

COLORADO DEPARTMENT OF EARLY CHILDHOOD HUMAN SERVICES

Division of Early Learning, Licensing, and Administration Social Services Rules

CHILD CARE FACILITY LICENSING RULES AND REGULATIONS

8 CCR 1402-112 CCR 2509-8

2.300 ~~7.707~~ RULES REGULATING FAMILY CHILD CARE HOMES

All family child care homes must comply with the “General Rules for Child Care Facilities”, “Rules Regulating Special Activities”, and the “Rules Regulating Family Child Care Homes.”

2.301 AUTHORITY

These rules and regulations are adopted pursuant to the rulemaking authority provided in sections 26.5-1-105(1), 26.5-3-702(1)(d), and 26.5-5-314(1), C.R.S., and are intended to be consistent with the requirements of the State Administrative Procedures Act, sections 24-4-101 ~~et seq. through 24-4-204~~ (the “APA”), C.R.S., the Anna Jo Garcia Haynes Early Childhood Act, sections 26.5-1-101 ~~et seq.~~ Title 26.5 of the C.R.S. (the “Early Childhood Act”), C.R.S., the Child Care Licensing Act, sections 26.5-5-301 ~~et seq. through 26.5-5-329~~, C.R.S.; and the Child Care Development and Block Grant Act of 2014, 42 U.S.C. sec. 9858e

2.302 SCOPE AND PURPOSE

The Colorado Department of Early Childhood, Division of Early Learning, Licensing, and Administration is responsible for the administration of health and safety rules and requirements for licensed child care facilities. These rules outline the requirements for family child care homes operating less than twenty-four (24) hours, and govern the health and safety requirements for licensed family child care home providers in Colorado. All primary family child care home providers must comply with the “General Rules for Child Care Facilities” in rule section 2.100, “Rules Regulating Family Child Care Homes” in this rule section 2.300, and the “Rules Regulating Special Activities” in rule section 2.600.

2.303 APPLICABILITY

The provisions of these rules and regulations shall be applicable to facilities for child care operated with or without compensation or educational purposes in a place of residence of a family or person, for the purpose of providing less than twenty-four (24) hour care for children under the age of eighteen (18) years who are not related to the head of such home.

7.707.1 (None)

2.304 ~~7.707.2~~ DEFINITIONS AND TYPES OF FAMILY CHILD CARE HOMES

A.7.707.24 Definitions for family child care homes

1. “AAP” means the American Academy of Pediatrics.

2. “ASTM” means the American Society for Testing and Materials. ASTM is an organization that coordinates the development of voluntary industry standards that supplement mandatory standards such as information to the public on Standard Consumer Safety Specification on Toy Safety (ASTM F-963) and other voluntary standards that cover specific children’s products.
3. “Accessible” means children being able to obtain equipment and materials without adult aid, may be age/development specific.
- ~~“Age of child(ren) in child care” means any child(ren) that will count towards provider’s license capacity, is between the age of birth to eighteen years of age, is in care for supervision in the parent(s) absence for a part or the whole of any day, and is not the provider’s own child(ren).~~
- ~~“Age of provider’s own child(ren) that counts towards license capacity” means any birth, adopted, step or foster child(ren) of a provider whose age ranges from birth to twelve years of age.~~
4. “Approved sleeping equipment” means equipment that is appropriate for the age of the child, is intended for sleep or rest, and allows the child freedom of movement in a safe and sanitary manner.
5. “Applicant 2” means an individual that resides in the family child care home and provides care regularly, in a recurring pattern. An Applicant 2 and must have the same required training as the Primary Provider as specified in these “Rules Regulating Family Child Care Homes.” Applicant 2 is legally liable for the business.
6. “Available” means materials or equipment that is not immediately accessible to children, but which may be introduced with adult aid.
7. “Blocked telephone” means a telephone that will not accept telephone calls when caller ID says “unavailable.” This does not include telephones that require the caller to enter a ten digit telephone number from the telephone that is being called from or require the provider to have their name listed in a telephone directory.
8. “Child Care Health Consultant (CCHC)” means a medical professional who assists the program in meeting and exceeding basic health and safety standards. A child care health consultant must meet one of the following qualifications: a Licensed Registered Nurse with knowledge and experience in maternal and child health; a Pediatric Nurse Practitioner; a Family Nurse Practitioner; or, a Physician with knowledge and experience in pediatrics or maternal and child health.
9. “Choking hazard” means an item that presents the possibility of restriction or elimination of airflow into the lungs.
10. “CPR training” means cardiopulmonary resuscitation for adult, infant, and child.
11. “Clean” means to be free of visible dirt and debris or to remove dirt and debris by vacuuming or scrubbing and washing with soap and water.
12. “Complaint severity level” means the level of seriousness (zero to five) the ~~State~~ Department assigns to a complaint reported against a family child care home based on the severity of the allegation(s). The severity level assigned determines the timeframe in which the allegation(s) must be investigated by the licensing specialist.
13. “Compromise” means to expose to possible loss or danger.

14. “Culturally sensitive” means to encourage, share and explore the differences and similarities of heritage, ~~and~~ culture, language, race, and its effect on learning, values, and behavior.
15. “~~Corrective~~ ~~stedia~~ or controlling speech” means using speech to direct or influence authority over a child(ren) by the use of directive speech to change a behavior.
16. “Danger” means exposure to harm or injury.
17. “Decorative pond” means a small- or medium-sized ~~a~~ artificially confined body of water ~~which is usually smaller than a lake~~. The pond can be decorated with large and small rocks, water lilies, pond plants, tadpole, fish, and have features such as lights, waterfalls and fast moving water.
18. “Department” means the Colorado Department of Early Childhood.
19. “Derogatory” means to belittle, diminish, and express criticism or a low opinion of.
20. “Developmentally appropriate” means to provide an environment where learning experiences are meaningful, relevant, and are based upon a child’s individually identified strengths and weaknesses, interests, cultural background, family history and structure.
21. “Director” means an individual that has been evaluated and received a written letter that verifies that he/she meets the Colorado State Director qualification requirements for a large child care center.
22. “Discipline” means to punish in order to bring a child’s behavior under control.
23. “Disinfect” means to eliminate most or all pathogenic microorganisms, with the exception of bacterial spores by using effective bactericidal heat or concentration of chemicals which are germs from inanimate surfaces through the use of chemicals (e.g., products registered with the U.S. Environmental Protection Agency as “disinfectant”) or a solution of household liquid chlorine bleach and water. This is generally accomplished in a child care setting by the use of liquid chemical solutions such as a mixture of household bleach and water.
24. “Early Childhood Mental Health Consultant” (ECMHC) means the same as “mental health consultant” in section 26.5-3-701(1), C.R.S. ECMHCs a consultant who provides culturally sensitive and primarily indirect services for children, birth through six years of age in group care and early education settings.
25. “Early Childhood Mental Health Consultation services” means the provision of services that promote social and emotional development in children and transform children’s challenging behaviors. This includes capacity building for providers and family members; directly observing and interacting with children and the care giving environment; and designing and modeling interventions that involve changes in the behaviors of family members and caregivers. It also includes collaboration with providers, employees, volunteers, and family members and caregivers who intervene directly with children in group care, early education and/or home settings.
26. “~~EQ~~ ~~ITEQIT~~” means the Department approved Expanding Quality in Infant Toddler (EQIT) Care Course Infant/Toddler training for child care providers.
27. “Emergency” means a sudden, urgent, usually unexpected occurrence or occasion requiring immediate action or a personal or family situation that is critical in nature, which

requires the provider to take immediate action and leave the home to handle the emergency.

