7.702 RULES REGULATING CHILD CARE CENTERS (LESS THAN 24-HOUR CARE) [Rev. eff. 2/1/16]

All child care centers must comply with the current "General Rules for Child Care Facilities" 7.701; "Rules Regulating Child Care Centers (Less Than 24-Hour Care)" 7.702; "Rules Regulating Special Activities" 7.719; "Rules and Regulations Governing the Sanitation of Child Care Centers in the State of Colorado" 25-1.5-101(1)(h), C.R.S.; and the USDA CACFP Part 266.20(1.5).

7.702.1 DEFINITIONS [Rev. eff. 2/1/16]

- A. Child care centers, less than 24-hour care (referred to as "centers"), provide comprehensive care for children when the parents or guardians are employed or otherwise unavailable to care for the children. Child care centers may operate twenty four (24) hours a day, but the children are cared for at the center fewer than twenty four (24) hours a day.
- B. Child care centers, less than 24-hour programs of care, include the following types of facilities:
 - 1. A "large child care center" provides care for 16 or more children between the ages of 2 1/2 and 18 years.
 - 2. A "small child care center" provides care for 5 through 15 children between the ages of 2 and 18 years.
 - An "infant program" provides care for children between the ages of 6 weeks and 18 months.
 - 4. A "toddler program" provides care for children between the ages of 12 months (when walking independently or with a health care provider's statement indicating developmental appropriateness of placement in a toddler program) and 36 months.
 - "Preschool" is a part-day child care program for 5 or more children between the ages of 2 1/2 and 7 years.
 - 6. "Kindergarten" provides a program for children the year before they enter the first grade.
 - 7. "Full day program" enrolls children for five (5) or more hours per day.
 - 8. "Part day program" enrolls children for a maximum of up to five (5) hours per day. Individual children shall not attend more than one (1) five (5) hour session per day.
 - 9. A "drop-in child care center" provides occasional care for 40 or fewer children between the ages of 12 months and 13 years of age for short periods of time not to exceed six (6) hours in any 24-hour period of time or fifteen (15) hours in any seven (7) day period of time.
 - 10. "Staff": all references to staff or staff positions includes paid staff and equally qualified volunteers under Section 7.702.44, E.

7.702.2 ADMINISTRATION [Rev. eff. 2/1/16]

(See also "Administration" at 7.701.5, General Rules for Child Care Facilities)

A. The governing body must appoint a director who will be responsible to the governing body and who will be delegated the authority and responsibility for the operation of the center according to its defined purpose and policies.

- B. The governing body must formulate the purpose and policies to be followed by the center. It must have a regular planned review of such purpose and policies to determine that the center is in compliance with licensing rules.
- C. The governing body is responsible for providing necessary facilities, adequate financing, qualified personnel, services, and program functions for the safety and well-being of children in accordance with these rules.
- D. Any center having a director assigned to a classroom shall have qualified and adequate staff, allowing the director or qualified staff the ability to attend to the duties of a director as they arise.
- E. The director of the center is responsible for administering the center in accordance with licensing rules. The director must plan and supervise the child development program, plan for or participate in selection of staff, plan for orientation and staff development, supervise and coordinate staff activities, evaluate staff performance, and participate in the program activities.
- F. The director of a part-day preschool program operated by an accredited public school system is responsible for administering the center in accordance with licensing rules and supervising the early childhood program. The director or staff designated by the governing body must plan for or participate in orientation and staff development, supervise or coordinate staff activities, participate in the evaluation of staff performance, and participate in program activities.

7.702.3 POLICIES AND PROCEDURES [Rev. eff. 2/1/16]

7.702.31 Statement of Policies and Procedures [Rev. eff. 2/1/16]

At the time of enrollment, and upon amendment, the center must give the parent(s)/guardian(s) the center's policies and procedures, and provide the opportunity to ask questions. By signing the policies and procedures document, the parent(s)/guardian(s) agree to follow, accept the conditions of, and give authorization and approval for the activities described in the policies and procedures. Written copies must be available either electronically or in hard copy. The provider must obtain a signed document stating that the parent(s)/guardian(s) have received the policies and procedures. Policies must include the following:

- A. The center's purpose and its philosophy on child care.
- B. The ages of children accepted.
- C. The hours the center is open, specific hours during which special programs are offered, holidays when the center is closed.
- D. The procedure regarding inclement and excessively hot weather.
- E. The procedure concerning admission and registration of children.
- F. An itemized fee schedule.
- G. The procedure for identifying where children are at all times.
- H. The center's procedure on guidance, positive instruction, supporting positive behavior, discipline and consequences, including how the center will:
 - 1. Cultivate positive child, staff and family relationships.
 - Create and maintain a socially and emotionally respectful early learning and care environment.

- 3. Implement teaching strategies supporting positive behavior, pro-social peer interaction, and overall social and emotional competence in young children.
- 4. Provide individualized social and emotional intervention supports for children who need them, including methods for understanding child behavior; and developing, adopting and implementing a team-based positive behavior support plan with the intent to reduce challenging behavior and prevent suspensions and expulsions.
- 5. Access an early childhood mental health consultant or other specialist as needed.
- I. The procedure, including notification of parents or guardians, for handling children's illnesses, accidents, and injuries.
- J. The procedures for responding to emergencies such as lost children, tornadoes, and fires.
- K. The procedure for transporting children, if applicable, including transportation arrangements and parental permission for excursions and related activities.
- L. The procedure governing field trips, television and video viewing, and special activities, including staff responsibility for the supervision of children.
- M. The procedure on children's safety related to riding in a vehicle, seating, supervision, and emergency procedures on the road.
- N. The procedure for releasing children from the center only to persons for whom the center has written authorization.
- O. The procedures followed when a child is picked up from the center after the center is closed or not picked up at all, and to ensure that all children are picked up before the staff leave for the day.
- P. The procedure for caring for children who arrive late to the center and their class/group is away from the center on a field trip or excursion.
- Q. The procedure for storing and administering children's medicines and delegation of medication administration in compliance with Section 12-38-132, C.R.S., of the "Nurse Practice Act".
- R. The procedure concerning children's personal belongings and money.
- S. Meals and snacks.
- T. Diapering and toilet training.
- U. Visitors to the center.
- V. Parent and staff conferences to inform the parents or guardians of the child's behavior, progress, and social and physical needs.
- W. The procedure for filing a complaint about child care (see 7.701.5, General Rules for Child Care Facilities).
- X. Reporting of child abuse (see 7.701.5, General Rules for Child Care Facilities).
- Y. Notification when child care service is withdrawn and when parents or guardians withdraw their children from the center.

Z. How decisions are made and what steps are taken prior to the suspension, expulsion or request to parents or guardians to withdraw a child from care due to concerns about the child's behavioral issues. These procedures must be consistent with the center's policy on guidance, positive instruction, discipline and consequences, and include documentation of the steps taken to understand and respond to challenging behavior.

7.702.32 Communication, Emergency, and Security Procedures [Rev. eff. 2/1/16]

- A. The center must notify the parents or guardians in writing of significant changes in its services, policies, or procedures so that they can decide whether the center continues to meet the needs of the child.
- B. For security purposes, a sign-in/sign-out sheet or other mechanism for parents and guardians must be maintained daily by the center. It must include, for each child in care, the date, the child's name, the time when the child arrived at and left the center, and the parent or guardian's signature or other identifier.
- C. The center must have a working telephone with the number available to the public. Emergency telephone numbers of the following must be posted near the telephone: a 911 notice, where 911 is available, or rescue unit if 911 isn't available; a hospital or emergency medical clinic; the local fire, police, and health departments; and Rocky Mountain Poison Control. The telephone must be available to staff at all times that the center is in operation.
- D. The center must be able to provide emergency transportation to a health care facility at all times.
- E. The director of the center or the director's delegated substitute must have a means for determining at all times who is present at the center.
- F. A written policy regarding visitors to the center must be posted and a record maintained daily by the center that includes at a minimum the visitor's name and address and the purpose of the visit. At least one piece of identification must be inspected for individuals who are strangers to personnel at the center.
- G. The center must release the child only to the adult(s) for whom written authorization has been given and is maintained in the child's record (see 7.702.91). In an emergency, the child may also be released to an adult for whom the child's parent or guardian has given verbal authorization. If the staff member who releases the child does not know the adult, identification must be required to assure that the adult is authorized to pick up the child.
- H. The center must have a procedure for dealing with individuals not authorized by the parent or guardian of a child who attempts to have the child released to them.
- I. The center must have a written emergency procedure to report communicable illnesses to the local health department pursuant to regulations of the Colorado Department of Public Health and Environment.
- J. The center must have a written procedure for closing the center at the end of the day to ensure that all children are picked up.

7.702.33 Personnel Policies, Orientation, and Staff Development [Rev. eff. 2/1/16]

A. The duties and responsibilities of each staff position and the lines of authority and responsibility within the center must be in writing.

