Child Care Guidelines

This information is provided to give the child care provider guidance about important items which are discussed and inspected during a Central District Health (CDH) inspection. It is not an all-inclusive document. The item numbers correspond to the inspection report. IDAPA 16.06.02 – Rules Governing Standards for Child Care Licensing are applicable to all child cares which are licensed or receiving Department subsidies (ICCP).

Child Care Guidelines
Age & Health of Provider / Supervision (1)
The owner or operator and all staff are responsible for the direct care, protection, supervision, and guidance of children through active involvement or direct observation. Provider must be 18 years old or older. Persons 16 or 17 may provide care if directly supervised by a provider. A caregiver must not work when ill as per Rules and Regulations Governing Idaho Reportable Diseases. All individuals at the facility who are thirteen (13) years of age or older, have direct contact with children, and/or who are regularly on the premises must complete and receive a Department criminal history and background check clearance. Documentation of this clearance must be on-site and provided to the inspector during the initial and annual inspection.

CPR/First Aid Training (2)
All providers, owners, and staff members who provide direct care to children are required to have a current certification in pediatric rescue breathing, infant-child CPR and pediatric first aid treatment from a certified instructor. If the facility provides transportation of children outside the facility at any time, persons that accompany the transportation must be currently certified in pediatric CPR/FA. Be sure to take a CPR and First Aid course which is approved for child care in Idaho.

Child-Staff Ratio (3)
Child to staff ratio must be adhered to during all hours of operation. Ratios are determined by a point system. Points are determined by the age of children. 12 points per staff member is the maximum. Zero to less than 24 months is equal to 2 points. 24 months to under 36 months is equal to 1 1/2 points. 36 months to under 5 years old is equal to 1 point. 5 years old to under 13 years of age is equal to a ½ point. Local jurisdictions (cities) which require child care licensing may have more stringent requirements.

Staff/Children Excluded When Ill (4)
Provide a written procedure that outlines what will be done if a child becomes ill while in your care. This procedure must address:
1. Keeping the child separated from the rest of the children to prevent spreading disease.
2. Not allowing children to attend if they have had diarrhea, vomiting, or a fever (101° oral, 102°rectal, 100° axillary (armpit), accompanied by behavior changes or other signs or symptoms of illness within a 24-hour period.
3. Notification of a parent or guardian.

According to IDAPA16.02.10 Rules and Regulations Governing Idaho Reportable Diseases, staff or children who are diagnosed with a day care restrictable disease must not attend a day care facility as long as the disease is in communicable form. Caregivers must follow IDAPA 16.02.10 080 Day Care Facility-Reporting and Control Measures.

Immunization Records (5)
Idaho Code 39-1118 requires that each child’s immunization record or reason for exemption is provided to the operator within fourteen (14) days of initial attendance. Provide information about immunizations to parents. Accurate and current records are required to be on the premises during all hours of operation.

An Immunization Record is a document confirmed by a licensed health care professional. Records that are produced or created by a child care management software such as Procare, Kingarootime, Kindertales, EZCare or a similar program do not meet the definition of an Immunization Record.

Go to this web page for the most current immunization schedule:
immunize.org/cdc/schedules/
Disaster and Emergency Planning and Communication (6)
Providers shall have documented policies and procedures for emergencies resulting from a natural disaster or a man-caused event that include and not limited to:

1. Evacuation, relocation, shelter-in-place, lock-down procedures, and procedures for communication and re-unification with families, continued business operational plan, and accommodation of infants, toddlers, children with disabilities, and children with chronic medical conditions.
2. Procedures for staff and volunteer emergency preparedness training and drills.
3. Guidelines for the continuation of child care services in the period following the emergency or disaster.

If you need assistance, contact a Child Care Health Consultant with IdahoSTARS by calling the Idaho CareLine 2-1-1. A functional telephone or cell phone is required. Parent or guardian must have access to the phone in case of an emergency. Post the name and address of the facility, 911, Idaho CareLine 2-1-1 and other emergency numbers for quick reference.

Centers, Group, and licensed Family Day Cares must be inspected by the local Fire Official or designee.

Fire extinguishers must be inspected annually.

- **Fire Extinguisher** - A minimum of one fire extinguisher (type 2A:10-BC)
- **Smoke Detector** - One for each sleeping area, hall-way, and on each floor level. Each one must have a test button.
- **Emergency Exits** - Adequate emergency exits are determined by the local Fire Official. No second story child care without an approved fire exit.
- **Unlicensed ICCP** - Providers must be in compliance with Fire Safety Standards in the Child Care Licensing Rules.