- ~~27. "Emergency or urgent situation" means a personal or family situation that is critical in nature, which requires the provider to take immediate action, and leave the home to handle the emergency or urgent situation.~~
- ~~28. "Emergency Substitute" means an individual that is responsible for supervising children in the event of an emergency.~~ ~~29. "Employee" means paid or unpaid individual that cares for or assists with the care of children or any individual that is allowed unsupervised access to children.~~
29. "Equally qualified provider" means ~~an~~that the employee ~~or substitute provider that~~ has the same required trainings and qualifications as the primary provider as specified in the se "Rules Regulating Family Child Care Homes."
30. "Extreme weather" means weather conditions that require unusual or immediate action to reduce exposure to harm or injury.
31. A "Family Child Care Home" (FCCH) ~~has the same meaning as set forth in section 26.5-5-303(7), C.R. S~~is a type of family care home that provides less than twenty-four (24) hour care at any time for two (2) or more children that are unrelated to each other or the provider, and are cared for in the provider's place of residence.
- ~~32. "Field trip" is a trip by children away from the family child care home. These field trips range from a few minutes during the day to a full day periodically throughout the year. Field trips are not intended to replace the regular indoor learning environment.~~
- ~~33. "Fire drill" means a drill in which the occupants of a building evacuate from the interior to the exterior of the building. Varying exits are used to know multiple ways out of a building in an emergency.~~
34. "First Aid training" means training in which a person reacts to injuries and performs simple emergency medical care procedures before emergency medical professionals are available as necessary.
35. "Flexibility" means the provider has the ready capability to adapt to new, different, or changing requirements of parent(s) or guardian(s) for child care.
- ~~36. "Frequently" means to occur often; many times and at short intervals.~~
- ~~"Gentle physical holding" means to carefully hold a child with the arms, without force.~~
37. "Guidance" means a way of teaching that empowers children to make decisions that are ethical, intelligent, and socially responsible.
38. "Guidance approach" means the use of guidance, distinct from discipline, to reduce the need for and resolve the occurrence of mistaken behavior in ways that are non-punitive.
39. "Harsh treatment" means treatment that is ungentle and unpleasant in action or effect; such as treatment that is unpleasantly severe; stern; or cruel.
40. "Health Care Plan" means the document contains written instructions about a specific health condition including ~~the~~ when and how specific interventions are to be carried out in a school or child care setting. This document should be signed by the child's health care

provider and parent. Health Care Plans can be collaboratively created by ~~the a~~ Department-approved child care health consultant, the child's parents, health care provider and ~~center staff~~ primary care provider. ~~Health Care Plans, and~~ are necessary for the care of children with chronic health care conditions such as asthma, seizure disorder, diabetes, or severe allergy. Health Care Plans may also guide the care of children with acute conditions that may need short-term special management in the group care setting such as a child returning to care with a cast, or after a surgical intervention.

- ~~41.~~ 41. "Health care provider professional" means a Licensed Physician, Physician's Assistant, and Nurse Practitioner registered or licensed with the Colorado Department of Regulatory Agencies' Division of Professions and Occupations, an organization or person who delivers proper health care in a systematic way professionally to any individual in need of health care servi
- ~~42.~~ 42. "Health care provider's scope of practice" means the boundaries and rules within which a fully qualified medical practitioner, with substantial and appropriate training, knowledge, and experience, may practice in a field of medicine or other specifically defined field. Such practice is governed by requirements for professional accountability.
- ~~423.~~ 423. "Home remedy" means a non-medical treatment to attempt to cure or treat an ailment with common household items or foods.
- ~~434.~~ 434. "If applicable" means if the rule should be applied depending on the circumstances of the situation.
- ~~445.~~ 445. "Immediately" means without delay or hesitation, without any interval of time.
- ~~456.~~ 456. "Inaccessible" means a child cannot reach, touch, or obtain the item.
- ~~467.~~ 467. "Infestation" means the presence of unwanted pests such as insects, rodents, bats, birds, or parasites at levels considered to pose either an economic or health threat.
- ~~478.~~ 478. "Interactive learning" means a method of learning through hands on activities that help a child gain knowledge and skills by connecting with information and experiences provided by the provider.
- ~~489.~~ 489. "Intoxicated" means that a person is under the influence of drugs or alcohol to the point that his/her actions and/or behavior presents an immediate danger to themself/her/himself or others.
- ~~4950.~~ 4950. "Language development materials" means materials that focus on the development of listening and speaking skills, and contains experiences which familiarize children with pre-reading and pre-writing activities.
- ~~51-50.~~ 51-50. "Lead poisoning" means poisoning by a toxic metal that is found in and around homes, in lead-based paint, chipping paint, or lead dust from deteriorated paint. Lead may cause a range of health effects, from behavior problems and learning disabilities, to seizures and death.
- ~~52.~~ 52. "Legal signature" means the parent's full signature that includes both the first and last name.
- ~~512.~~ 512. "Lockdown drill" means a drill in which the occupants of a building are restricted to the interior of the building and the building is secured.

- ~~523.~~ "Lost child" means a child that has been separated from the group outside of the supervision of the provider or assigned staff member or for whom the local authorities have been contacted~~the provider is unable to find the child. The child is no longer in the care or supervision of the provider.~~
- ~~534.~~ "Mental Health Practitioner" means a mental health professional who offers services for the purpose of improving an individual's mental health or to treat mental illness.
- ~~545.~~ "Nationally recognized" means to be known in the majority of businesses or residential areas of the United States and that may meet local or national accreditation standards.
- ~~556.~~ "Negative licensing action" or "adverse action," has the same meaning as set forth in section 26.5-5-303(16), C.R.S., Adverse or Negative licensing action" also known as adverse action, means a final agency action resulting in the denial of an application, the imposition of fines, or the suspension or revocation of a license issued pursuant to the Child Care Licensing Act or the demotion of such a license to a probationary license.
- ~~567.~~ "Offered" means materials, equipment or activities, including meals which are presented as options~~to children~~ but are not required or forced upon children.
- ~~59.~~ "On occasion" means from time to time; a special event or ceremony; or irregularly.
- ~~57.~~ "Operational status information" means if the family child care home is open, closed, or temporarily closed.
- ~~5858.~~ "Organic materials" means materials relating to, or derived from, living organisms.
- ~~5959.~~ "Pattern" means repeating an activity such as a sleep or meal routine three or more times at regular intervals.
- ~~"Pedodontist" means a pediatric dentist, specializing in children from birth to four years of age.~~
- ~~609.~~ "Periodically" means from time to time; a special event; ~~an ongoing event~~ or activity that occurs irregularly without an established pattern.
- ~~611.~~ "Permanent climbing equipment" means climbing equipment installed that is stable, cannot be overturned or displaced, and cannot be moved or relocated to another area without assistance.
- ~~622.~~ "Physical restraint" means the use of bodily, physical force to involuntarily limit an individual's freedom of movement; except that physical restraint does not include the holding of a child by one adult for the purposes of calming or comforting the child.
- ~~633.~~ "Place of residence" means the place or abode where a person actually lives and provides child care on a regular, ongoing basis.
- ~~644.~~ "Potential threat" means the possible exposure to harm or injury.
- ~~655.~~ "Prescriptive authority" means the legal right of a medical person to prescribe medications under Colorado law.

