

From the Desk of Suzette Frazier, Regional Safety Program Manager Department of Children and Families Child Care Licensing

This Q & A session was taken from a recent Florida Association for the Education of Young Children (FLAEYC) and DCF Child Care Program Office (CCPO) conference call. It contains several Frequently Asked Questions that may be beneficial to providers.

Q: Children with severe allergies may need EPI pens. What is the regulation on these pens? Where should the pens be kept and what type of authorization needs to be in place?

A: The EPI pen is medication and must be handled according to 65C-22.004(3), F.A.C. Written authorization from the child parent/legal guardian must be provided before medication is dispensed. Additionally, the facility must maintain a record each time a child is given medicine at the facility; this record must include the child's name, name of medication, the date, the time medication was dispensed, the dosage of amount, and the name of the person dispensing the medication. Medication must have a child restraint cap, if applicable, and shall either be stored in a locked area out of the reach of children. The use of an EPI apron is allowable as long as when it is not being worn it is stored in a place inaccessible to the children. During field trips, allergy medication and authorization forms should also be available.

Q: What is the proper way of warming up bottles within regulations?

A: According to the American Academy of Pediatrics, acceptable methods of heating bottles are by using a bottle warmer, warm running water, a crock pot, a pot on the stove, or a bowl of hot water heated in the microwave. Bottles and infant foods should never be warmed in a microwave oven.

Q: Are the creams for diaper rash considered medication and if so, do we need written authorization from parent? (Same for Baby Oragel, gas relief drops, etc.)?

A: Yes for all, including sunscreen and mosquito repellent. Time parameters should be established on the authorization form by the parent. Medication that is used on an "as needed" basis must be documented by the parent on the authorization form.

Q: Can bottles contain cereal when feeding?

A: According to the American Academy of Pediatrics, bottles mixed with cereal, or any other foods should not be served unless the child's doctor provides written documentation that the child has a medical reason for this type of feeding. In this regard, cereal in bottles would meet the definition of medication in the previous question. Bottles that are supplied by parents must comply with the

statement above. If a parent brings in a bottle with cereal, they must provide written documentation from the child's doctor for this feeding method. If a parent brings in a bottle with medication in it, they must discontinue immediately and fill out a medical authorization form so that medication is dispensed properly.

Q: If a teacher had a "delinquency of a minor" offense on her FDLE record and the charges were dropped, where does she sign (which line) on the affidavit of good moral character?

A: The second line should be used in this case because the offense will still be a part of this individual's record. The statement is as follows:

To the best of my knowledge and belief, my record contains one or more of the applicable disqualifying acts or offenses listed above. I have placed a check mark by the offense(s) contained in my record. (If you have previously been granted an exemption for this disqualifying offense, please attach a copy of the letter granting such exemption.) (Please circle the number which corresponds to the offense(s) contained in your record.)

SIGNATURE OF AFFIANT: _____

Q: Are there any regulations on Social Security numbers in children's files? Do we need to obtain SS numbers at all?

A: No, the social security number may be captured on the child's immunization record; however, this field is optional. If social security numbers are captured, keep in mind that this information is confidential and must be kept private. Providers may also redact social security numbers using black ink.

Q: When will DCF roll out the changes to the Part II Mandated Training courses?

A: The proposed timeframe is late 2012. Changes to the Part II training courses will affect Large Family Child Care Homes and Child Care Facilities. Therefore, both Chapters 65C-22 and 65C-20 must be open simultaneously to make proposed changes to the training courses. The Program office will coordinate rule development for Training updates after the current proposed rule for Food Hygiene is adopted.

Q: If you have one year olds in a classroom, and it is a 6:1 teacher/staff ratio, why is it that some directors think that it is okay at nap time when you have more than 6 children, that it is okay for one of the teacher's to go to lunch and be out of the room for a period of time 30 min. or more? The way I read the rules is that if you have more than six 1-year-olds there should always be two teachers at all

times within hearing and eyesight. Am I correct on this? Where I work at I constantly have to remind the director of this rule, and if we have more than 12 1-year-olds, there must be three teachers in the room.

A: 65C-22.001(5)(b) states, “(b) During nap time, supervision requires that staff be in close proximity, within sight and hearing of all the children. All other staff required to meet the staff-to-child ratio shall be within the same building on the same floor, and must be readily accessible and available to be summoned to ensure the safety of the children. Nap time supervision, as described in this Section, does not include supervision of children up to 24 months of age, who must be directly supervised at all times. Direct supervision means watching and directing children’s activities within the same room or designated outdoor play area, and responding to the needs of each child.

In the scenario described above, the one-year-old room must comply with staff-to-child ratio at all times, including naptime. Meaning that if the staff-to-child ratio during wake time is 2:12, during naptime, the required staff-to-child ratio is also 2:12, and staff must be in the same room where the children are napping.

Q: Can you have a temporary fence up in the playground for one-year-olds until you can get up a permanent fence?

A: 65C-22.002(4)(e) requires “(e) The outdoor play area shall have and maintain safe and adequate fencing or walls a minimum of four feet in height. Fencing, including gates, must be continuous and shall not have gaps that would allow children to exit the outdoor play area. The base of the fence must remain at ground level and be free from erosion or build-up to prevent inside or outside access by children or animals.”