Fire Safety and Evacuation Plan (8)
A fire evacuation plan must include the staging area, exit locations, evacuation routes and fire extinguisher locations. Include a routine drill schedule.

Food Source/Food Thawing (9)

- Serve pasteurized milk and juice only
- No home canned foods, except jams or jellies
- No wild game, USDA approved meat only
- Do not thaw foods at room temperature
- Thawing Options:
  - In refrigerator (best option)
  - In cold running water
  - As part of cooking process
  - In microwave, then immediately complete cooking

Food Handling/Personal Hygiene (10)

- Cooking meat to proper temperatures.
- Avoid cross-contamination of food and food contact surfaces.
- Proper hand washing
- Use clean clothes or apron during food prep
- Unwrapped foods may not be re-served once plate is on the table.
- Minimize direct hand contact with food.
- Use serving utensils or gloves whenever possible to prevent hand contact with ready to eat foods.
Wash Hands Often:
- Before touching or preparing food
- Before putting on gloves
- After wiping nose
- After coughing into your hand
- After changing each diaper
- After using the toilet

Food Temperatures/Thermometers (11)
- Refrigerator must be equipped with an accurate thermometer, metal or plastic shielded.
  Keep the refrigerator colder than 41˚ F (38-40˚ F preferred)
- Foods must cool rapidly to below 41˚ F to prevent harmful bacterial growth
- Proper rapid cooling requires monitoring the temperatures (135˚ F to 70˚ F in 2 hours, then 70˚ to 41˚ F in the next 4 hours)
- Eggs must be refrigerated
- Perishable cold foods must be stored at 41˚ F or less
- Hot food must be cooked (or reheated) to 165˚ F before serving
- After cooking, hot foods must be kept at 135˚ F

Food Storage/Cross Contamination (12)
- Cooked foods are stored above raw foods. Store eggs, raw meat and poultry below ready-to-eat food.
- Keep food stored off the floor and protected from dust, flies, pets, water, and chemicals.
  Do not store under plumbing pipes.
- Food stored in refrigerators must be covered to prevent cross-contamination.

Food Contact Surfaces/Sanitizing (13)
Food contact surfaces must be kept clean (counters, tables, high chairs, cutting boards) and sanitized with a solution of chlorine 50-200 ppm or quaternary ammonium chloride 200 ppm. Obtain test strips to determine correct concentration. Have the correct test paper to determine the concentration of the sanitizer.

Sanitizing Solution Mixture
Mix 1 tablespoon bleach in each gallon of warm water. Use unscented liquid bleach, such as Clorox, Purex, etc.

**Note:** Mix 3/4 teaspoon to 1 quart of water. This dilution will give you the maximum amount (200 ppm) of desired sanitizer concentration. This mixture is for bleach with 5.25% - 6% sodium hypochlorite. Read the information about the active ingredient on the container label.

Other Sanitizing Cleaners
Chemicals and sanitizing cleaners other than bleach are allowed ONLY if the label states it is a sanitizer or disinfectant suitable for food contact surfaces and registered with the EPA. **Label directions for use must be followed.**

- Cutting boards, knives, counters, pots and pans, plates, bottles, cups, forks, and spoons must be clean and sanitized, in good repair, smooth, and easy to clean.
- Refrigerators, cabinet shelves, sinks, dish machines, utensil handles, must be clean, in good repair, smooth and easy to clean.
- Wiping cloths, dishcloths used for tables, counters, high chairs, etc. are rinsed in a sanitizing solution before and after use.
An option is to use a spray bottle of sanitizing solution to wet the wiped object. 

**Spray Bottles:** Two (2) recommended: One for the kitchen and one for the bathroom/diaper changing areas. 

**Label the bottles as to contents and intended area of use. Renew bleach spray bottle contents weekly.** 

See more information in this manual about Bleach Solutions, and Disinfection.

**Dishwashing/Sanitizing (14)**

Dishes, glasses, utensils and silverware shall be washed either in a dishwasher with a sanitizing dry cycle, or by the four-step method.

A. **Use one of the Health District approved dishwashing methods.**
   - It is best if a separate sink or basin is used for each step #1, #2, and #3. 
   - Rinse or scrape food off the item to be washed.
   1. Wash the item in hot soapy water.
   2. Rinse the soap off with clear hot water.
   3. Sanitize the item by soaking in a solution of regular unscented liquid bleach and warm water. 
      - Soak at least 10 seconds. See Food Contact Surfaces/Sanitizing (above).
   4. Air dry the item on a drain rack.