666. "Protective equipment" means the use of protective head, ~~knee, elbow and ankle~~ equipment to protect a child riding on a scooter, bicycle, balance bike, skateboard, or rollerblades.
677. "Promptly" means without delay; very quickly or immediately.
688. "Primary provider" means the person that resides in the home and provides direct care, supervision and education to child(ren) in care at least sixty percent (60%) of the daily hours of operation of the family child care home.
6969. "Psittacine birds"; means all birds commonly known as parrots, cockatoos, cockatiels, macaws, parakeets, lovebirds, lories or lorikeets, and other birds of the order ~~psittaciformes~~ Psittaciformes. These birds may also be called or referred to as hookbills because the upper beak is turned downward.
709. "Punished" means to impose a penalty on a person. The causes for punishment may be for a behavioral fault, offense, or violation.
714. "Qualified Substitute" means a substitute provider that has all required trainings and qualifications as specified in these "Rules Regulating Family Child Care Homes."
722. "Regionally accredited" means colleges and universities which earn regional accreditation status by meeting acceptable levels of quality and performance. The accrediting bodies for higher education are Middle States Association of Colleges and Schools, Northwest Association of Colleges and Schools, North Central Association of College and Schools, New England Association of Colleges and Schools, Southern Association of Colleges and Schools, and Western Association of Colleges and Schools.
733. "Regular basis" means occurring with normal frequency or routine schedule.
744. "Relative" means any of the following direct relationships by blood ~~to the first degree~~, marriage, or adoption: parent, grandparent, son, daughter, grandson, granddaughter, brother, sister, stepparent, stepbrother, stepsister, stepson, stepdaughter, uncle, aunt, niece, nephew, or first cousin.
755. "Reside" means to be in a residence, to dwell permanently or continuously, or to occupy a place as one's legal domicile.
766. "Protective-Resilient surfacing" means ~~a~~ Department-approved material that is used beneath climbing equipment and is designed to protect a child who falls from the highest designated play surface on a piece of equipment to the protective-resilient surfacing below. 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 sand. Solid unitary materials include poured in place surfacing, approved rubber mats, playground tiles, and artificial turf with built in resilient pad.
777. "Restraint" means any method or device used to involuntarily limit freedom of movement including, but not limited to, ~~bodily physical force~~, physical restraint, mechanical devices, or chemicals.
788. "Reverse evacuation drill" means a drill in which persons seek shelter and safety inside a building when said persons are outside the building and are faced with a threat, such as an armed individual, extreme weather, or a dangerous animal.

7979. "Routine medications" means any prescribed oral, topical, or inhaled medication, or unit dose epinephrine, that is administered pursuant to section 26.5-5-32526-6-119, C.R.S.
800. "Safe" means free of hazards posing danger of injury including, but not limited to, "keep out of reach" items, protrusions, broken items, areas of entrapment, strangulation or choking hazards, insufficient cushioning, poisonous chemicals, etc.
814. "Sanitary" means clean and not dangerous for your health, or protecting health by removing dirt and waste, especially human waste; the removal of dirt, and infection, so that places are clean and healthy for people to live in.
822. ~~"Sanitized or sanitary" means effective bactericidal treatment by a process that provides enough accumulative heat or concentration of chemicals, registered with the U.S. Environmental Protection Agency, for sufficient time to reduce the bacterial count, including pathogens, to a safe level, to remove filth or soil and some small bacteria. For an inanimate surface to be considered sanitary the surface must be clean and the number of germs must be reduced to such a level that disease transmission by that surface is unlikely. This procedure is less rigorous than disinfection and is applicable to a wide variety of routine housekeeping procedures.~~
833. "Satisfactory experience" means the adequate practical knowledge, skill or practice necessary.
844. "Serious" means an injury or illness of an urgent nature needing immediate emergency attention.
855. "Serving" means an amount of food or beverage that is appropriate to meet a child's nutritional and developmental needs.
866. "Severe weather drill" means a drill in which occupants of a building seek shelter appropriate to the severe weather threat, such as a blizzard, electrical storm, flood or tornado.
877. "Shelter-in-place drill" means a drill in which the occupants of a building seek shelter in the building from an external threat.
888. "Social-emotional development" means the development of self-awareness and self-regulation as reflected in the desire and growing ability to connect with others and the ability to experience, express and regulate a full range of emotions, to pay attention, make transitions from one activity to another, and cooperate in the context of relationships with others.
8989. Soft bedding means, but is not limited to: any soft sleep surface like bumper pads, pillows, blankets, quilts, comforters, sleep positioning devices, sheepskins, blankets, flat sheets, cloth diapers, bibs, plush toys, pacifiers with stuffed animals attached, and stuffed animals. ~~"Soft bedding" means, but is not limited to, any soft sleep surface like a water bed, sofa, pillows, bumper pads, soft materials like fluffy blankets, thick blankets, and/or comforters, sheep skins, plush toys, and stuffed animals.~~
900. "Special need" means a child may have mild learning disabilities or profound developmental disabilities of mental functioning and/or bodily movement; food allergies or terminal illness; developmental delays that catch up quickly or remain entrenched; occasional panic attacks or serious psychiatric problems.

914. ~~“Aide or Staff aide”~~ means an individual who assists the provider or equally qualified substitute provider in the care of children at a family child care home. ~~An aide or staff aide must never be allowed to supervise a child(ren) alone. The primary provider, applicant 2, equally qualified provider, or qualified substitute provider must always be present at all times when the aide or staff aide is providing care for a child(ren).~~
922. “Staff Member” means a paid or unpaid individual, staff aide, and or substitute that care for or assists with the care of children.
93. ~~“Universal Standard precautions”~~ means safe work practices to prevent exposure to blood and bodily fluids.
944. ~~“Substitute provider”~~ means a paid, volunteer or contract individual responsible for caring for the children in the capacity of the employee, staff aide, or staff member. The primary provider, applicant 2, equally qualified provider, or qualified substitute must always be present at all times when a substitute is providing care for children~~provider during the provider's absence.~~
- ~~“Sweet foods” means a sweet bread or grain product that is high in fat and /or sugar.~~
95. ~~“Under the influence” means that a person that has injected, inhaled, ingested, or otherwise taken any substance that impairs their ability to care for children. is under the influence of any substance that impairs their ability to care for children drugs or alcohol to the point that his/her actions and/or behavior present an immediate danger to her/himself or others.~~
96. ~~“Urgent” means an unforeseen combination of circumstances that requires immediate attention.~~
96. ~~“USDA”~~ means the United States Department of Agriculture.
977. ~~“Use zone” formerly known as “fall zone” is the area under and around equipment used for gross motor activities that a child either falling from or exiting the equipment is expected to land~~means the distance that a child can fall from elevated equipment based upon the child's age and size.
988. ~~“Varying”~~ means to be at different times or different days; to give variety to activities; to bear no resemblance to a prior activity.
9999. ~~“Verbal abuse”~~ means abusive behavior involving the use of language that is demeaning and is intended to insult, manipulate, ridicule, or offend. Harmful acts and the use of harsh or coarse language often characterize it.
1000. ~~“Volunteer”~~ means a person who performs a service willingly and without pay. The provider, applicant 2, equally qualified provider, or qualified substitute must always be present at all times when a volunteer is providing care for children.
1014. ~~“Written medication order”~~ means a document for a specific medication for a specific child signed by the child's health care provider. This must be a person with prescriptive authority. The order ~~must~~shall include the child's name, medication, dose, time, route, and for how long the medicine is to be given. Orders for children over two (2) years of age can only be valid for a period of up to one year, but may only be for a very brief duration of time as well. Children over two (2) may need written medication orders more frequently since the dosage of the medication will change with the child's weight. Written

orders may also include information on the reason the medication is being given, potential side effects and any special instructions for administration.

7.707.22 TYPES OF FAMILY CHILD CARE HOMES

2.305 REQUIREMENTS

A. All family child care home licenses, except infant/toddler, are issued with an age range for children from birth to eighteen (18) years of age. ~~This allows for the care of older children with special needs.~~ Each individual provider will determine the age range of children that ~~they/he/she~~ will enroll in the provider's child care home. The providers own birth, adopted, step or foster children ~~ten (10) twelve (12)~~ years of age and older do not count in the provider's license capacity.

1. The capacity for a family child care home (generally referred to within these rules as "the home") is determined by the amount of indoor and outdoor space designated for child care, as well as the ~~following below~~ factors.
2. Licensed family child care homes enrolling children five (5) years of age or younger are required to participate in Colorado Shines, the state quality rating and improvement system.

2.306 A REGULAR FAMILY CHILD CARE HOME

AB. In A regular ~~family child care home (FCCH) home,~~ license allows a provider to care ~~may be provided for up to~~ six (6) children from birth to eighteen (18) years of age with no more than two (2) children under ~~eighteen (18) monthstwo (2) years~~ of age.