- B. At the time of employment, staff members must be informed of their duties and assigned a supervisor.
- C. Prior to working with children, each staff member must read and be instructed about the policies and procedures of the center, including those related to hygiene, sanitation, food preparation practices, proper supervision of children, and reporting of child abuse. Staff members must sign a statement indicating that they have read and understand the center's policies and procedures.
- D. Staff hired prior to September 29, 2016, must complete a Department approved pre-service training by September 30, 2016. All staff hired after September 30, 2016, must complete a Department approved pre-service training prior to working with children. The training must include:
 - 1. Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic.
 - 2. Handling and storage of hazardous materials and the appropriate disposal of bio contaminants.
- E. Each staff member working with infants less than twelve (12) months old must complete a Department approved safe sleep training by December 31, 2015. Each staff member hired after December 31, 2015, must complete a department approved safe sleep training prior to working with infants less than twelve (12) months old.
- F. Each staff member working with children less than three (3) years of age must complete a Department approved prevention of shaken baby/abusive head trauma training by September 30, 2016. Each staff member hired after September 30, 2016, must complete a Department approved abusive head trauma training prior to working with children less than three (3) years of age.
- G. All staff must complete a Department approved standard precautions training that meets current Occupational Safety and Health Administration (OSHA) requirements prior to working with children. This training must be renewed annually and counts towards ongoing training requirements.
- H. Within thirty (30) calendar days of employment and annually, all employees and regular volunteers must be trained using a Department approved training about child abuse prevention, including common symptoms and signs of child abuse.
- I. Within thirty (30) calendar days of employment and annually all employees and regular volunteers must be trained using a Department approved training on how to report, where to report and when to report suspected or known child abuse or neglect.
- J. The child care center must ensure that all staff are familiar with the licensing rules governing child care centers within thirty (30) calendar days of employment at the center.
- K. All staff who work with children must complete a minimum of fifteen (15) clock hours of training each year beginning with the start date of the employee. At least three (3) clock hours per year must be in the focus of social emotional development.
- L. Ongoing training and courses shall demonstrate a direct connection to one or more of the following competency areas:
 - 1. Child growth and development, and learning or courses that align with the competency domains of child growth and development;

- 2. Child observation and assessment;
- 3. Family and community partnership;
- Guidance:
- 5. Health, safety and nutrition;
- 6. Professional development and leadership;
- 7. Program planning and development;
- 8. Teaching practices:
 - a. Each one (1) semester hour course with a direct connection to the competency area listed in Section 7.702.33, I, 1-8, taken at a regionally accredited college or university shall count as fifteen (15) clock hours of ongoing training.
 - b. Training hours completed can only be counted during the year taken and cannot be carried over.
- M. To be counted for ongoing training, the training certificate must have documentation that includes:
 - 1. The title of the training; and,
 - 2. The competency domain; and,
 - 3. The date and clock hours of the training; and,
 - 4. The name or signature, or other approved method of verifying the identity of trainer or entity; and,
 - 5. Expiration of training if applicable; and,
 - 6. Connection to social emotional focus if applicable.
- N. Within thirty (30) calendar days of employment and annually, all staff responsible for collection, review and maintenance of the child immunizations records must complete the Colorado Department of Public Health and Environment (CDPHE) immunization course.
- O. If volunteers are used by the center, there must be a clearly established policy in regard to their function, orientation, and supervision. See also Section 7.702.44.
- P. Within thirty (30) calendar days of the last day of employment, staff members must be provided a letter verifying their experience at the center. The letter must contain the center's address, phone number and license number, the employee's start and end date and the total number of hours worked with children. Hours worked with infants and toddlers must be documented separately from hours worked with other age groups. The letter must be signed by a director, owner or human resources agent of the center or governing body.

7.702.4 PERSONNEL [Rev. eff. 2/1/16]

7.702.41 General Requirements for All Personnel [Rev. eff. 2/1/16]

- A. All personnel at the center must demonstrate knowledgeable decision-making, judgment, and concern for the proper care and well-being of children.
- B. Staff, substitutes, or volunteers must not consume or be under the influence of any substance that impairs their ability to care for children.
- C. Illegal drugs, drug paraphernalia, marijuana and marijuana infused products, and alcohol must never be present on the premises of the center during operating hours.
- D. When caring for children, staff must refrain from personal use of electronics including, but not limited to, cell phones and portable electronic devices.
- E. The center must determine if any staff person who works at the center has ever been convicted of a crime as found at Section 7.701, D, 5 or 6, of the General Rules for Child Care Facilities.
- F. A criminal record check request must be submitted to the Colorado Bureau of Investigation within five (5) business days that an individual is employed by the center. The personnel file of each staff member of the center must contain clearance or arrest report from the Colorado Bureau of Investigation resulting from the staff member's criminal record check. The requirement for a criminal record check is found in Section 7.701.33 of the General Rules for Child Care Facilities.
- G. A request for a review of the State Department's automated system must be made within ten (10) business days of each staff member's first day of employment. The method for making the request is found in Section 7.701.32 of the General Rules for Child Care Facilities.
- H. Staff members must be current for all immunizations routinely recommended for adults by their health care provider.
- All staff members must submit to the center a medical statement, signed and dated by a licensed physician or other health care professional, verifying that they are in good mental, physical, and emotional health appropriate for the position for which they have been hired. This statement must be dated no more than 6 months prior to employment or within thirty (30) calendar days after the date of employment. This statement must indicate when subsequent medical statements are required.

Subsequent medical statements must be submitted as required in writing by a physician or other health care professional.

J. If, in the opinion of a physician or mental health practitioner, an employee's examination or test results indicate a physical, emotional, or mental condition that could be hazardous to a child, other staff, or self, or that would prevent satisfactory performance of duties must not be assigned or returned to a position until the condition is cleared to the satisfaction of the examining physician.

7.702.44 Qualifications for Other Staff Members [Rev. eff. 2/1/16]

A. Early Childhood Teacher

- 1. An early childhood teacher, assigned responsibility for a single group of children and working under the supervision of a director, must be at least eighteen (18) years of age and must meet at least one of the following qualifications:
 - a. A Bachelor's degree from a regionally accredited college or university with a major area of study in one of the following areas:
 - 1) Early childhood education;
 - 2) Elementary education;
 - 3) Special education;
 - 4) Family and child development;
 - 5) Child psychology.
 - b. A Bachelor's degree from a regionally accredited college or university with a major area of study in any area other than those listed at Section 7.702.54, A, 1, and additional two (2) three-semester hour early childhood education college courses with one course being either introduction to early childhood education or guidance strategies.
 - c. Current early childhood professional Credential Level III Version 3.0 as determined by the Colorado Department of Education.
 - d. A 2-year college degree, sixty (60) semester hours, in early childhood education from a regionally accredited college or university, which must include at least two (2) three-semester hour courses, one of which must be either introduction to early childhood education or guidance strategies; and at least six (6) moths (910 hours) of satisfactory experience.
 - e. Completion of twelve (12) semester hours from a regionally accredited college or university, at either a two year, four year or graduate level, in each of the following subject or content areas in early childhood education and one of the three (3) semester hour courses must be either introduction to early childhood education or guidance strategies, plus nine (9) months (1,395 hours) of verified experience in the care and supervision of four (4) or more children less than six (6) years of age who are not related to the individual.
 - f. Completion of a vocational or occupational education sequence in child growth and development plus twelve (12) months (1,820 hours) of verified experience in the care and supervision of four (4) or more children less than six (6) years of age who are not related to the individual.
 - g. Current certification as a Child Development Associate (CDA) or other Department-approved credential.

- h. Completion of a course of training approved by the Department that includes training and work experience with children in a child growth and development program plus twelve (12) months (1,820 hours) of verified experience in the care and supervision of four (4) or more children less than six (6) years of age who are not related to the individual.
- i. Twenty-four (24) months (3,640 hours) of verified experience in the care and supervision of four (4) or more children less than six (6) years of age who are not related to the individual. Satisfactory experience includes being a licensee of a Colorado family child care home; a teacher's aide or teacher in a child care center, preschool, or elementary school, plus either:
 - 1) A current Colorado Level I credential; or.
 - Two (2) three-semester hour early childhood education college courses from a regionally accredited college or university, at either a two year, four year or graduate level, in each of the following subject or content areas with one course being either introduction to early childhood education or guidance strategies.
- All college course grades toward early childhood teacher qualifications must be "C" or better.

B. Kindergarten Teacher

- 1. Each teacher of a kindergarten class must have the same qualifications as a director for a large center (see Section 7.702.42), be state certified or licensed as an elementary teacher by the Colorado Department of Education, or have a four (4) year degree from a regionally accredited college or university in elementary or early childhood education.
- 2. A current early childhood professional Credential Level III Version 2.0 as determined by the Colorado Department of Education.

