direct skin-to-skin contact, or touching an object or surface with germs on it. Infectious germs may be contained in human waste (urine, feces) and body fluids (saliva, nasal discharge, tissue and injury discharges, eye discharges, and blood). Since many infected people carry communicable disease without having symptoms, and many are contagious before they experience a symptom, staff need to

protect themselves and the children they serve by carrying out, on a routine basis, sanitation and disinfection procedures that approach every potential illness-spreading condition in the same way.

Education of staff regarding cleaning procedures can reduce the occurrence of illness in the group of children with whom they work.

A solution of ¼ cup of household liquid chlorine bleach in one gallon of tap water prepared fresh daily is an effective surface disinfectant for environmental surfaces and other inanimate objects that have first been thoroughly cleaned of organic soil.

Gloves are used primarily when people know or suspect they may contact blood, blood-containing body fluids, or tissue or injury discharges. The fluids may contain the viruses that transmit HIV and hepatitis B.

(From Caring for Our Children: National Health and Safety Performance Standards: Guidelines for Out-of-Home Child Care Programs (1992), page 75)

Requirement –Handwashing

Thorough hand washing is one of the most important and effective means for preventing disease transmission. The following procedures shall be implemented:

- A. All caregivers, helpers, volunteers, and children shall wash all parts of their hands for at least 10 seconds with soap and water and rinse them with water.
- B. All caregivers, helpers, volunteers, and children shall wash their hands:
 - 1. before and after eating, before and after giving medication, and after participation in outdoor play;
 - 2. after diapering, toileting, cleaning, and the handling of body fluids, even if gloves are used;
 - 3. after handling animals, animal waste, or animal cages.
- C. Paper towels shall be used to dry hands and turn off faucet handles. Only one individual shall use each paper towel once.
- D. Providers must monitor hand washing and assist a child who needs assistance.
- E. In sinks and tubs accessible to children, the water temperature must not exceed 120 degree Fahrenheit to prevent children from scalding themselves while washing.

Requirement – Food Safety

Food shall be stored, prepared, and served in a manner that prevents the spread of disease.

Water

- A. Safe drinking water shall be accessible to children while indoors or outdoors and shall be dispensed by personal water bottle, drinking fountain, or cups labeled for individual use by each child.

- B. Water from privately-owned wells must be tested annually by a Minnesota Health Department certified laboratory for coliform bacteria and nitrate nitrogens to verify safety.
- C. The provider shall file a record of the test results with the Indian Child Welfare Commission. Retesting and corrective measures may be required if results exceed drinking water standards or where the supply may be subject to off-site contamination.

Food Handling

- A. Food shall be properly wrapped and handled.
- B. Food that has been served to the child and not eaten shall be discarded by placement in containers with tight-fitting lids that are emptied at least daily.
- C. Foods brought from home shall be labeled with the child name, date, and the type of food, and shall not be shared with other children unless intended for that purpose.
- D. Warm food should be maintained and served at a temperature not less than 140 F.
- E. Cold foods shall be maintained refrigerated at a temperature of 40 F or lower in the refrigerator and 0 F or lower in the freezer.

Bottle Feeding and Breastfeeding

- A. Breast milk (if not frozen) and prepared bottles of formula shall be kept refrigerated until immediately before use.
- B. Frozen breast milk shall be thawed under cold running water or in the refrigerator.
- C. When there is more than one bottle-fed infant, bottles of breast milk and formula shall be labeled with the child's name and shall be used only for the intended child.
- D. Breast milk or formula shall be warmed in a pan of hot, not boiling, water for 5 minutes. The bottle should then be shaken, and the milk temperature tested before feeding.
- E. Microwaves shall never be used to heat bottles of formula or breast milk.
- F. Any contents remaining in a bottle of formula or breast milk after feeding shall be discarded.
- G. Prepared bottles of formula shall be discarded after 24 hours if not used. An open container of ready-to-feed or concentrated formula shall be covered, refrigerated, and discarded after 48 hours if not used.
- H. Unused, expressed breastmilk shall be discarded after 48 hours if refrigerated, or after 2 weeks if frozen.
- I. Individuals responsible for food preparation or service shall be free of contagious disease.
- J. Food, lunches and bottles brought from home must be labeled with the child's name and refrigerated when necessary. Bottles must be washed by hand after each use.

Choking Prevention

- A. Precautions against choking shall be taken when feeding infants and toddlers.

- B. Caregivers shall not offer foods to children under 4 years of age that are implicated in choking incidents (whole, hard, small, thick and sticky, smooth, or slippery). Examples of these foods are hot dogs (whole or sliced into rounds), whole grapes, hard candy, nuts, seeds, raw peas, hard pretzels, chips, peanuts, popcorn, marshmallows, spoonfuls of peanut butter, and chunks of meat larger than can be swallowed whole.

Requirement - Exclusion

A child in the providers care with any of the following conditions is a sick child and must be excluded from care. Reasonable exclusion criteria for ill children benefit all children in the child care group, their caregivers, and their parents. The provider must exclude a child:

- A. with a reportable illness or condition that a physician determines to be contagious and has not had sufficient treatment to reduce the health risk to others;
- B. with chicken pox until the child is no longer infectious or until the lesions are crusted over;
- C. who has vomited two or more times since admission that day;
- D. who had three or more abnormal, loose stools since admission that day;
- E. who had contagious conjunctivitis or pus draining from the eye;
- F. who has a bacterial infection such as streptococcal pharyngitis or impetigo and has not completed 24 hours of antimicrobial therapy;
- G. who has unexplained lethargy;
- H. who has lice, ringworm or scabies that is untreated and contagious;
- I. who has a 100 degree Fahrenheit auxiliary or higher temperature of undiagnosed origin before fever reducing medication is given;
- J. who has an undiagnosed rash or a rash attributable to a contagious illness or condition;
- K. who has significant respiratory distress;
- L. who is not able to participate in child care program activities with reasonable comfort;
- M. who requires more care than the program staff can provide without compromising the health and safety of other children in care.
- N. if keeping the child in care poses an increased risk to other children or adults in the child care facility, as determined by the caregiver or, if necessary, a local health official.