1. Care also may be provided for no more than two (2) additional ~~children of school age attending full day school.~~ school-age ~~children attending kindergarten through twelfth (12) grade~~ children include children six (6) years of age and older who are enrolled in the first grade or above. ~~A child enrolled in a kindergarten program is not considered a school-age child until the child begins attending kindergarten a year before they enter first grade.~~
2. Residents of the home under ~~ten (10) twelve (12)~~ years of age who are on the premises and all children on the premises for supervision are counted against the approved capacity, except where specifically indicated otherwise. ~~Residents of the home include, but are not limited to, birth, adopted, step or foster children of the provider.~~

2.307 A THREE (3) UNDER EIGHTEEN (18) MONTHS FAMILY CHILD CARE HOME

AC. A three (3) under ~~eighteen (18) monthstwo (2)~~ family child care home license is a type of license that allows a provider to care for ~~up to~~ six (6) children from birth to eighteen (18) years of age with no more than three (3) children under ~~eighteen (18) monthstwo (2) years~~ of age, with no more than two (2) of the three (3) children under twelve (12) months; the capacity includes the provider's own children under ~~ten (10) twelve (12)~~ years of age. This license type may be approved with the following conditions:

1. The licensee has held a permanent license to operate a family child care home for at least two (2) years in Colorado immediately prior to the issuance of the license that would authorize the care of three (3) children under ~~eighteen (18) monthtwo (2) years~~ of age.;
2. The licensee has completed the State Department approved Expanding Quality in Infant/Toddler care course of training or three semester credit hours from a regionally accredited college or university in infant/toddler theory.;

3. In the past two ~~(2)~~ years, the licensee has had no ~~founded~~ substantiated complaints with a severity level of one (1) ~~or two (2) to three (3)~~, ~~consistent or willful substantiated rule violations of ratio, supervision, safety, or injury to a child observed during any licensing visit, or adverse licensing action;~~
4. In the past two (2) years, the licensee has had no adverse action taken against their license.
54. The care of additional children of school age is not authorized.
65. Licensees issued a three (3) children under ~~eighteen (18) month~~ two (2) years of age license are approved for both the three (3) under ~~eighteen (18) month~~ two (2) and the regular license capacities and may switch between the two (2) capacities without notifying the ~~State~~ Department as long as they are in compliance with all licensing rules.

2.308 INFANT/TODDLER FAMILY CHILD CARE HOME

AD. An infant/toddler family child care home license allows a provider to care is a type of family care home that provides less than twenty-four (24) hour care only for children who are between birth and three (3) years old. This license type may be approved with the following conditions:

1. If there is one (1) provider, there may be a maximum of four (4) children, with no more than two (2) of the four (4) children under twelve (12) months of age, including the provider's own children. The provider's own children, under the age of ~~ten (10)~~ twelve (12), count in the capacity of four (4).
 - a. For an infant/toddler home with one (1) provider, that provider must be at least twenty-one (21) years of age.
 - 1) If previously licensed to operate a family child care home, there must have been no:
 - a) Founded complaints with a severity level of one (1) or two (2) in the past two (2) years; and
 - b) Adverse action taken against their license in the past two (2) years.
2. If there are two (2) equally qualified providers, as specified in ~~rule sections 2.308(A)(2) and 2.308(A)(3)~~ 7-707-31, B, 3, caring for children at all times when children are present, there may be a maximum of eight (8) children between birth and three (3) years old, and no more than four (4) of those children can be between birth and one (1) year old, including both providers' own children under the age of ten (10) years old.
 - a. For an infant/toddler home with two (2) providers, one (1) provider must be at least twenty-one (21) years of age, and the second equally qualified provider must be at least eighteen (18) years of age.
 - 1) If previously licensed to operate a family child care home, there must have been no:
 - a) Founded complaints with a severity level of one (1) or two (2) in the past two (2) years; and

- b) ~~Adverse action taken against their license in the past two (2) years.~~
3. ~~The family child care home primary providers at an infant toddler family child care home must meet one (1) of the following criteria: has completed the State Department approved Expanding Quality Infant/Toddler (EQ I/T) course of training; and~~
- a. ~~Must have completed the Department approved Expanding Quality in Infant/Toddler care course or three (3) semester hours from a regionally accredited college or university in infant/toddler theory prior to licensing:~~
- 1) ~~A minimum of one (1) year (1820 hours) of full time experience in a licensed program caring for children who are younger than three (3) years old.~~
- b. ~~Must have completed the Department approved Expanding Quality in Infant/Toddler care course or three semester credit hours from a regionally accredited college or university in infant/toddler theory prior to licensing:~~
- 1) ~~A current Early Childhood Professional credential level 3 or higher in version 3.0 as determined by the Department based on its Early Childhood Professional Credential 3.0 Worksheet, found at <https://drive.google.com/file/d/10FQQw4q0G01W9Ssczs0o1Kkit2HhkbFV/view>, or a current director qualifications letter issued by the Department.~~
4. ~~A family child care home provider that has also been licensed as a regular and three (3) under eighteen (18) monthtwo (2) family child care home provider in the past, and is approved for an infant/toddler license, has the flexibility to provide care on any given day for the ages and capacities of a regular or three (3) under eighteen (18) monthtwo license without written approval of the State Department, as long as the provider is in compliance with all applicable rules at all times.~~~~B. Infant/Toddler Home Provider Requirements~~
3. ~~Each provider must have completed one (1) year of supervised experience caring for children who are younger than three (3) years old. The provider must be able to submit to the State Department official written verification of the required experience. The experience may have been obtained as:~~
- a. ~~A Colorado licensed family child care home;~~
- b. ~~A military licensed child care home;~~
- c. ~~A provider, in a family foster home certified for children younger than three (3) years of age; or,~~
- d. ~~An employee in a licensed child care center in an infant and/or toddler program.~~

2.309 LARGE FAMILY CHILD CARE HOME

- AE.** ~~A large family child care home license allows a provider to is a family child care home that provides care for upseven (7) to twelve (12) children from birth to eighteen (18) years of age; the capacity includes the provider's own children under ten (10) years of age. Care may be provided to no more than two (2) children under eighteen (18) months two (2) years of age. This license may be approved with the following conditions:~~

1. The licensee must be at least eighteen (18) years of age, ~~and the primary provider for, and must reside in~~ the large family child care home. ~~Child care may be provided to children from birth to eighteen (18) years of age. The provider needs an assistant when the ninth child arrives at the facility.~~
2. If ~~the provider was~~ previously licensed to operate a family child care home, there must have been no:
 - a. ~~In the past two years, the licensee has had no substantiated~~ Founded complaints with a severity level of one (1) ~~or two (2) in the past two (2) years to three (3), consistent or willful substantiated rule violations of ratio, supervision, safety, or injury to a child observed during any licensing visit, or adverse licensing action; and;~~
 - b. Adverse action ~~taken against their~~ on the license ~~within the past two (2) years;~~ ~~and:— Substantiated specific rule violations of ratios, supervision, safety, or injury to a child observed during any licensing visit in the past two (2) years.~~
3. ~~The primary provider at a large child care home must meet one (1) of the following~~ criteria:
 - a. A minimum of ~~twenty-one (21) months~~ two (2) years of documented satisfactory experience in the group care of children under the age of six (6) years or as a licensed family child care home ~~provider~~ in Colorado. Equal experience operating as an approved military child care home is accepted; ~~or;~~
 - b. A minimum of ~~sixty (60) credit hours~~ two (2) years of college education from a regionally accredited college or university, with at least one (1) college course in early childhood education, plus one (1) year of documented satisfactory experience in the group care of children as:
 - 1) A licensed family child care home ~~provider~~ in Colorado;
 - 2) A military licensed family child care home;
 - 3) A Colorado certified family foster home; or;
 - 4) A staff member in a licensed child care center.
 - c. Current certification as a child development associate (CDA); ~~or;~~
 - d. Completion ~~prior to licensing~~ of the State Department approved Expanding Quality in Infant/Toddler care course or three (3) semester credit hours from a regionally accredited college or university in infant/toddler theory prior to licensing;
 - 1) A minimum of ~~one (1) year (1,820 hours)~~ two (2) years of experience as a licensed child care provider holding a permanent license in Colorado immediately before becoming a licensee of a large child care home; or;
 - 2) A minimum of ~~one (1) year (1,820 hours)~~ two (2) years of full-time experience in a licensed program. The group care ~~shall~~ must have been with children who are under the age of six (6) years.