C. Assistant Early Childhood Teacher

An assistant early childhood teacher, assigned responsibility for a single group of children during times specified in 7.702.55, must meet one of the following qualifications:

- 1. Completion of one of the early childhood education courses in Section 7.702.42, A, with a course grade of "C" or better and twelve (12) months (1820 hours) verified experience in the care and supervision of four (4) or more children less than six (6) years of age, who are not related to the individual. Satisfactory experience includes being a licensee of a family child care home; a teacher's aide in a center, preschool or elementary school. Assistant early childhood teachers must be enrolled in and attending the second (2nd) early childhood education class which will be used as the basis for their qualification for the position of early childhood teacher; or,
- 2. Persons having completed two (2) of the early childhood education classes referenced in Section 7.702.42, A, with a course grade of "C" or better and no experience.
- 3. A current early childhood professional Credential Level I Version 1.0 or 2.0 as determined by the Colorado Department of Education.

D. Staff Aide

- 1. Staff aides must be at least sixteen (16) years of age and must work directly under the supervision of the director or an early childhood teacher.
- 2. Infant staff aides must be at least eighteen (18) years of age.
- 3. Staff aides, without supervision from an early childhood teacher or director, may supervise no more than two (2) preschool age children while assisting the children with diapering or toileting.

E. Volunteers (see also Section 7.702.33, I and J)

- 1. Volunteers who work more than fourteen (14) calendar days (112 hours) per calendar year who are used to meet staff to child ratio must be equally qualified as an early childhood teacher, assistant early childhood teacher or aide and have complete staff records as required in Section 7.702.92.
- 2. Volunteers used more than fourteen (14) calendar days (112 hours) per calendar year who are used to meet staff to child ratio must complete fingerprint based background checks and the State Department automated child abuse and neglect background check.
- 3. Volunteers must be supervised and given instruction as to the center's policies and procedures.
- 4. The only time a parent/guardian volunteer may be alone with a child other than their own without completing all required background checks, is while driving on a field trip.
- 5. Volunteers between the ages of twelve (12) and sixteen (16) must have a written purpose developed by the center for volunteering and may not volunteer for more than two (2) hours per day.

7.702.45 Required Staff and Supervision [Rev. eff. 2/1/16]

A. Staff-Child Ratios

- 1. For the purposes of this subsection A, in determining staff-child ratios, only staff members and/or volunteers qualified under Section 7.702.44, E, who work directly with children are counted.
- 2. For full day programs, during times of low attendance and/or during the first and last hour of the day, when only eight (8) or fewer children are present in the facility, there must be at least one (1) early childhood teacher or assistant early childhood teacher working with the children and a second staff member immediately available. There must be no more than two (2) children less than the age of two (2) present. When nine (9) or more children are in attendance, at least two (2) staff members must be on duty.
- 3. The director or director substitute of the center must be present at the center at least 60 percent of any day that the center is open.
- 4. The director or substitute director of an extended hour drop-in child care center operating at least six calendar days per week must be present at the center or involved in director activities at least fifty percent (50%) of the hours of operation of any day the center is in operation.

- a. If the director is not on site at the center for a portion of any day the center is in operation, the director must be available by phone.
- b. The director must be present in the center at least 30 hours each week.
- 5. There must be assigned at least one qualified early childhood teacher supervising each group of children unless otherwise specified in rules. A director may be the assigned teacher for one group of children.
- 6. Part day programs must have an early childhood teacher supervise each group of children at all times. Full day programs may have assistant early childhood teachers supervise preschool age and older children during the following periods of operation:
 - a. Opening hours: an assistant early childhood teacher may be alone with children for the first two (2) hours of a center's daily operating hours.
 - b. Nap time: an assistant early childhood teacher may be alone with children for up to one (1) hour during nap-time.
 - c. Closing hours: an assistant early childhood teacher may be alone with children for up to the two (2) hours prior to the closing time of a center's daily operations.
 - Taking children to the restroom/diapering.
- 7. At least one (1) staff member with current Department approved medication administration training and delegation must be on duty at all times.
- 8. At nap time, the child to staff ratio may be doubled for children two and one half (2 ½) years of age and older in preschool classrooms when the following conditions have been met:
 - a. At least half of the children are sleeping.
 - b. Another staff member is onsite in the center and immediately available.
 - c. Maximum group size and room capacity are not exceeded.
 - d. Staff member supervising children is qualified as an early childhood teacher or assistant early childhood teacher.
- 9. Formal kindergarten class sessions must have 1 staff member for each 25 or fewer children in attendance. At other parts of the day when children are in attendance, the ratio must be 1 staff member to each 15 or fewer children.
- Children of the director or of staff members who attend the center and other children on the premises for supervision and care must be counted against the licensed capacity in the appropriate age groups.
- 11. In determining staff-child ratios, children who are in attendance for only part of the day are counted only while at the center.

12. Staff-Child Ratios

AGES OF CHILDREN	NUMBER OF STAFF
6 weeks to 18 months (infants)	1 staff member to 5 infants
12 months to 36 months	1 staff member to 5 toddlers
24 months to 36 months	1 staff member to 7 toddlers
2-1/2 years to 3 years	1 staff member to 8 children
3 years to 4 years	1 staff member to 10 children
4 years to 5 years	1 staff member to 12 children
5 years and older	1 staff member to 15 children
Mixed age group 2-1/2 years to 6 years	1 staff member to 10 children

- a. In other preschool age combinations, the staff ratio for the youngest child must be utilized if more than 20% of the group is composed of younger children. This does not apply to infants and toddlers. The ratio for toddler groups is based on the youngest child in the group.
- b. Drop-in child care centers may follow a ratio of one (1) adult for every eight (8) children for children in a mixed age group of 2 years of age to 12 years. 1-2 children 1 year of age to 2 years of age may join the preschool age group of children for short periods of time for structured activities as long as the 1 year old children are safely confined in a toddler seat or high chair.

13. Maximum Group Size for Children

AGES OF CHILDREN	MAXIMUM GROUP SIZE
6 weeks to 18 months	10 infants
12 months to 36 months	10 toddlers
24 months to 36 months	14 toddlers
2-1/2 years to 3 years	16 children
3 years to 4 years	20 children
4 years to 5 years	24 children
5 years and older	30 children
Mixed age group 2-1/2 to 6 years of age	20 children

- a. In other preschool age combinations, the maximum group size for the youngest child must be utilized if more than twenty percent (20%) of the group is composed of younger children. This does not apply to infants and toddlers. The group size for toddler groups is based on the youngest child in the group.
- b. Preschool age and school-age groups of children must be separated into developmentally appropriate activities. Groups are not required to be separated from each other by permanent or portable dividers or walls.
- Group size for children in preschool and school age classrooms may be exceeded for circle time, meal and snack time, special occasions and activities. The room capacity must not be exceeded.
- d. Toddler-age groups of children must be separated from each other by permanent or portable dividers or other methods as approved by the Department.
- e. When combining age groups, not including individual child transitions, children must be cared for in the room licensed for the youngest child in care, including the outdoor play area.

B. Service/Housekeeping Personnel

- 1. Service personnel must be available for housekeeping and food preparation as needed for adequate operation and maintenance of the center.
- 2. Assignment of housekeeping and maintenance duties to child care staff must not interfere with their supervisory responsibilities and child care duties.

C. Child Care Health Consultant

- Staff must consult with a currently Colorado licensed registered nurse with knowledge and experience in maternal and child health, a pediatric nurse practitioner or a family nurse practitioner, or a pediatrician at least once a month at the child care facility. The monthly consultation must be specific to the needs of the facility and include some of the following topics: training, delegation and supervision of medication administration and special health procedures, health care, hygiene, disease prevention, equipment safety, nutrition, interaction between children and adult caregivers, and normal growth and development. In part day preschools that operate less than five (5) hours per day or dropin child care centers, consultation must occur as often as the nurse delegating medications requires.
- The date and content of each consultation must be recorded and maintained in the center's files.
- 3. The center must maintain documentation including the Child Care Health Consultant's (CCHC) Department of Regulatory Agencies (DORA) proof of RN or MD current licensure in good standing, a brief biography highlighting applicable knowledge, experience and approximate dates worked as a school nurse or child care health consultant commenced.
- 4. Child Care Health Consultants (CCHC) hired after February 1, 2016, must complete the Department approved Child Care Health Consultant (CCHC) training within six (6) months. The center must obtain and maintain proof of course completion.

- 5. Child Care Health Consultants (CCHC) employed as a health consultant prior to February 1, 2016, must complete the Department approved Child Care Health Consultant (CCHC) training by August 1, 2016. The center must obtain and maintain proof of course completion.
- 6. All Child Care Health Consultants (CCHC) must complete the Department approved Colorado Department of Public Health and Environment (CDPHE) immunization course annually.