B. **An automatic dish machine may be used.**
   1. A home-style dishwasher that has a heat drying or sani-cycle is acceptable. The items must be run through the complete washing cycle.
   2. Larger child care facilities should consider a commercial dishwasher with a sanitizing rinse. These units have a much faster cycle allowing dishes to be reused in minutes.

**Utensil Storage (15)**

Protect clean utensils, glasses, dishes, pots and pans, from contamination.

Do not store under sinks or on the floor. Utensil trays and cabinets must be clean. Face utensil/handles in one direction. 

Drawers holding sharp utensils (knives) should be secured with child-proof latches.

**Medicines/Hazardous Substances (16)**

**Store All Chemicals and Medicines - Out of Reach of Children - Or in a Locked Cabinet.**

A. **Chemical / Toxic / Poisons Storage**
   - Bleach, cleaners, disinfectants, plant fertilizers, insect sprays, paint thinners, or other chemicals must be stored away from foods and utensils.

B. **Medicine Storage**
   1. Store medicines out of reach of children.
   2. Refrigerated medicines: Place in a container with a lid or in a Ziploc bag. Mark container **Medicines**.
   3. Medicines in the kitchen must be in a container marked **MEDICINES**.
   4. Vitamins must be also stored out of reach of children.

Cleaning materials, detergents, aerosol cans, pesticides, health and beauty aids, poisons, and other toxic materials shall be stored in their original labeled containers and shall be used according to the manufacturer’s instructions and for the intended purpose. They shall be used only in a manner that will not constitute a hazard to the children. When not in actual use, such materials shall be kept in a place inaccessible to children and separate from stored medications and food. Any item clearly stating “keep out of reach of children” must be stored in locked cabinets or out of reach of children.

Bio-contaminants are to be handled properly and safely. Mold, vomit, and diarrhea are examples of bio-contaminants.

All arts and crafts materials used in the facility shall be non-toxic. There shall be no eating or drinking by children or staff during use of such materials. **Poisonous or potentially harmful plants** on the premises shall be inaccessible to children. See the section about poisonous plants in this manual.
Garbage Covered/Removed (17)
Garbage and disposable diapers must be in covered containers or closed garbage bags. They should be taken to an outside container daily for weekly removal. Use plastic liners in all trash receptacles. Garbage/trash needs to be stored where it is inaccessible to children and cannot attract vermin.

Plumbing/Sewage Disposal (18)
Water supply pipes, faucets, or hoses below a sink rim, in a drain or sewer may create a cross-connection between drinking water and dirty water.

A. Proper backflow prevention should be present for things such as:
   1. A hose attached to a sink faucet
   2. A hose filling a wading pool
   3. An underground landscape/lawn sprinkler system
   4. A water softener drain line

B. Plumbing must be in good condition and comply with local plumbing code.

Sewage must be properly disposed with no overflows or surfacing which may cause contamination. An approved sewage disposal system is required such as a municipality's sewage treatment system or health department approved septic system.

Water Supply/Well Sample (19)
- The water must be from a Health District approved source and be free of contamination. Our office will collect a sample of the water and inspect the visible portion of the well for facilities with 24 or less individuals.
- If there are 25 or more persons in the facility, the owner must comply with the Idaho Drinking Water Rules.
- The provider is responsible for complying with the sampling requirements and paying for the laboratory for the water sample testing.

Hand Washing Facilities (20)
- A hand sink needs to be close to the diaper changing area.
- A separate kitchen hand sink may be required in larger childcare facilities for hand washing prior to preparing foods.
- The kitchen sink is not to be used for hand washing after changing diapers.
- A hand sink must be provided where care givers and children can wash their hands after using the restroom, before eating, and at other times as needed.
- The sink(s) used for hand washing must have hot and cold running water through a mixing faucet. Soap and paper towels must be present. (Soft or liquid soap is recommended.)

Diaper Changing Facilities (21)
- The changing area cannot be in the kitchen or on counters or tables used for food preparation or dining.
- A smooth non-absorbent diaper changing surface is required.
- Plastic / vinyl mats or pads are acceptable if you use the smooth side.
- Dirty diapers and soiled clothing must be stored to prevent access by children.
- The employee is to sanitize the diaper changing surface after each diaper change.
- The sanitizer for the diaper changing area is recommended to be a stronger bleach water solution (1-3 Tablespoons per 1 Quart water according to NAEYC Accreditation program 2011).
- Use disposable gloves.
- The employee is to wash his/her hands between each diaper change.
- The child’s hands should also be washed.
- Disposable / cloth diapers: There are no rules requiring a particular type of diaper. The Health District recommends disposable diapers to lessen contamination of surfaces and hands. Disposable diapers may be required to control an illness outbreak.
- See the section on diaper changing in this manual that addresses proper disinfection.
Firearms Storage (22)
Firearms must be in a locked container or other container inaccessible to children. Ammunition is to be in a separate locked container. This applies when children are present.