e. ~~A current early childhood professional credential level III (3) or higher as determined by the Department using version 3.0 of its worksheet found at <https://drive.google.com/file/d/10FQQw4q0G01W9Ssczs0o1Kkit2HhkbFV/view>; or individuals who have a current director qualifications letter issued by the Department.~~

f. ~~A current director qualifications letter issued by the Department.~~

4. ~~When more than eight (8) children are present, a second staff member that is qualified as an applicant 2, equally qualified provider, qualified substitute, staff member, or staff aide is required.~~

a. ~~Staff aides must be at least sixteen (16) years of age and must work directly under the supervision of the primary provider in charge and responsible for the care of the children. If left alone with children, the staff aide or assistant provider must meet all the same age and training requirements listed in rule sections 2.311, 2.312, and 2.313 as the primary provider, applicant 2, an equally qualified provider, or qualified substitute. the provider.~~

~~2.310F.~~ ~~The~~ **AN EXPERIENCED FAMILY-CHILD CARE PROVIDER**

A4. ~~An experienced family child care provider (ECCP) license allows a provider to home is a licensed child care home where care is approved for no more than nine (9) children of different age combinations depending upon which option the home is operating under; the capacity includes the provider's own children under ten (10) years of age.~~

12. ~~The requirements for an experienced family child care provider must are:~~

a. ~~Have been a licensed family child care home provider in Colorado for at least the last five (5) six (6) consecutive years; have equal experience operating as a licensed military family child care home is acceptable; or 9,100 hours of documented experience working in a Colorado licensed child care facility in the role as a director or as a Department certified early childhood teacher based on the qualifications found at <https://cdec.colorado.gov/professional-certifications>;~~

b. ~~Have completed ninety (90) clock hours of training within the preceding six (6) years, including the State Department approved Expanding Quality in Infant/Toddler care course, or three (3) semester credit hours from a regionally accredited college or university in infant/toddler theory. The ninety (90) hours of training does not include licensing training universal precautions, First Aid and CPR, and medication administration training;~~

c. ~~Have completed seventy-five (75) clock hours of training within the preceding five (5) years, or have a current early childhood professional credential level III (3) or higher in version 3.0 as determined by the Department using version 3.0 of its worksheet found at <https://drive.google.com/file/d/10FQQw4q0G01W9Ssczs0o1Kkit2HhkbFV/view>; or individuals who have a current director qualifications letter issued by the Department. The seventy-five (75) clock hours of training does not include pre-licensing training, standard precautions, First Aid and CPR, or Medication Administration training;~~

d. ~~Have had no founded complaints with a severity level of one (1) or two (2) in the preceding past two (2) years; Have had no adverse licensing action and~~

~~ed.~~ Have had no adverse action taken against the provider's license in the ~~preceding past~~ two (2) years; ~~and,~~

~~e.~~ ~~Comply with local zoning restrictions.~~

23. Applying for the Experienced Family Child Care Provider License

At least sixty (60) calendar days prior to the proposed date of operation as an experienced provider, the applicant must submit to the ~~State~~ Department a completed and signed experienced provider application form, which:

a. Affirms compliance with all the rules for licensed family child care home~~s~~ ~~providers~~ and experienced providers; and

~~b.~~ ~~Affirms that the 90 clock hours of training have been completed;~~

~~c.~~ ~~Includes an agreement to waive the right to appeal rules related to capacity and space requirements; and,~~

~~bd.~~ Affirms the provider understands that the ~~experienced provider's license will be submitted for adverse action~~ ~~immediately revert to a regular license~~ if capacities are exceeded at any time.

34. ECCP Options Table

The following chart describes the various options available to the experienced family child care home. Providers may change options without notifying the ~~State~~ Department, as long as the home is in compliance with one option at any one time and all applicable licensing rules.

Experienced Family Child Care Provider License

Ages/Options	Option 1	Option 2	Option 3	Option 4	Option 5
<u>Children Birth Through 18 Years</u>	7 <u>No more than 2 under 18 months</u>	8 <u>No more than 2 under 18 months</u>	5 <u>No more than 2 under 18 months</u>	6 <u>No more than 3 can be under 18 months**</u>	4
	±	±	±	±	±
<u>Additional School-Age Children (during non-school times)</u>	2	1	4	3	0
	≡	≡	≡	≡	≡

<u>Maximum Capacity of Children at Any Given Time</u>	<u>9</u>		<u>9</u>		<u>9</u>		<u>9</u>		<u>4</u>	
<u>Infants under 12 months</u> **No more than 2 children can be under 12 months	N/A		N/A		N/A		** <u>Only two can be under 12 months of age.</u>		** <u>Only two can be under 12 months of age.</u>	

All options include provider's own children under ~~ten (10)~~twelve (12) years of age.

Total Children in Care at a Given Time	Birth Up to School-Age	Additional School-Age	Number of Children Under 2 Allowed	(Of Those Under 2) Number Under 12 Months Allowed
9	7	2	2	2
9	8	4	2	2
9	5	4	2	2
9	6	3	3	2

7.707.3 PERSONNEL AND RESIDENTS OF THE HOME

All infant/toddler family child care homes and large family child care homes must meet all of the personnel requirements in Section 7.707.31, except where rules specific to infant/toddler homes and large family homes replace other rules.

2.311 7.707.31 REQUIREMENTS FOR PERSONNEL AND RESIDENTS OF THE HOME

- A. General requirements for providers, applicant 2, equally qualified providers, qualified substitutes, staff members, volunteers, and residents of the home.
 - 1. Primary providers and applicant 2 must physically reside at the family child care home and must provide the child care.
 - 2. The primary provider must have a plan for an urgent-emergency, personal or family situation that requires the provider to leave the family child care home immediately.

3. ~~A qualified substitute can substitute for the primary care provider for a period up to twelve (12) weeks or (480 hours) per calendar year.~~
4. ~~The parent(s) or guardian(s) must be notified each time a substitute is used to provide supervision of children in the absence of the primary provider, applicant 2, or equally qualified provider.~~
5. ~~Primary providers, applicant 2, equally qualified providers, and qualified and/or substitutes must be at least eighteen (18) years of age.~~
6. ~~Staff aides and volunteers must be at least sixteen (16) years of age. Aides and volunteers shall and work under the direct supervision of a primary provider, applicant 2, equally qualified provider, or qualified substitute at all times.~~
73. ~~Primary providers, applicant 2, equally qualified providers, employees, qualified substitutes, staff members, and volunteers must demonstrate an interest in and knowledge of children and a concern for their proper care and well-being.~~
84. ~~Primary provider's or an applicant 2's own children, or children they have legal custody and control over Children for whom the primary provider or applicant 2 has custody and responsibility must not have been placed in foster care or residential care primary provider or an applicant 2 must not or have had their parental rights modified by court order because the primary provider or other resident of the home an applicant 2 was abusive, neglectful, or a danger to the health, safety, or well-being of those children.~~
96. ~~Primary providers, applicant 2, equally qualified providers, qualified substitutes, all staff members, and volunteers must not be under the influence of any substance that impairs their ability to care for children.~~
106. ~~The primary provider is responsible for ensuring that applicant 2, equally qualified providers, qualified substitutes, all staff membersemployees, substitutes and volunteers are familiar with the children in care, the "General Rules for Child Care Facilities," the "Rules Regulating Family Child Care Homes," rules, "Rules Regulating Special Activities," the home's policies, and the location of children's files, and emergency numbers.~~
117. ~~The primary provider must plan for the selection, orientation, training and/or staff development of all equally qualified providers, qualified substitutes, staff members, and volunteersany employee, volunteer, or substitute.~~
128. ~~The primary provider must plan for the and supervision, e the care, and activities of children.~~
139. ~~Prior to license approval, theAll primary providers, applicant 2, and all persons residing in the home must obtainsubmit to the State Department at time of original application on the form required by the State Department, a health evaluation a medical statement signed and dated by a licensed physician or other health care provider, professional.~~
 - a. ~~All equally qualified providers, qualified substitutes, and staff members must obtain a medical statement signed and dated by a licensed physician or other health care provider within thirty (30) days of employment.~~
140. ~~Subsequent health evaluations for the primary provider, applicant 2, and children residing in the home who are less than ten (10)twelve (12) years of age must be obtainedsubmitted every two (2) years or as required in a written plan signed by a licensed physician or other health care providerprofessional. A new family member~~

and/or a new resident of the home must ~~obtain~~submit to the State Department, a health evaluation form signed and dated by a licensed physician or other health care provider within thirty (30) days from the date the individual began living in the home, ~~a State Department approved health evaluation form signed and dated by a licensed physician or other health professional.~~

a. ~~All equally qualified providers, qualified substitutes, and all staff members must obtain a subsequent health evaluation every two (2) years or as required in a written plan signed by a licensed physician or other health care provider.~~

15. If, in the opinion of a physician or mental health practitioner, a physical, medical (including side effects of medication), emotional, or psychological condition exists at any time that may jeopardize the health of children or adversely affect the ability of a provider to care for children, an equally qualified substitute provider must be employed, or child care services must cease until the physician or mental health practitioner states in writing that the health risk has been eliminated.