D. Substitutes

- 1. Qualified staff must be available to substitute for regularly assigned staff who are sick, on vacation, or otherwise unable to be on duty.
- 2. In the absence of the director of a small center, an individual who meets director qualifications for a small center must substitute for the director.
- 3. If the director of a large center cannot be present sixty percent (60%) of any day, a center staff member or other individual who meets director qualifications as listed at Section 7.702.42 for a large center must substitute for the director.
- 4. When there is a director vacancy, a director-qualified substitute must be present at the center at least sixty percent (60%) of any day the center is open until a new director is appointed.
- 5. For extended director absences (more than two (2) weeks and up to twelve (12) weeks per calendar year) a staff member with fifty percent (50%) of the director qualification requirements completed in education and experience may substitute for the director. Dates must be documented and on file for review. A fully qualified substitute director meeting qualifications in Section 7.702.42 is required for any absence exceeding twelve (12) weeks.
- 6. Substitutes for directors of part-day public school preschools may be from the sponsoring school system's list of approved substitutes. Substitutes who do not meet director qualifications must consult with a qualified director on administering the center in accordance with early childhood principles and practices and licensing rules.

Infant Program Staff [Rev. eff. 2/1/16]

7.702.5 CHILD CARE SERVICES [Rev. eff. 2/1/16]

7.702.51 Admission Procedure [Rev. eff. 2/1/16]

- A. The center must accept and care only for children of the ages for which it has been licensed. At no time shall the number of children in attendance exceed the number for which the center has been licensed.
- B. Admission procedures must be completed prior to the child's attendance at the center and must include:
 - 1. A pre-admission interview with the child's parent(s) or guardian(s) to determine whether the services offered by the center will meet the needs of the child and the parent(s) or guardian(s).
 - 2. Explanation of the center's policies and procedures. Parents' signatures must be secured, indicating that they have read and agree to the center's policies and procedures.
 - Completion of the registration information required for inclusion in the child's record as required in Section 7.702.91.
 - 4. If applicable, a health care plan authorized by the child's health care provider and parent(s)/guardian(s) defining the interventions needed to care for a child who has an identified health or developmental condition or concern including, but not limited to: seizures, asthma, diabetes, severe allergies, heart or respiratory conditions, and physical disabilities. The staff working with a child with a health care plan must be informed, trained and delegated responsibility for carrying out the health care plan; supervision of the plan and interventions must be documented.

C. Children with Special Needs

- The admission of children who have special health care needs, disabilities, or developmental delays which includes children with social emotional and behavioral needs must be in alignment with the training and ability of staff and in compliance with the Americans with Disabilities Act. Services offered must show that a reasonable effort is made to accommodate the child's needs and to integrate the child with other children. (See General Rules for Child Care Facilities, Section 7.701.14)
- 2. The center must inform its Child Care Health Consultant (CCHC) prior to the first day of care of the enrollment of a child with special health care needs, if known, so staff receive training, delegation and supervision as indicated by the child's individualized health care plan.

- 3. For a child with special health care needs requiring intervention and /or medication, the center must obtain written instructions for providing services from the child's parent or guardian and the health care provider. If an existing individualized health care plan is provided for the child, it must be reviewed and followed by the center staff when caring for the child. If the child does not have an existing individualized health care plan, the individualized health care plan must be obtained by the child's first day of care.
- 4. The individual health care plan must be updated at least every twelve months from the date of the initial plan and as changes occur. The plan must include all information needed to care for the child, must be signed by the health care provider and must include, but not be limited to, the following:
 - Medication schedule
 - b. Nutrition and feeding instructions
 - c. Medical equipment or adaptive devices, including instructions
 - d. Medical emergency instructions
 - e. Toileting and personal hygiene instructions
 - f. Behavioral interventions
 - g. Medical procedure/intervention orders
- 5. For a child with special health care needs, the center must obtain written instructions for providing services from the child's parents or legal guardian and the health care provider. If the child with special health care needs does not have an existing individualized health care plan, the individualized health care plan must be completed within thirty (30) calendar days of the child's enrollment.
- 6. The plan must be updated at least every twelve (12) months from the date of the initial plan or as changes occur.
- 7. The center must inform its child care health consultant as soon as possible of the enrollment of a child with special health care needs so staff can receive training and support as indicated by the child's individualized health care plan.
- D. If the parent agrees that the center should care for a child in the infant program who is 18 months or older, the center must have on file a written statement from a licensed physician confirming that care for the child is appropriate in this infant program.
- E. If the parent agrees that the center should care for a child in the toddler program who is twelve (12) months old but not walking independently, or is over thirty-six (36) months old, the center must have on file a written statement from a licensed physician confirming that care for the child is appropriate in this toddler program.

7.702.52 Health Care [Rev. eff. 2/1/16]

- A. Statements of Health Status
 - The center has the right to refuse to admit a child if a statement from a health care professional is not submitted.

- 2. At the time of admission, the parent(s)/guardian(s) must provide for each child entering the center:
 - a. Documentation of immunization status or exemption as required by Colorado Department of Public Health and Environment (CDPHE). Immunizations must be updated and recorded as specified on the certificate of immunization or alternate certificate of immunization as supplied and approved by the Colorado Department of Public Health and Environment (CDPHE). Colorado law requires proof of immunization be provided prior to or on the first day of admission.
 - b. Within thirty (30) calendar days after admission, and within thirty (30) calendar days following the expiration date of a previous health statement, the parent(s)/guardian(s) of each child must submit a statement of the child's current health status or written verification of a scheduled appointment with a health care provider. The statement of the child's current health status must be signed and dated by a health care provider who has seen the child within the last twelve (12) months, or within the last six (6) months for children less than two and one-half (2½) years of age. The statement must include when the next visit is required by the health care provider. All health statements must be kept at the center.
 - c. Statements of health status of children less than two (2) years of age must be updated in accordance with the American Academy of Pediatrics recommended schedule for routine health supervision or as required in writing by the health care provider.
 - d. Health statements for children over two (2) years of age to seven (7) years of age must be updated in accordance with the American Academy of Pediatrics recommended schedule for routine well child exams.
 - e. Whenever the director has reason to suspect a child participating in the program may have a condition potentially communicable to the child or others, or finds the child's general condition indicates the need for examination, the director must require a statement from the child's health care provider approving the child to return to group care.
 - f. For children seven (7) years of age and older or who have completed the first (1st) grade, subsequent statements of health status must be obtained every three (3) years.
 - g. For children attending a drop-in center, parent(s)/guardian(s) of each child must submit a statement of the child's current health status or written verification of a scheduled appointment with a health care provider within thirty (30) calendar days or by the second visit, whichever is longer. The statement of the child's current health status must be signed and dated by a health care provider who has seen the child within the last twelve (12) months, or within the last six (6) months for children less than two and one-half (2½) years of age. Subsequent statements are not required if there have been no health changes in the child and the parent(s)/guardian(s) attest in writing to the health status of the child on an annual basis. Children attending drop-in child care with special medical needs must have the statement from a health care professional as indicated in section 7.702.52, A, 2, b-f.

B. Emergency Procedures

- At the time of admission, the center must obtain telephone numbers of the child's
 physician or other appropriate health care professional and numbers where the parent or
 guardian and at least one other responsible adult can typically be reached in the event of
 accident, illness, or other emergency.
- 2. The center must obtain written authority to arrange for medical care in the event of an emergency. This information must be on file the first day a child attends the center.
- 3. When accidents, injuries, or illnesses occur, the director or responsible adult in charge must notify the parent or guardian of the child and if necessary call the physician or medical facility as instructed in writing by the parent or guardian.
- 4. For every thirty (30) or fewer children in attendance, there must be at least one (1) staff member on duty who holds a current department-approved first aid and safety certificate (including CPR for all ages of children) and is responsible for administering First Aid and CPR to children. Such individuals must be with the children at all times when the center is in operation. If children are at different locations, there must be a First Aid and CPR qualified staff member at each location.
- 5. Children too ill to remain in the group must be comfortably cared for and supervised until they can be taken home or suitably cared for elsewhere.
- 6. Portable First Aid kits must be available to staff at all times, including field trips, and must be located out of reach of children and maintained in a sanitary condition. First aid kits must be checked and restocked on at least a monthly basis.