Water Hazards (23)
Pools, hot tubs and other bodies of water must be inaccessible to children. A fence, 4 feet high (minimum) with a self-locking gate is required to prevent unsupervised child access.

Smoking/Alcohol Consumption (24)
Use of alcohol or smoking is prohibited during operating hours when children are present. Tobacco related products like chew and pouches are not allowed.

Sleeping, Play Areas, & Restrooms Clean (25)
Sleeping cots, blankets and mats are kept clean and sanitized regularly. See pages 24-25 and 102 for information about proper sanitization and disinfection. Recommendations:

- Assign one set of bedding per child. Keep bedding separated during storage by folding before stacking or placing each blanket in an individual cubby, container or plastic bag.
- Cribs which are constructed after June 28, 2011 are acceptable.
- Do not store bedding directly on the floor.
- Keep play areas clean.
- Vacuum carpet daily.
- Toys, tables, and chairs should be washable and sanitized frequently.
- Equipment, materials, and furnishings shall be sturdy and free of sharp points and corners, splinters, protruding nails and bolts, hazardous small parts or lead based paint or poisonous materials.

Toilet Room
Restroom(s) are to be clean and ventilated. Carpet should not be immediately next to the toilet or urinal. Toilet training seats/potties are to be kept clean and should be sanitized after each use. Do not wash potty seats in the dishwasher or dishwashing sinks.

Heat, Light & Ventilation (26)
Adequate heat, light, and ventilation are required. Screened doors and windows are required when open. Heat producing equipment like portable room heaters and wood stoves must be maintained and used according to the manufacturer’s instructions. Wood stoves must not be accessible to children.

Outdoor Play Areas (27)
Maintain areas free from hazards, such as window wells, garden tools, lawn mowers, gas grills, ATVs, motorcycles, and animal waste. Devices or equipment such as air conditioning units when accessible to children may also present a hazard. Play equipment must be safe, in good condition, and anchored. The area should be easily supervised.

Animal, Pet Health/Vaccinations (28)
Animals must be in good health, friendly, and vaccinated. Vaccine records are to be available upon request.

General Safety (29)
Electric cords, outlets, and lamps must be in good condition to prevent injury. Cords for blinds must be out of reach. Keep electric outlets covered. Prevent stairway access to children 3 years of age and less. Railings for balconies and stairs must meet the building code requirements. Store fueled equipment and repair equipment inaccessible to children. Choking hazards such as balloons, and objects less than one (1) inch in diameter, may not be accessible to children 3 years of age or less.

General Safety includes environmental safety. Building and physical premises must be safe, including identification of and protection from hazards that can cause bodily injury including but not limited to, electrical hazards, bodies of water, and vehicular traffic.
Transportation Safety (30)
Providers who transport children as part of their child care operations must operate safely, using child safety restraints and seat belts as required by state and local statute. The child safety restraints and seat belts are to be used in the correct manner and according to the manufacturer’s instructions.

Safe Sleep (31)
Providers who care for children under 12 months old shall follow Safe Sleep practices which include, but not limited to:

- Place infants to sleep during naps and at nighttime on their backs on a firm mattress and well-fitting sheet in a safety approved crib or portable crib (U.S. Consumer Safety Commission and ASTM Standards). An alternative sleeping position requires a signed waiver by a healthcare professional.
- Only one infant may occupy a crib or a playpen at one time.
- Infants shall not be placed to sleep on chairs, sofas, adult beds, waterbeds, or cushions. Sitting devices such as car safety seats, swings, strollers, infant carriers, or infant slings shall not be used.
- Sleeping space must be free of blankets, loose bedding, comforters, pillows, bumper pads, or any object that can increase the risk of entrapment. Toys and stuffed animals must be removed from crib when infant is sleeping. Pacifier cannot have cords or attaching mechanisms.
- Infants should be directly observed by sight and sound at all times. Home monitors or commercial devices marketed to reduce the risk of SIDS should not be used in place of direct supervision while children are sleeping.
- The lighting in the room must allow the provider to see each infant’s face, sleep position, and to check on infant’s breathing.
- Temperature in the room should be comfortable for a lightly clothed adult.
- Create a Safe Sleep policy. All parents/guardians shall be informed of the facility’s Safe Sleep policy upon enrollment. Talk with families about the importance of sleep positioning, and encourage them to follow Safe Sleep Guidelines at home.