16. ~~The primary provider, applicant 2, the equally qualified providers, qualified substitutes, and all staff members must be familiar with the names, ages, and any special needs or health concerns of the children; and.~~

17. ~~The primary provider, applicant 2, the equally qualified provider, qualified substitutes, and all staff members must be familiar with the location of children's enrollment records as listed in rule section 2.320-emergency information.~~

18. ~~Primary provider, applicant 2, equally qualified providers, qualified substitutes, and all staff must register with the Colorado Shines Professional Development Information System.~~

19. ~~Prior to working with children, all equally qualified providers, qualified substitutes, and all staff members must read and be trained on the policies and procedures for the administration of medications and sign a statement indicating that they have read and have been trained on the center's administration of medications policies and procedures.~~

2.312 7.707.3 TRAINING

A. ~~Every required training in this rule section 2.312 must be documented and available for review by the Department.~~

B. ~~Prior to issuance of the license or providing care to children, the licensee and primary provider, applicant 2, and equally qualified provider, must complete a Department approved fifteen (15) clock hour pre-licensing course of training.:~~

1. ~~A State Department approved fifteen (15) clock hour pre-licensing course of training that includes nine (9) core knowledge standards. The content of one of the standards must specifically address appropriate guidance with children and that corporal discipline is never allowed. The clock hours of pre-licensing training do not include certification in First Aid, CPR, and medication administration training;~~

2. ~~A monitored written test or approved alternate method to verify knowledge and comprehension of the content of the training materials must be administered by the trainer to the trainee at the end of the pre-licensing training course. The trainee must have a passing score of no less than 80%. Part of approval of pre-licensing is that the provider must be able to access and understand the Rules Regulating Family Child Care~~

Homes. The provider must take pre-licensing training for any original application except for change of address; or;

3. The following individuals are exempt from pre-licensing training:

a.) Individuals who have are currently director qualificationsed letter issued by the Department; or or have a two (2) or four (4) year degree in early childhood education from a regionally accredited college or university are exempt from pre-licensing training, except for the one and one-half (1½) hours of universal precautions training, and the section of the pre-licensing training that covers the business requirements for operation of a home; and;

b.) Individuals with a Bachelor's, Master's, or Doctorate degree from an accredited college or university with a major area of study in Elementary Education or Early Childhood Education.

CB4. Prior to working with children, the primary provider, applicant 2, equally qualified providers, qualified substitutes, and all staff members must complete a Department-approved training in standard precautions that meets current occupational safety and health administration (OSHA) requirements prior to working with children. This training must be renewed annually. A state department approved training in standard precautions that meets current occupational safety and health administration (OSHA) requirements prior to working with children. This training must be renewed annually and may be counted towards ongoing training requirements. This standard precautions training can be included as part of the pre-licensing training, in which case the total number of hours for pre-licensing training required in 7.707.a1 is increased to sixteen (16) clock hours, and standard precautions training may count as no more than one (1) hour of the sixteen (16) clock hours; and;

DC. Prior to working with children, the primary provider, applicant 2, equally qualified provider, and qualified substitutes must complete the a Department-approved First Aid and CPR training, for all ages of children from infant to twenty-one (21) years of age;

1. Prior to working with children all staff members caring for children not required by rule to be certified in First Aid and CPR must complete the Department-approved basic First Aid and CPR module. This module must be renewed every two (2) years.

ED. Prior to working with children, the primary provider, applicant 2, equally qualified provider, and qualified substitutes must complete aThe State Department approved course of training for medication administration. This course must be completed every three (3) years and can be applied towards ongoing annual training hours in the year that it is completed;

5. Documentation of this training must include the number of hours of training, completion date, and expiration date. Renewal of standard precautions training can be taken as a part of the first aid training, but must be in addition to the renewal First Aid training;

FE8. Prior to working with children, the primary provider, applicant 2, the equally qualified provider, qualified substitutes, and all staff members Effective December 31, 2016 all providers and staff must complete a building and physical premises training. The training must include identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, vehicular traffic, handling and storage of hazardous materials, and the appropriate storage of biological contaminants, prior to working with children. An updated training is required for any changes to the building or physical premises. The training must include:

1a. This training is developed and facilitated by the primary provider for applicant 2, equally qualified providers, qualified substitutes, and all staff members to identify specific

environmental hazards at the family child care home. Applicant 2, equally qualified providers, qualified substitutes, and all staff members must be retrained if there are changes to the building and physical premises. Identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic; and

2b. Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants.

GF10. Prior to working with children, if working with children less than three (3) years of age, the primary provider, applicant 2, the equally qualified provider, qualified substitutes, and all staff members~~Effective December 31, 2016 each provider, staff member or regular volunteer working with children less than three (3) years of age must complete a Department approved prevention of shaken baby/abusive head trauma. This training must be renewed every two (2) years and can be applied towards ongoing annual training hours in the year that it is completed. Training prior to working with children less than three (3) years of age. This training must be renewed annually and may count towards ongoing training requirements.~~

HG11. Prior to working with children the primary provider, applicant 2, the equally qualified provider, qualified substitutes, and all staff members~~Effective 12/31/2016 each provider, staff member or regular volunteer must complete a Department approved training about child abuse prevention, including common symptoms and signs of child abuse how to report, where to report, and when to report suspected or known child abuse or neglect within thirty (30) calendar days of employment. This training must be renewed annually and may count towards ongoing training requirements.~~

IHH. Prior to working with infants, the primary provider, applicant 2, the equally qualified provider, qualified substitutes, and all staff members must complete a Department-approved safe sleep training. This training must be renewed annually.

JH9. Within thirty (30) calendar days of caring for children the primary~~Effective December 31, 2016 each provider and all individuals and any or staff member~~ responsible for the collection, review, and maintenance of the child immunization records must complete the Colorado ~~D~~epartment of ~~public~~Public HHealth and ~~E~~nvironment (CDPHE) immunization course ~~within thirty (30) calendar days of employment. This training must be renewed annually and may count towards ongoing training requirements.~~

KJJ. Within thirty (30) calendar days of caring for children the primary provider, applicant 2, the equally qualified provider, qualified substitutes, and all staff must complete a Department-approved training regarding playground safety for homes. This course is required once and will be counted towards ongoing training requirements;

LK. Within thirty (30) calendar days of caring for children, the primary provider must ensure that equally qualified providers, qualified substitutes, and all staff members must read and be trained on "Rules Regulating Family Child Care Homes," the "General Rules for Child Care Facilities," and the "Rules Regulating Special Activities," if applicable.