C. Medication

- Any routine medication, prescription or non-prescription (over-the-counter) must be administered only with a current written order of a health care provider with prescriptive authority and with written parental consent. Home remedies, including homeopathic medications, shall never be given to a child.
- 2. The written order by the person with prescriptive authority shall include:
 - a. Child's name
 - b. Licensed prescribing practitioner name, telephone number, and signature
 - c. Date authorized
 - d. Name of medication and dosage
 - e. Time of day medication is to be given
 - f. Route of medication
 - g. Length of time the medication is to be given
 - h. Reason for medication (unless this information needs to remain confidential)
 - i. Side effects or reactions to watch for

- j. Special instructions
- 3. Medications must be kept in the original labeled bottle or container. Prescription medications must contain the original pharmacy label.
- 4. Over-the-counter medication must be kept in the originally labeled container and be labeled with the child's first and last name.
- 5. In the case medication needs to be given on an ongoing, long-term basis, the authorization and consent forms must be reauthorized on an at least annual basis. Any changes in the original medication authorization require a new written order by the prescribing practitioner and a change in the prescription label. Verbal orders taken from the licensed prescriber may be accepted only by a licensed registered nurse.
- 6. Acetaminophen or ibuprofen is able to be used multiple times with one (1) current, signed multi-use medication order for up to three (3) consecutive calendar days if the order is specific about when the medication is to be given. The multi-use medication order must be renewed with each updated health statement.
- 7. Staff designated by the center director to give medications must complete the four (4)
 Department-approved medication administration training and have current annual
 delegation or more often as determined by the Child Care Health Consultant. Delegation
 must be from the center's current Child Care Health Consultant who must observe and
 document the competency of each staff member involved in medication administration. All
 staff administering medication must have current CPR, First Aid and standard
 precautions training prior to administering medication with the following exceptions:
 - a. Staff determined by the director, in consultation with the Child Care Health Consultant, to be responsible for providing routine emergency medications covered in the approved medication administration training for the treatment of severe allergies or inhaled medications for the treatment of asthma must receive training and delegation from their Child Care Health Consultant for those medications only. Staff must then provide those medications to children based on the instructions from the child's individualized health care plan.
 - b. Staff determined by the director, in consultation with the Child Care Health Consultant, to be responsible for providing medications not covered in the approved medication administration training shall also be permitted to administer medications and/or medical treatments such as rectal diastat, insulin or oxygen with individualized training and delegation from the Child Care Health Consultant based on instructions from the child's individualized health care plan.
 - c. Staff may be trained and delegated in the administration of a single rescue medication or rescue medical intervention by the center's Child Care Health Consultant. Such training and delegation shall qualify the staff member to provide a rescue medication or treatment for a specific child based on instructions from the child's individualized health care plan.
- 8. Staff of drop-in child care centers must complete training from their nurse consultant delegating medication.

- 9. All medications, except those medications specified in the Department's approved medication administration training as emergency medications, must be kept in an area inaccessible to children, but available to staff trained in administering medication. If refrigeration is required, the medication must be stored in either a separate refrigerator or a leak proof container in a designated area of a food storage refrigerator, separate from food and inaccessible to children. Controlled medications must be counted and safely secured, and specific policies regarding their handling require special attention in the center's policies. Access to these medications must be limited (see Section 12-22-318, C.R.S.).
- 10. Emergency medications must be stored in accordance with the Child Care Health Consultant's recommendation. Emergency medications are not required to be stored in a locked area. Emergency medications may be stored in an area easily accessible and identifiable to staff but out of reach of children. When away from the classroom, staff must carry emergency medications in a bag on their person.
- 11. The center must have a written policy on the storage and access of inhalers and epinephrine carried by school-age children. The policy must include a written contract with the parent(s)/guardian(s) and child acknowledgement assigning levels of responsibility of each individual. This contract will accompany orders for the medication from a health care provider along with confirmation from the health care provider that the student has been instructed and is capable of self-administration of the prescribed medications.
- 12. The center must have a written policy on the storage and access of inhalers and epinephrine for all children in care. This policy must be reviewed by the Child Care Health Consultant.
- 13. Children are not allowed to bring medications to child care unless accompanied by a responsible adult. If a medication is out of date or left over, parents are responsible for picking up the medication. If parents do not respond, the center is responsible for the disposal of medications according to center policy and procedures. Disposal of medications must be documented.
- 14. Topical preparations such as petroleum jelly, diaper rash ointments, sunscreen, bug sprays, and other ointments may be administered to children with written parental authorization. These preparations may not be applied to open wounds or broken skin unless there is a written order by the prescribing practitioner.
- 15. A written medication log must be kept for each child. This log is part of the child's records. The log must contain the following:
 - a. Child's name;
 - b. Name of the medication, dosage, and route;
 - Time medication is to be given;
 - d. Special instructions;
 - e. Name and initials of the individuals giving the medication; and,
 - f. Notation if the medication was not given and the reason.

D. Sun Protection

- The center must obtain the parent or guardian's written authorization and instructions for applying sunscreen or use of another form of parent or guardian approved sun protection to their children's exposed skin prior to outside play. A doctor's permission is not needed to use sunscreen at the center.
- 2. The center must apply sunscreen, have the parent or guardian apply sunscreen, or use another form of parent or guardian approved sun protection for children prior to children going outside. Sunscreen must be reapplied as directed by the product label.
- 3. When supplied for an individual child, the sunscreen must be labeled with the child's first and last name.
- 4. If sunscreen is provided by the center, parents must be notified in advance, in writing, of the type of sunscreen the center will use.
- 5. Children over four (4) years of age may apply sunscreen to themselves under the direct supervision of a staff member.

E. Control of Communicable Illnesses

- When children have been diagnosed with a communicable illness such as hepatitis, measles, mumps, meningitis, diphtheria, rubella, salmonella, tuberculosis, giardia or shigella, the center must immediately notify the local health department or the Colorado Department of Public Health and Environment, all staff members, and all parents and guardians of children in care. Children's confidentiality must be maintained.
- 2. The director must ask parents to report exposure of a child to communicable illness outside of the center, and, at the discretion of the director, the child should be excluded from the center for the period of time prescribed by the child's physician or by the local health department.

7.702.53 Personal Hygiene [Rev. eff. 2/1/16]

A. Hand Washing

- Children's hand washing must be supervised and must be taught when necessary.
- Children's hand washing must be taught when necessary.

B. Diapering

(See also Section 7.702.73, A, 3)

All diaper change areas must:

- 1. Be a minimum of 36 by 18 inches in size and large enough to accommodate the size of the child;
- 2. Be adjacent to or within reach of a hand washing sink;
- 3. Have a place inaccessible to children for storing all diaper change supplies and disinfecting solutions and products; and,

4. Have a sufficient supply of diapers at all times.

7.702.54 Physical Care and Supervision [Rev. eff. 2/1/16]

A. General

- 1. All children must be under direct supervision of a responsible adult at all times.
- 2. The time a child arrives and leaves the center each day must be recorded. Attendance verification must be made periodically throughout the day by staff members at the center.
- 3. Staff must be awake, alert and supervising all children.
- 4. Center staff must directly supervise children and maintain staff to child ratio during special activities that occur with an outside vendor or provider and where the vendor uses their expert staff to facilitate the activity.
- 5. The center must provide a rest period with rest equipment of at least thirty (30) minutes for all preschool-age children remaining in the center longer than five (5) hours. Quiet activities are permissible during the thirty (30) minute period. Older children requiring a rest time must be given one.
- 6. Children must not be forced to sleep. Children who do not sleep after thirty (30) minutes must be allowed to move to another area and be provided with quiet toys and equipment to play with such as puzzles or books.
- 7. Children must be allowed to leave their napping area within ten (10) minutes of waking.
- 8. The center must provide mats or cots and a designated rest period for all preschool age children. Drop-in child care centers must provide mats or cots for at least fifty percent (50%) of the licensed capacity of the center.
- 9. The center must ensure that children are dressed appropriately for the weather before going outside.

7.702.55 Food and Nutrition [Rev. eff. 2/1/16]

A. Meals and Snacks

- All meals and snacks provided by the center must meet current USDA child and adult care food program meal pattern requirements and be offered at suitable intervals. Children who are at the center for more than 4 hours, day or evening, must be offered a meal.
- 2. Centers must not provide sugar sweetened beverages to children. These are liquids that have been sweetened with various forms of sugars that add calories and include, but are not limited to: soda, fruitades, fruit drinks, flavored milks, and sports and energy drinks.
- 3. If 100% fruit juice, which is not a sugar sweetened beverage, is offered as part of meals and/or snacks, it must be limited to no more than twice per week.
- 4. The size of servings must be suitable for the child's age and appetite, and sufficient time must be allowed so that meals are unhurried.
- 5. In centers that do not regularly provide a meal, if a child brings a meal from home that does not appear to meet current USDA child and adult care food program meal pattern requirements, the center must have foods available to offer as a supplement to that meal.
- 6. Staff members must sit with the children and encourage them to try a variety of food served. During meals, children should be encouraged to engage in conversation and to express their independence.
- 7. All food prepared by the center must be from sources approved by the local health department or the State Department of Public Health and Environment. All food must be prepared, served, and stored in such a manner as to be clean, wholesome, free from spoilage, and safe for human consumption. Home-canned vegetables, fruits, and meats cannot be served.
- 8. Meal menus must be planned at least one week in advance, dated, and posted in a place visible to parents. After use, menus must be filed and retained for three (3) months. Records must be available for periodic review and evaluation.

- A. Children must not be subjected to physical or emotional harm or humiliation.
- B. The director must not use, or permit a staff person or child to use, corporal or other harsh punishment, including but not limited to pinching, shaking, spanking, punching, biting, kicking, rough handling, hair pulling, or any humiliating or frightening method of guidance.
- C. Guidance must not be associated with food, rest, or toileting. No child should be punished for toileting accidents. Food must not be denied to or forced upon a child as a disciplinary measure.
- D. Separation, when used for guidance, must not exceed five (5) minutes and must be appropriate for the child's age. The child must be in a safe, lighted, well-ventilated area and be within sight and hearing of an adult. The child must not be isolated in a locked, closed room or closet.
- E. Verbal abuse and derogatory remarks about the child are not permitted.