Circumstances (e.g., storm damage) may destroy a fence or some other repair may require it to be temporarily out of service, but there should be a plan in place to return the fence to working condition ASAP. In the interim, provisions such as temporary fencing, suspension of outdoor play for a day or two, additional supervision, etc., are possible options. However, the emphasis needs to be on fixing the permanent fence. A temporary fence may be used if it meets all fence standards in 65C-22.002(4)(e): *minimum of four feet; shall be continuous with no gaps that would allow a child to exit the play area, no erosion, and no buildup.*

Q: Can a teacher be a lead teacher if they only have their 40 hours, and the assistant has at least a CDA?

A: For the purposes of licensing, all childcare personnel must complete 40 hours of training plus 5 hours of Early Literacy training. The total number of credentialed staff is based on a 1:20 ratio throughout the facility. It is not a requirement that each classroom have a credentialed staff member assigned. Credentialed staff members do not have to be the lead teacher.

Q: Can you use those Clorox cloths to disinfect, and clean the rooms?

A: Yes.

Q: Why is it that when inspectors come to centers they do not check to see if there are thermometers in the refrigerators?

A: That requirement is not currently in Rule. However, staff have been directed to monitor this issue to ensure the health and safety of the children in care. Staff will be reminded of this issue.

Q: In reference to the 2011 Florida Statute #1002.65 regarding credentials, by the 2013-2014 school year, all VPK lead classroom teachers must hold a bachelor's degree.

We have a teacher on staff with an associate's degree and all the necessary VPK staff credentials. Will there be a "grandfather" clause, or is this a mandate? If so, do all these teachers have to begin to earn their degrees? Must all requirements be met by August 2013?

A: 1002.65 (2)(a), Florida Statute, states the following:

(a) By the 2010-2011 school year:

1. Each prekindergarten class will have at least one prekindergarten instructor who holds an associate's or higher degree in the field of early childhood education or child development; and
2. For each prekindergarten class composed of 11 or more students, in addition to a prekindergarten instructor who meets the requirements of subparagraph 1., the class will have at least one prekindergarten instructor who meets the requirements of s. 1002.55(3)(c).

(b) By the 2013-2014 school year, each prekindergarten class will have at least one prekindergarten instructor who holds a bachelor's or higher degree in the field of early childhood education or child development.

Senate Bill 856 by Senator Nan Rich has been introduced this legislative session that repeals 1002.65. This is only a proposed bill. The language cited above for 1002.65(2)(a), F.S., is the current law on this issue. 1002.65, F.S., is regulated by the Florida Department of Education. You can view a copy of the Senator Rich's proposed bill at <http://www.flsenate.gov/Session/Bill/2012/856>.

Please refer to the DOE Office of Early Learning for further questions regarding s. 1002.65, F.S.

Q: How often do we have background screenings? Yearly? Does this also apply to substitutes and assistants?

A: Level 2 background screening is required prior to initial employment, after a 90-day break in service, and every 5 years (including fingerprinting) thereafter; or, (per the DCF background screening website), if the employer has any reason to believe the individual is ineligible for employment. If an employer has reason to believe that a current employee is or may be ineligible for employment due to having been arrested with disposition pending for, having been found guilty of, or entered a plea of nolo contendere or guilty to any disqualifying offense, the employer should immediately have the employee rescreened to confirm and determine the employee's eligibility or ineligibility for employment.

Q: How long are we required to keep children's records? Employee records?

A: Please see 65C-22.006, F.A.C., as there may be different retention periods based on the particular records. For example, field trip permission forms (4mos), Medication dispense forms (4mos), and Accident/incident report (1yr). There is no set time frame established in Child Care rule or statute for the retention of the Child enrollment form or employment application. Keep in mind that employee and children files contain confidential information. Please ensure that documents are handled appropriately when being disposed.

Q: If a child is not picked up by closing and the providers call all the phone numbers the parent left and they are either disconnected or no one answers, what does DCF say we do?

A: First, and foremost, someone must stay with the child until he or she is picked up or arrangements are made to unite them with a parent or guardian. Ultimately, if every effort made to contact a parent/guardian is unsuccessful, consider contacting law enforcement with the idea that some intervening (emergency) incident has occurred to prevent the individual from picking up the child. Keep in mind that law enforcement will take the report but it will not be a high priority on the list.

"Late pick-ups" need to be addressed in the parent handbook so parents are aware that they will be held accountable for late fees, etc. If late pick-ups continue to be (routinely) a problem, which requires staff to be inconvenienced, the director should address this with the parent. Ultimately, this may result in dismissal of the child from care if the parent does not address the situation. Again, the conditions under which the child can be disenrolled should be clearly outlined in the parent handbook.

According to hotline staff, the amount of time elapsed from the time the center closes and when a phone call should be made to the hotline depends on the circumstances and the condition of the child. Is this the first time or is it reoccurring? What personal obligations does the person in care of the child have? Is the child displaying any symptoms? Please consider these questions when faced with this situation.

Q: Who is responsible for in-service for a new employee that completed introductory training in 2008 but has no record of in-service since then? Specifically a high school student that completed introductory training while in school but never actually worked in childcare.

In this scenario, since the individual was not employed during the previous fiscal year, in-service is not required. As the new employer, in-service training is required if the individual is hired between July 1 and June 1 of the state's fiscal year. Please refer to 65C-22.003(6) Florida Administrative Code for further detail.