MLK. Within ninety (90) calendar days of caring for children the primary provider, applicant 2, the equally qualified provider, qualified substitutes, and all staff must complete a Department-approved introduction to the early intervention and preschool special education programs. This course is required once and will be counted towards ongoing training requirements;

NML. Within ninety (90) calendar days of caring for children the primary provider, applicant 2, the equally qualified provider, qualified substitutes, and all staff must complete a Department-approved training for recognizing the impact of bias on early childhood professionals. This course is required once and will be counted towards ongoing training requirements;

ONM. Within ninety (90) calendar days of caring for children all qualified substitutes, and staff members must have at least one (1) hour of child development training. This training must include the major domains (cognitive, social, emotional, physical development and approaches to learning). This course is required once and will be counted towards ongoing training requirements if taken after the date of hire.

PON. Within ninety (90) calendar days of caring for children the primary provider, applicant 2, the equally qualified provider, qualified substitutes, and all staff must complete a Department-approved training regarding "Injury Prevention for Homes." This course is required once and will count towards ongoing training requirements.

QPO. Within ninety (90) calendar days of caring for children the primary provider, applicant 2, and the equally qualified provider must complete the Department-approved training "Working with an Early Childhood Mental Health Consultant." This course is required once and will be counted toward ongoing professional development.

BRQ. The primary provider, applicant 2, equally qualified provider, qualified substitutes, and all staff members Licensees requesting continuation of a permanent license shall:

1. Complete a minimum of fifteen (15) clock hours of ongoing professional development of training each year. At least three (3) of the fifteen (15) clock hours must be in social emotional development; and,

a.2. Ongoing training and courses shall demonstrate a direct connection to one or more of the following competency areas:

1)a. Child growth and development and learning courses that align with the competency domains of child growth and development;

2)b. Child observation and assessment;

3)c. Family and community partnership;

d. Guidance;

4)e. Social-emotional health and development promotion;

5) Health, safety, and nutrition;

6)f. Professional development and leadership practice; and

g. Program planning and development; and

7)h. Teaching practices;

- 2.4) Each one (1) semester hour course with a direct connection to the competency area listed in rule section 2.312(QP)(1)(a) 7-707-33, b, 2, a-g, taken at a regionally accredited college or university shall count as fifteen (15) clock hours of ongoing training.

- ~~3.2)~~ Training hours completed can only be counted during the year taken and cannot be carried over.
- ~~4.3)~~ The fifteen (15) clock hours of training do not include recertification in First Aid and CPR.
- ~~5.4)~~ To be counted for ongoing training, a provider must receive for each training, a training certificate that includes:
- ~~a.)~~ The title of the training; ~~and,~~
 - ~~b.)~~ The competency domain or from a nationally approved vendor list ~~area;~~ ~~and,~~
 - ~~c.)~~ The date and clock hours of the training; ~~and,~~
 - ~~d.)~~ The name and signature of the trainer or another approved method of verifying the name and qualifications of the trainer; ~~and,~~
 - ~~e.)~~ Expiration of training, if applicable; ~~and~~
 - ~~f.)~~ Connection to social-emotional focus, if applicable.
- ~~6.e)~~ The trainer must have documentation of their qualifications for each topic of training conducted, which must be available for review by representatives of the State Department.

2.313. RECORDS FOR EQUALLY QUALIFIED PROVIDERS, QUALIFIED SUBSTITUTES, AND ALL STAFF MEMBERS

7.707.36 Employee, Volunteer, and Substitute Records

- ~~A.~~ Personnel files for each employee, substitute, and volunteer must contain all required information within thirty (30) calendar days of the first day of employment, volunteering, or functioning as a substitute:
- ~~AB.~~ The ~~Prior to working with children, unless otherwise specified in rules,~~ personnel files for equally qualified providers, qualified substitutes, and all staff members ~~must~~ each employee, substitute, and volunteer shall be available for review by any representative of the State Department and must include:
1. The name, address, telephone number, and birth date of the individual, and emergency contact information, including names, addresses, and telephone numbers;
 - ~~2.~~ ~~Information received from the state automated systems check on child abuse;~~
 - ~~3.~~ ~~Information received from the fingerprint based criminal record background check as required at Section 7.701.33;~~
 - ~~2.~~ A health evaluation signed and dated by a licensed physician or other health provider as defined in rule section 2.304;
 - ~~34.~~ A record of the dates and hours of employment, volunteering, or functioning as a substitute, including the first date and the final date;
 - ~~5.~~ ~~Names, addresses, and telephone numbers of persons to be notified in the event of an emergency;~~ ~~and,~~

46. Within (30) calendar days of caring for children a signed statement indicating that the individual has been trained, understands, and has had the opportunity to ask questions regarding the "Rules Regulating Family Child Care Homes," the "General Rules for Child Care Facilities," and the "Rules Regulating Special Activities," if applicable. A signed statement verifying that the individual is familiar with these "Rules Regulating Family Child Care Homes," the "General Rules for Child Care Facilities," and the "Rules Regulating Special Activities," if applicable.:
- a. ~~Clearly defining child abuse and neglect pursuant to state law and outlining the employee, substitute, or volunteer's personal responsibility to report all incidents of suspected child abuse or neglect according to state law; and,~~
 - 5b. A signed statement verifying that the individual~~Verifying that the employee, substitute, or volunteer~~ has read and understands the ~~provider~~home's policies and procedures.;
 - 6. ~~Personnel records for qualified substitutes, and all staff members, must also include official written verification of education, work experience, and previous employment, as applicable for the position;~~
 - 7. ~~Verification of training as required in rule section 2.312; and~~
 - 8. ~~All information and documentation from background checks as required rule sections 2.1420 and 2.1421 of the "General Rules For Child Care Facilities."~~

~~7. Official written verification of training, completion and expiration dates as required for the position including:~~

- a. ~~Current First Aid and CPR for all ages of children;~~
- b. ~~Universal precautions; and,~~
- c. ~~Medication administration training.~~
- 8. ~~Official written verification of education, work experience, and previous employment, as applicable for the position; and,~~
- 9. ~~If obtained, a copy of a current Colorado Early Childhood Professional Credential.~~

~~7.707.33 Substitutes~~

~~All infant/toddler family child care homes and large family child care homes must meet all of the substitute requirements, except where rules specific to infant/toddler homes and large family homes replace other rules.~~

2.314 7.707.331 REQUIREMENTS FOR EMERGENCY SUBSTITUTES FOR THE PRIMARY PROVIDER~~General Substitute Information~~

- A. ~~The provider must have a plan for an urgent, emergency, personal or family situation that requires the provider to leave the family child care home immediately.~~
- AB. Emergency~~Any~~ substitutes must be at least eighteen (18) years old and capable of providing care and supervision of children, and handling emergencies in the absence of the provider.
- B. Emergency substitutes must:

1. ~~Be given the names, and~~ ages of the children, and any special needs or health concerns;
2. Immediately call each parent(s) or guardian(s) to notify them that the provider has been called away from the family child care ~~familiar~~-home for an emergency ~~or urgent situation~~; and
3. ~~If the substitute does not meet all the requirements the same age and training requirements as listed in rule sections 2.311, 2.312, and 2.313 as the primary provider, applicant 2, an equally qualified provider, or -qualified substitute for the position for which they are substituting, they shall notify parent(s) or guardian(s) immediately to pick up their children.~~

~~C. — Prior to caring for children, any substitute, except a substitute used in an urgent, emergency, personal or family situation, shall become familiar with:~~

1. ~~The Rules Regulating Family-Child Care Homes;~~
2. ~~The home and provider's policies and procedures;~~
3. ~~The names, ages and any special needs or health concerns of the children; and,~~
4. ~~The location of emergency information.~~

~~D. — Parents or guardians must be notified each time a substitute is used to provide supervision of all children in care in the absence of the primary provider.~~

~~E. — Substitutes used in an urgent, emergency, personal or family situation must:~~

1. ~~Be given the names, ages of the children, and any special needs or health concerns;~~
2. ~~Immediately call each parent(s) or guardian(s) to notify them that the provider has been called away from the family child care home for a personal or family emergency; and,~~
3. ~~If the substitute does not meet all the requirements for the position, must notify parent(s) or guardian(s) immediately to pick up their children.~~

~~F. — In the infant/toddler family child care home, the substitute for the provider(s) must meet the same age requirements as the provider as specified in Section 7.707.31, C.~~

~~G. — In the large family child care home, the substitute for the:~~

1. ~~Primary provider must be equally qualified, as specified in Section 7.707.31, C, to provide care and supervision of children in the absence of the primary provider; and,~~
2. ~~Staff aide must be equally qualified, as specified in Section 7.707.31, A, 2, to substitute for the staff aide when necessary.~~

2.3157.707.35 REQUIREMENTS FOR VOLUNTEERS

- A. Volunteers cannot be used to meet the applicable staff to child ratio.
- B. Volunteers must be directly supervised by the child-care primary provider applicant 2, an equally qualified provider, or equally qualified substitute, with no unsupervised access to children, and have clearly established written duties.