7.702.58 Activities [Rev. eff. 2/1/16]

A. Activity Schedules

- 1. The center must carry out a planned program suitable to the needs of the children. This program must be described in writing and be available for review when requested by the department or by parents or guardians of children in care.
- 2. Daily physical gross motor activities, with or without equipment or materials, must be provided outdoors, or indoors during inclement weather, to preschool age and older children for no less than sixty (60) minutes total for full day programs. Activities do not have to occur all at one time.
- 3. Daily physical gross motor activities, with or without equipment or materials, must be provided outdoors or indoors during inclement weather, to preschool age and older children for no less than thirty (30) minutes total for part day programs operating from three (3) to five (5) hours per day. Activities do not have to occur all at one time.
- 4. Daily physical gross motor activities, with or without equipment or materials, must be provided outdoors or indoors during inclement weather, to preschool age and older children daily for no less than fifteen (15) minutes total for part day programs operating up to three (3) hours per day. Activities do not have to occur all at one time.
- 5. Daily physical gross motor activities, with or without equipment or materials, must be provided to toddler age children outdoors for no less than fifteen (15) minutes for part day programs operating up to three (3) hours per day, no less than thirty (30) minutes total for part day programs operating from three (3) to five (5) hours per day, and no less than sixty (60) minutes for full day programs.
- 6. When inclement weather limits outdoor activities, indoor physical daily gross motor activities, with or without equipment or materials, must be provided to toddler age children outdoors for no less than fifteen (15) minutes for part day programs operating up to three (3) hours per day, no less than thirty (30) minutes total for part day programs operating from three (3) to five (5) hours per day, and no less than sixty (60) minutes for full day programs.
- 7. Infants must be provided outdoor play at least three (3) times per week, weather permitting.
- 8. If the center takes children on routine short excursions, such activities and locations must be posted at the center.

9. If a child participates in activities away from the facility, the center must obtain the parent or guardian's written permission for the child to participate in the activity at a specific location and day. Staff ratios found at Section 7.702.55 must be maintained.

B. Screen Time and Media Use

- 1. Television and video viewing is prohibited for children less than two (2) years of age.
- 2. All television, recorded media, computer, tablet and media devices are prohibited during snack or meal times.
- All media that children are exposed to must not contain explicit language or topics.
- 4. For children two (2) years of age and older, television, recorded media and video time must be limited to thirty (30) minutes per week.
- 5. For children two (2) years of age and older computer and tablet time must be limited to non-consecutive fifteen (15) minute increments not to exceed thirty (30) minutes per day.
- 6. For children two (2) years of age and older, television, recorded media, computer, tablet and media device time may only exceed thirty (30) minutes per week for a special occasion. There is no restriction for children using personal adaptive equipment.

C. Field Trips

- 1. The center must notify the children's parents or guardians in advance of any field trip. The staff-child ratio found at Section 7.702.55 must be maintained at all times.
- 2. All groups of children must be actively supervised by a qualified early childhood teacher at all times.
- 3. Children must be actively supervised at all times.
- 3. An accurate itinerary must remain at the center.
- 4. When taking children on a field trip, staff must have the following information about each child: name, address, and phone number of the child's physician or other appropriate health care professional and the written authorization from the parent or guardian for emergency medical care.
- 5. If children attending the field trip require routine medications be administered during the field trip or have special health needs, a staff member with current medication administration training and delegation must attend on the field trip.
- 6. A list of all children and staff on a field trip must be kept at the center.

7.702.59 Transportation [Rev. eff. 2/1/16]

- A. Transportation Provided by the Center
 - 1. The center is responsible for any children it transports.
 - 2. The center must obtain written permission from parents or guardians for any transportation of their child during child care hours.

- 3. The number of staff members who accompany children when being transported in the vehicle must meet the child care staff ratio found at Section 7.702.45. The driver of the vehicle is considered a staff member.
- 4. Children must not be permitted to ride in the front seat of a vehicle and must remain seated while the vehicle is in motion. All children must be secured in a child restraint system that is appropriate for the age and development of that child. The child restraint must conform to all applicable Federal Motor Vehicle Safety Standards and Colorado child passenger safety laws.
- 5. Children must be loaded and unloaded out of the path of moving vehicles.
- 6. Children must not be permitted to stand or sit on the floor of a moving vehicle, and their arms, legs, and heads must remain inside the vehicle at all times.
- 7. Children must not be left unattended in the vehicle.
- 8. Transportation arrangements for school-age children must be by agreement between the center and the children's parents, i.e., whether the child can walk, ride a bicycle, or travel in a car. The center must monitor the children to be sure they arrive at the center when expected and follow up on their whereabouts if they are late. Written permission from parents or guardians for their children to attend community functions after school hours must include agreements regarding transportation.
- 9. Prior to a field trip or other excursion, the center must obtain information on liability insurance from parents and staff who transport children in their own cars and verify that all drivers have valid driver's licenses.

B. Requirements for Vehicles

- 1. Any vehicle used for the transportation of children to and from the center or during center activities must meet the following requirements:
 - a. The vehicle must be enclosed and have door locks.
 - b. The seats of the vehicle must be constructed and installed according to the vehicle manufacturer's specifications.
 - c. The vehicle must be kept in satisfactory condition to assure the safety of occupants. Vehicle tires, brakes, and lights must meet safety standards set by the Colorado Department of Revenue, Motor Vehicle Division.
 - Seating must be comfortable with a seat of at least ten (10) inches wide for each child.
 - e. The provider must not transport more children than any vehicle is able to safely accommodate when child restraint systems and seat belts are properly installed in the vehicle. Two (2) or more children must never be restrained in one (1) seat belt or child restraint system.
 - f. Modifications to vehicles including, but not limited to, the addition of seats and seat belts must be completed by the manufacturer or an authorized representative of the manufacturer. Documentation of such modifications must be available for review.

- 2. In passenger vehicles, which include automobiles, station wagons, and vans with a manufacturer's established capacity of sixteen (16) or fewer passengers and less than 10,000 pounds, the following is required:
 - a. Each child must be restrained in an individual seat belt.
 - b. Two or more children must never be restrained in one seat belt.
 - Lap belts must be secured low and tight across the upper thighs and under the belly.
 - d. Children must be instructed and encouraged to keep the seat belt properly fastened and adjusted.
- 3. In vehicles with a manufacturer's established capacity of sixteen (16) or more passengers, seat belts for passengers are not required.
- C. Requirements for Drivers of Vehicles
 - 1. All drivers of vehicles transporting children must comply with applicable laws of the Colorado Department of Revenue, Motor Vehicle Division, and ordinances of the municipality in which the center operates.
 - 2. All drivers of vehicles owned or leased by the center in which children are transported must have a current department- approved First Aid and safety certificate that includes CPR for all ages of children.
 - 3. In each vehicle used to transport children, drivers must have access to a First Aid kit.
 - 4. The driver must ensure that all doors are secured at all times when the vehicle is moving.
 - 5. The driver must make a good faith effort to ensure that each child is properly belted throughout the trip.
 - 6. The driver shall not eat, smoke or use a cellular device while driving.
 - 7. The required staff to child ratio shall be maintained at all times.
 - 8. All drivers must be at least twenty (20) years of age.
 - 9. Drivers must complete a minimum of four (4) hours of Department approved driver training. The Department's approval will be based on the review of a training curriculum that includes at a minimum: behind the wheel training; participant transport attendance procedures including taking attendance at the destination; managing behavioral issues; loading and unloading procedures; daily vehicle inspection procedure; proper tire inflation; emergency equipment and how to use it; accident procedures; passenger illness procedures; procedures for backing up; and vehicle evacuation.

7.702.6

7.702.61

- A. Indoor and outdoor play equipment and materials must be appropriate for children's ages, size, and activities.
- B. Indoor and outdoor materials and equipment must be sufficiently varied and appropriate for the developmental needs of the children and the number attending.
- C. Indoor and outdoor equipment, materials, and furnishings must be sturdy, safe, and free of hazards.
- D. Any permanently installed indoor climbing equipment or indoor portable climbing equipment eighteen (18) inches or higher must have protective surfacing meeting current federal safety requirements. Protective surfacing must be installed according to manufacturer's instructions, underneath and in the use zone surrounding the equipment.
- E. Mats manufactured for indoor climbing equipment over eighteen (18) inches or higher must meet current federal safety requirements. Written documentation from manufacturer must be available for review at all times.
- F. Durable furniture such as tables and chairs must be child-sized or appropriately adapted for children's use.
- G. Children must wear helmets when riding scooters, bicycling, skateboarding, or rollerblading.
- H. In infant nurseries, an adequate number of high chairs or other suitable pieces of equipment that meet federal Consumer Product Safety Commission standards must be provided for infant feeding.
- I. The infant program must have an adult rocking chair.
- J. For every five (5) infants for which the center is licensed there must be at least one (1) piece of sturdy mobile equipment that is easily accessible to effectively evacuate infants.
- K. Evacuation equipment must not block exit routes. Nothing may be stored in or under any evacuation equipment.