A child who becomes sick while in care must be supervised at all times and the parent called immediately.

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

The provider shall inform a parent of each exposed child, the same day the provider is notified a positive diagnosis has been made for a contagious illness or parasitic infestations. The provider shall notify the health officer and the Leech Lake Child Care Services of any suspected case of reportable disease.

Requirement – Administration of Medicine

The following govern the administration of medicine by the provider to children in care:

- A. The provider must obtain written permission from the child's parent before administering medicine, diapering products, sunscreen lotions and insect repellents. Non-prescription medicine, diapering products, sunscreen lotions and insect repellents must be administered according to the manufacturers instructions unless there are written instructions for their use provided by a licensed physician or dentist.
- B. The provider must obtain and follow written instructions from a licensed physician or dentist before administering each prescription medicine. Medicine with the child's name and current prescription information on the label constitutes instructions.

Requirement – Caregiver Health revised 7/15/15

The following policies have been developed for maintaining and addressing issues related to health:

- J. All staff of the program must have completed a physical examination upon initial license. Complete physicals are required every two years thereafter. The physical examination must indicate good health, any limitations in the ability to provide care and job responsibilities; up-to-date immunizations and that they do not present a risk of transmission of a reportable communicable disease.
- K. All staff of program, must have on file a negative Mantoux (TB) test upon initial license. All staff are required to be retested every 5 years. The Cass Lake Indian Health Service Policy on Targeted Tuberculin Testing Plan Effective date 5/11/15

will be followed. A positive mantoux test will require that physician recommendations are followed. **Attachment HIS TTT plan 5/15**

- L. Child Care Services Program may, at its own discretion, require a physical examination and/or Mantoux test of any caregiver or members of the household if there are concerns of physical limitation or probable cause indicating a risk of transmission of a reportable communicable disease.
- M. The Child Care Services Program may, at its own discretion, require an evaluation by a Mental Health Specialist of any caregiver that exhibits a mental health concern.

ACKNOWLEDGMENTS

The U.S. Department of Health and Human Services' Child Care Bureau developed the document *Minimum Standards for Tribal Family Child Care Homes* that was incorporated into the document that is under this title: *Leech Lake Band of Ojibwe Licensing Requirements for Family and Group Child Care*.

The *Minimum Standards for Tribal Family Child Care Homes* include the headings of *Principle*, *Why This Is Important and Standards*. The headings of *Requirements* have been added to reflect the adoption of standards set by the Leech Lake Band of Ojibwe.

The *Minimum Standards for Tribal Family Child Care Homes* represents three years of consultation with Tribes, Tribal organizations and Tribal child care programs. To oversee the development of the standards, the Child Care Bureau convened the Tribal Child Care Standards Advisory Committee that included representatives from Tribal child care programs, the Child Care Bureau, the Indian Health Service, the Maternal and Child Health Bureau, the Head Start Bureau (American Indian Programs Branch), the American Academy of Pediatrics, and other health and child care organizations.

DOCUMENT SUMMARY

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (Public Law 104-193) requires that in lieu of any licensing and regulatory requirements applicable under State and local law, the U.S. Department of Health and Human Services shall develop minimum child care standards for Indian Tribes and Tribal Organizations receiving funds under the Child Care and Development Fund (CCDF). The law requires that the standards be developed in consultation with Indian Tribes and Tribal Organizations and appropriately reflect Tribal needs and available resources.

GUIDANCE

The Child Care Bureau, U.S. Department of Health and Human Services, has issued the *Minimum Standards for Tribal Family Child Care Homes* as guidance and is encouraging CCDF Tribal Lead Agencies to implement the standards.

TECHNICAL ASSISTANCE

The Child Care Bureau provides technical assistance to Tribal Lead Agencies regarding implementation of the standards. Cluster Trainings are conducted, giving Tribes the opportunity to identify their individual technical assistance needs.

FAMILY CHILD CARE

The standards in this document are specifically for family child care providers. The terminology and content are tailored to reflect the unique circumstances related to family child care homes. A separate document addresses standards for child care centers. While the two sets of standards are similar, the separate documents are designed to assist Tribal Lead Agencies' outreach and training efforts with providers.

MINIMUM STANDARDS

These standards represent the baseline from which all programs should operate to ensure that children are cared for in healthy and safe environments and that their basic needs are being met. Many Tribes may currently be exceeding the standards set forth in this document. Other may need to adopt the standards. We expect that CCDF Tribal Lead Agencies will have the option of using Tribal, State or local licensing or regulatory requirements, as long as the requirements meet or exceed the new minimum standards.

RELATIVE PROVIDERS

Consistent with the statutory provision related to the CCDF health and safety requirements, Tribal Lead Agencies have the option of exempting relative providers (i.e., grandparents, great grandparents, siblings living in a separate residence, aunt or uncles) from meeting the standards.