Evacuation equipment must:

- 1. Be located in the room or immediately outside the interior classroom door;
- 2. Be labeled for easy identification;
- Be ready for use; and,

- 4. Fit through doorways.
- L. If a crib is not designed for emergency evacuation, the crib must be reinforced with a kit manufactured for this purpose.

7.702.62 Play-Equipment and Materials [Rev. eff. 2/1/16]

- A. Equipment and materials must be provided for both indoor and outdoor play.
- B. Outdoor play equipment must meet the following requirements:
 - 1. Swings must have seats made of a flexible material.
 - Moving equipment must be located toward the edge or corner of a play area or be designed in such a way as to discourage children from running into the path of the moving equipment.
 - 3. Metal equipment must be placed in the shade when possible and must be arranged so that children playing on one piece of equipment will not interfere with children playing on or running to another piece of equipment.
 - 4. The maximum height of any piece of playground equipment is six (6) feet if accessible to children 2-1/2 to 6 years of age, and three (3) feet if accessible to children less than 2-1/2 years of age.
 - 5. All pieces of playground equipment must be designed to guard against entrapment and strangulation.
 - 6. Portable climbing equipment eighteen (18) inches or higher must have protective surfacing, meeting current federal safety requirements, underneath and in the use zone surrounding the equipment, and installed according to manufacturer instructions.
 - 7. All pieces of permanently installed playground equipment must be surrounded by a resilient surface of a depth of at least 4 inches. For equipment over three (3) feet in height, resilient material must be a depth of at least six (6) inches. Mats manufactured for resilient material for both equipment heights must meet current federal safety standards. Written documentation from manufacturer must be available for review at all times.
 - 8. Sand used as a resilient surface must be raked regularly to retain its resiliency and to retain a depth of at least six (6) inches.
 - 9. Department approved resilient surfacing includes loose fill materials such as wood chips, wood mulch, engineered wood fiber, pea gravel, synthetic pea gravel, shredded rubber tires, and fine loose sand. Solid unitary materials include poured in place surfacing, approved rubber mats, playground tiles, and astro turf with built in resilient pad.
- C. The center must have enough play materials and equipment so that at any one time each child for which the center is licensed can be individually involved. Separate play rooms or separate interest centers must be provided for each category of equipment required for the program. A variety of material and equipment from the following categories must be available.
 - 1. Art Supplies;
 - 2. Blocks and Accessories;

Books and Posters;

Dramatic Play Area;

3.

4.

	5.	Large Muscle Equipment;			
	6.	Manipulative Toys;			
	7.	Musical Equipment;			
	8.	Science Materials.			
D.	If the center serves school-age children, it must have some age-appropriate materials and equipment from each of the following categories:				
	1.	Arts and Crafts;			
	2.	Games;			
	3.	Sports;			
	4.	Science;			
	5.	Library.			
E.	An appropriate supply of play materials must be readily accessible to children and must be arranged in an orderly manner so that children can select, remove, and replace the play materials either independently or with minimum assistance.				
F.	Toys, toy parts, furnishings, equipment and materials accessible to children less than three (3) years of age must not be a choke hazard or able to be inhaled. Any area of the facility accessible to children less than three (3) years of age must be free of any choke or inhalation hazards.				
G.		by parts, furnishings, equipment and materials made of brittle, easily breakable plastic or re not permitted for children less than five (5) years of age.			
J.	not limi	child care centers must provide access to indoor large muscle equipment, including, but ted to, an indoor climbing structure, an open area for indoor large muscle games, and rovide large muscle activities at least two times during each six (6) hour period of time.			

K. Drop-in centers providing an indoor climbing structure must have protective surfacing underneath and in the use zone surrounding the equipment meeting current federal safety requirements.

7.702.63 Rest Time Equipment [Rev. eff. 2/1/16]

- A. A firm cot or two (2) inch mat with a sheet and blanket or other suitable covering must be provided for each preschool child remaining in the center more than five (5) hours.
- B. Cots or pads must be spaced at least two (2) feet apart on all sides during rest time. Children must have a safe area in which to rest.
- C. When the room provided for rest is used for other program activities, the cots, pads, and linens must be stored in an area that is not included in the required square footage assigned for play space.
- D. In rooms used for napping, the light must be dim at nap time to promote an atmosphere conducive to sleep.

7.702.7 BUILDINGS AND FACILITIES [Rev. eff. 2/1/16]

7.702.71 Building Site [Rev. eff. 2/1/16]

A. General

- 1. Centers can be located in a private residence only when that portion of the residence to which children have access is used exclusively for the care of children during the hours the center is in operation or is separate from the living quarters of the family.
- 2. No other business can operate in the rooms used by the center during the hours of child care.
- 3. Rooms licensed for specific ages of children cannot be used for other ages of children without the prior written approval of the licensing authority.

7.702.72

- A. The center must comply with applicable state and local building code and zoning regulations.
- B. Prior to construction, architectural plans for new buildings or for extensive remodeling of existing buildings must be submitted for review and approval by the Department, the local fire department, and the local building department as to appropriateness, adequacy, and suitability for child care functions.

7.702.73 Space Requirements [Rev. eff. 2/1/16]

- A. Indoor Area Requirements
 - 1. There must be open, indoor play space of at least thirty (30) square feet of floor space per child, including space for movable furniture and equipment. Indoor space must be exclusive of kitchen, toilet rooms, office, staff rooms, hallways and stairways, closets, laundry, furnace rooms, and space occupied by permanent built-in cabinets and permanent storage shelves inaccessible to children.
 - Child care centers in operation prior to January 1, 1966, and which continue operation under the same governing body, must provide open indoor play space of at least twenty-five (25) square feet of floor space per child, including space for readily movable furniture and equipment, and with the exclusions noted in the preceding paragraph.
 - 2. Adequate storage space must be provided for indoor and outdoor equipment and supplies. Space for reserve supplies must be in addition to the designated space allotment for children's play activities.
 - 3. Diaper change areas must be located and arranged so as to provide privacy for older children in need of diaper changing. See also Section 7.702.53, B.

5. Square Footage Requirement per Child

AGE OF CHILD	SEPARATE FREE PLAY AREA	SEPARATE SLEEP AREA	COMBINED SLEEP AND PLAY AREA
6 weeks to 18 months (infants)	35 square feet	adequate space to accommodate size of cribs and needs of infants and staff	50 square feet
12 months to 36 months (toddlers)	30 square feet	30 square feet	45 square feet
2-1/2 years to 5 years (preschool)	-	-	30 square feet
5 years and over (schoolage)	-	-	30 square feet

B. Outdoor Area Requirements

- 1. The center must provide an outdoor play area that is adjacent to or safely accessible to the indoor facilities. When the area is not adjacent, staff members must accompany children to and from the play area. Drop-in child care centers are not required to provide an outdoor play area.
- 2. The outdoor play area must provide a minimum of seventy-five (75) square feet of space per child for a group of children using the total play area at any one time. The total play area must accommodate at least thirty-three percent (33%) of the licensed capacity of the center or a minimum of 1500 square feet, whichever is greater.
- 3. The play area must be fenced or have natural barriers, such as hedges or stationary walls at least four (4) feet high, to restrict children from unsafe areas.
- 4. The play area must be designed so that all parts are visible and easily supervised.
- 5. The playground area must have at least two (2) different types of surfaces. Each type of surface must cover at least ten percent (10%) of the playground area.
- 6. A shaded area in the fenced play area of at least one hundred fifty (150) square feet must be provided by means of trees or other cover to guard children against the hazards of excessive sun and heat.
- 7. In the infant program, the outdoor play area must be a minimum of four hundred (400) square feet.

7.702.74

7.702.75 Toilet Facilities [Rev. eff. 2/1/16]

- A. Toilet facilities for the staff and other adults must be in separate compartments or separated by a partition from children's facilities, except in centers licensed for thirty (30) or fewer children and in centers with programs of four (4) hours or less.
- B. Toilet rooms for children must be separate from rooms used for other purposes and must be located on the same floor as the inside play area.
- C. A minimum of one (1) lavatory and one (1) flush toilet must be provided for each 15 or fewer children. Drop-in child care centers must provide a minimum of one 1 lavatory and one 1 flush toilet for each 20 or fewer children.
- D. The same toilet facilities must not be used simultaneously by school-age children of both sexes, and toilets for school-age children must be separated by partitions to provide privacy.
- E. Toilet facilities are not required for children less than two (2) years of age.
- F. Toilet facilities must be provided for children two (2) years of age and older.
- G. Toilet rooms for children must be located within the toddler program. Drop-in child care centers need not provide a toilet in the toddler classroom if the facility is licensed for ten (10) or fewer toddlers. A diaper change table and hand washing sink is required in every toddler classroom meeting requirements at Section 7.702.53, B.
- H. Each infant classroom must have one diaper changing station and hand washing sink meeting requirements at Section 7.702.53, B.
- I. One designated diaper change area is required for every twenty-four (24) preschool age children.

7.702.76 Office Facilities [Rev. eff. 2/1/16]

- A. Office space separate from areas used by children, other than for isolation purposes, must be provided for staff to perform administrative duties.
- B. The office must have sufficient space for maintenance and safe storage of children's and staff records and the center's business records.

7.702.8 FIRE AND OTHER SAFETY REQUIREMENTS [Rev. eff. 2/1/16]

7.702.81 General Requirements [Rev. eff. 2/1/16]

- A. Buildings must be kept in good repair and maintained in a safe condition.
- B. Major cleaning is prohibited in rooms occupied by children.
- C. Volatile substances such as gasoline, kerosene, fuel oil, and oil- based paints, firearms, explosives, and other hazardous items must not be stored in any area of the building used for child care. Plastic bags and sharp tools and instruments must be stored in areas inaccessible to children.
- D. Combustibles such as cleaning rags, mops, and cleaning compounds must be stored in well-ventilated areas, separated from flammable materials, and stored in areas inaccessible to children.

- E. All heating units, gas or electric, must be installed and maintained with safety devices to prevent fire, explosions, and other hazards. No open-flame gas or oil stoves, unscreened fireplaces, hot plates, or unvented heaters can be used for heating purposes. All heating elements, including hot water pipes, must be insulated or installed in such a way that children cannot come in contact with them.
- F. Nothing flammable or combustible can be stored within three (3) feet of a furnace or hot water heater.
- G. In rooms used by children, all electrical outlets that are accessible to children must have protective covers, or safety outlets must be installed.
- H. Except in part-day preschools, permanently located battery-powered lights must be provided in locations readily accessible to staff in the event of electric power failure. Batteries must be checked regularly.
- Closets, attics, basements, cellars, furnace rooms, and exit routes must be kept free from accumulation of extraneous materials such as discarded furniture, furnishings, newspapers, and magazines.
- J. Children less than two (2) years of age must be excluded from the kitchen. When children age two (2) and older prepare food at the center, they may use only equipment and appliances that do not present a safety hazard. Staff-child ratios must be maintained.
- K. First Aid supplies must be maintained and made accessible to staff throughout the center and stored in areas inaccessible to children.
- L. All outdoor areas available to children's activities must be maintained in a safe condition by removal of debris, dilapidated structures, broken or worn play equipment. The center must identify hazardous, high-risk areas. These areas must be made inaccessible to children.
- M. Playground surfaces must be checked on a daily basis for the presence of dangerous or other foreign materials. Playground equipment must be checked for safety on a monthly basis.
- N. Window blind cords must be secured out of children's reach to prevent strangulation.
- O. Items labeled "keep out of reach of children" must be inaccessible to children.
- P. Staples must be inaccessible to children less than three (3) years of age.
- Q. Thumb tacks must not be used in areas accessible to children less than three (3) years of age.

7.702.82 Fire Safety [Rev. eff. 2/1/16]

- A. Every building and structure must have sufficient exits to permit the prompt escape of occupants in case of fire or other emergency. Additional safeguards must be provided for life safety in case any single safeguard is ineffective due to some human or mechanical failure.
- B. Every building or structure must be constructed, arranged, equipped, maintained, and operated as to avoid undue danger to the lives and safety of its occupants from fire, smoke, fumes, or resulting panic during the period of time reasonably necessary for escape from the building or structure in case of fire or other emergency.

- C. In every building or structure, exits must be arranged and maintained so as to provide free and unobstructed egress from all parts of the building or structure at all times when it is occupied. No lock or fastening to prevent free escape from the inside of any building can be installed. Only panic hardware or single-action hardware is permitted on a door or on a pair of doors. All door hardware must be within the reach of children.
- D. No child of less than first grade school level can be cared for in areas above or below the main floor of exit unless allowed by the Uniform Building Code and approved by the local fire department.
- E. One exit from each room must be directly to the exterior of the building or to a common hallway leading to the exterior. The exit path must not go through another classroom to get to the hallway.
- F. Each center must have at least two (2) approved, alternate means of egress from each floor of the building or to a common hallway leading to the exterior. They must be at different locations.
- G. All stairways, interior and exterior, that are used by children must be provided with handrails within reach of the children.
- H. If the center has a security lock on outside exit doors, the center must obtain written permission from the local fire department; and there must be a written sign attached to the door instructing center staff that the security lock is not to be utilized when children are present at the center.
- I. Every exit must be clearly visible, or the route to reach it must be conspicuously indicated. Each path of escape must be clearly marked.
- J. Every building and structure must have an automatic or department- approved manually operated fire alarm system to warn occupants of the existence of fire or to facilitate the orderly conduct of fire exit drills.

7.702.90 RECORDS AND REPORTS [Rev. eff. 2/1/16]

7.702.91 Children's Records [Rev. eff. 2/1/16]

The center must maintain and update annually a record on each child that includes:

- A. The child's full name, birth date, current address, and date of enrollment.
- B. Names and home and employment addresses and telephone numbers of parents or quardians.
- C. Any special instructions as to how the parents or guardians can be reached during the hours the child is at the center.
- D. Names, addresses, and telephone numbers of persons authorized to take the child from the center.
- E. Names, addresses, and telephone numbers of persons who can assume responsibility for the child in the event of an emergency if parents or guardians cannot be reached immediately.
- F. Name, address, and telephone number of the child's physician, dentist, and hospital of choice.
- G. Health information, including medical report, chronic medical problems, and immunization history.

- H. A dated written authorization for emergency medical care signed and updated annually by the parent or guardian. The authorization must be notarized if required by the local hospital, clinic, or emergency health care facility.
- Written authorization from a parent or guardian for the child to participate in field trips or excursions, whether walking or riding.
- J. Injury and illness record.
- K. Reports of serious injuries and accidents occurring during care that result in the hospitalization or death of a child.
- L. Significant observations of the child's development.
- M. A record of parent conferences, including dates of conferences and names of center staff and parents or guardians involved.

7.702.92 Staff Records [Rev. eff. 2/1/16]

- A. The center office must maintain a record for each staff member that includes the following:
 - 1. Name, address, telephone number, and birth date of the individual.
 - 2. Verification of education, work experience, employment, training, and completion of first aid and CPR courses.
 - 3. Immunization record and health examination reports.
 - Date of employment.
 - 5. Names, addresses, and telephone numbers of persons to be notified in the event of an emergency.
 - 6. Information received from the State Department's automated system and the Colorado Bureau of Investigation (may be retained in a confidential file).
- B. Each staff member's personnel file must contain all required information within thirty (30) business days of the first day of employment.

7.702.93 Administrative Records and Reports [Rev. eff. 2/1/16]

- A. The following records must be on file at the center:
 - 1. Records of enrollment, daily attendance for each child, and daily record of the time the child arrives at and departs from the center.
 - 2. Current health department inspection report issued within the past twenty-four (24) months.
 - 3. Current fire department inspection report issued within the past twenty-four (24) months.
 - 4. A list of current staff members, substitutes, and staffing patterns.
 - 5. Copies of menus.

- 6. A record of visitors to the center.
- B. Each center must immediately report in writing to the Colorado Department of Human Services any accident or illness occurring at the center that resulted in medical treatment by a physician or other health care professional, hospitalization, or death. This report must be made within 48 hours after the accident or illness occurred.
- C. A report about a fatality must include:
 - 1. The child's name, birth date, address, and telephone number.
 - The names of the child's parents or guardians and their address and telephone number if different from that of the child.
 - Date of the fatality.
 - 4. Brief description of the incident or illness leading to the fatality.
 - 5. Names and addresses of witnesses or persons who were with the child at the time of death.
 - 6. Name and address of police department or authority to whom the report was made.
- D. Within forty-eight (48) hours of the incident, the center must submit a written report to the State Department about any child who has been lost from the center and for whom the local authorities have been contacted. Such report must indicate:
 - 1. The name, birth date, address, and telephone number of the child;
 - The names of the parents or guardians and their ad dress and telephone number if different from those of the child:
 - The date when the child was lost;
 - 4. The location, time, and circumstances when the child was last seen;
 - Actions taken to locate the child;
 - 6. The name of the staff person supervising the child.
- E. The center must report to the Colorado Department of Public Health and Environment or its local unit any communicable illness, including but not limited to measles, mumps, diphtheria, rubella, tuberculosis, shigella, hepatitis, meningitis, salmonella, or giardia, contracted by a staff member or a child at the center.

7.702.94 Confidentiality and Retention [Rev. eff. 2/1/16]

- A. The confidentiality of all personnel and children's records must be maintained. See Section 7.701.7 in the General Rules for Child Care Facilities.
- B. Personnel and children's records must be available, upon request, to authorized personnel of the State Department.