- C. ~~Prior to assisting with the care of children,~~ Volunteers must be made familiar with these "Rules Regulating Family Child Care Homes," the "General Rules for Child Care Facilities," the "Rules Regulating Special Activities," if applicable, and the provider's written policies and procedures ~~prior to assisting with the care of children.~~
- D. Personnel files for volunteers must include:
1. The name, address, telephone number, and birth date of the individual, and emergency contact information, including names, addresses, and telephone numbers; and
 2. A record of dates and hours of volunteering, including the first date and final date. Any volunteer whose activities involve the care or supervision of children, who have unsupervised access to children; or who works more than fourteen (14) days (112 hours) a calendar year must complete:
 1. ~~A fingerprint-based criminal background record check as required at Section 7.701.33; and;~~
 2. ~~The State Department required automated system background check for child abuse and neglect, as required at Section 7.701.32.~~

7.707.4 POLICIES AND PROCEDURES**2.3167.707.41 STATEMENT OF POLICIES**

- A. At the time of enrollment, and upon any amendments to policies and procedures, the provider must give the parent(s) or guardian(s) a written statement of the family child care home's policies and procedures, and provide the opportunity to ask questions. 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, ~~and b~~ 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.
- B. The written policies and procedures must be developed, implemented, and followed, by the primary provider, applicant 2, equally qualified providers, qualified substitutes, and all staff members which including include all updates, changes amendments, and must include at a minimum the following information:
1. Admission and registration procedures;
 2. Authorization of parents or other designees to pick up children, including the policy for how the provider will respond to individuals not authorized by parent(s)/guardian(s) to pick up a child and if a parent arrives under the influence of a controlled substance;
 3. An itemized fee schedule or individual fee agreement, fee-This must include expectations regarding when fees may be reimbursed, when if a child does not attend the family child care home program; when a child is requested to leave the family child care home program; and, authorization for field trips;
 4. Procedure, including fees, when a child arrives or departs at times other than ~~expected during the~~ agreed upon ~~care~~ hours of care;
 5. Parent and provider responsibilities for special activities or programs outside of the family child care home licensed facility, such as inclusion and/or exclusion of children and the payment of additional fees;

6. Hours of operation or individual hours agreement to include regularly closed days and applicable special operating program hours; policy on closure due to provider illness or family emergency and unscheduled closures;
7. Procedure for managing a situation where children remain after the scheduled closure of the facility and the parent, guardian or other emergency contacts cannot be reached. This may include notification of the local county department of social services or police, if necessary. ~~In the event that the provider has not been approved for overnight care, the provider cannot keep the children in care beyond midnight;~~
- ~~8. Activities and snacks for children who remain at the home after closing;~~
- ~~89.~~ Services offered for children with special needs in compliance with the Americans with Disabilities Act;
- ~~940.~~ Acceptance and notification of enrolled ~~of~~ non-immunized or under-immunized children, including any children living in the licensed family child care home and notification if the provider's own birth, adopted, or step children have not been immunized;
- ~~104.~~ Substitute care, and the clarification of responsibility for obtaining back-up care;
- ~~112.~~ How and by whom children are supplied with appropriate clothing and equipment necessary to participate in indoor and outdoor activities, including activities that require protective equipment ~~helmets, wrist protection, and knee and elbow pads when riding a scooter, bicycle, skateboard or rollerblades;~~
- ~~123.~~ Storage, loss, damage, or theft of provider's or child's personal belongings;
- ~~134.~~ Field Trips and Excursions
 - ~~a.~~ Scheduled field trips and excursions away from the family child care home require advanced notice by written or electronic methods, which must include: locations, estimated times of attendance, and a phone number to contact the family child care home provider during the trip; and written permission from the parent(s) or guardian(s) for each scheduled trip or excursion.
 - ~~b.~~ Unscheduled field trips or excursions away from the family child care home require notification upon departure to the parent(s) or guardian(s) via written or electronic methods, which must include: locations, estimated times of attendance, and a phone number to contact the family child care home provider during the trip.
 - ~~c.~~ Routine field trips and excursions, such as daily transportation provided by the family child care home to and/or from care, require annual authorization by written or electronic methods, which must include departure and arrival times to and from the family child care home; and pick up and drop off times and locations. Scheduled and unscheduled trips away from the family child care home; the requirement of notification of the excursion prior to the event need for signed permission from the parent(s) or guardian(s) for the excursion and a phone number where the provider can be reached during a field trip.
- ~~145.~~ Transportation availability, vehicle restraint requirements, and seating capacities;

156. ~~Written authorization or denial for~~ Developmentally appropriate media use including, but not limited to, television shows, video, music, tablets, smartphones, and software used at the facility-family child care home, and time limits for all media use;
167. Meals, snacks, and parental notification of menus, and how children with food allergies or special diets are accommodated;
178. Policy on transitioning a child from ~~either~~ breast feeding to a bottle and/or cup, or from a bottle to a cup;
189. Behavior guidance and discipline appropriate to the age and development of the child, including positive instruction and, supporting positive behavior, ~~discipline and consequences~~. Policies shall include how the provider will:
- ~~Promote warm and responsive~~ Cultivate positive child, provider, staff (if applicable) and family relationships;
 - Create and maintain a socially and emotionally respectful early learning and care environment;
 - Implement strategies supporting positive behavior, pro-social peer interaction, and overall social and emotional competence in young children; and
 - Provide individualized social 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; ~~and~~.
1933. How disciplinary 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 policy as stated in rule section 2.316(A)(18) on guidance, positive instruction, discipline and consequences,~~ and include documentation of the steps taken to understand and respond to the child's challenging behavior; ~~and~~
- ~~Access~~ Identify and consult with an early childhood mental health consultant or other specialists as needed.
20. Rest time and equipment;
21. Safe sleep environments for infants in compliance with rule section 2.329(H);
- ~~22.~~ Diapering and toilet ~~training~~, including, but not limited to, process, communication, time frames, supplies, and family child care home primary provider's philosophy and approaches ~~expectation~~;
- ~~232.~~ ~~Provision of~~ Daily outside play time including during periods of inclement or hot weather;
243. Use of and how often sunscreen is applied, including authorization for use of sunscreen, and how infants or children are protected from sun exposure without the use of sunscreen;
254. Protection of children from exposure to second hand smoke;

265. Notification of parent(s) or guardian(s) for handling children's illnesses, accidents, injuries, or other emergencies;
276. Specific circumstances and symptoms for not admitting ill children, and conditions for readmittance;
287. Storing, administering, recording and disposing children's medicines in compliance with the State Department-approved medication administration course;
298. Adverse weather precautions to include temperature extremes, inclement weather expectations and procedures, and fee expectations if the home is closed during inclement weather and how parent(s) or guardian(s) are notified of weather closures notification of how to find out;
3029. The procedures for emergencies and disaster preparedness such as but not limited to, tornadoes, fires, shelter in place, lockdown, active shooter on premises, reunification with families after emergency or disaster, and evacuating children with disabilities in compliance with the rule sections 2.126, 2.127, 2.128, 2.129, 2.130, and 2.131 of the "General Rules for Child Care Facilities". Emergency response procedures that explain, at a minimum, the life-saving procedure that will be followed and how the home will function during a fire, severe weather, lockdown, reverse evacuation, or shelter-in-place emergency situation;
310. The procedures, including how parents are notified, for any child who has been separated from the group outside of the supervision of their assigned staff member or for whom the local authorities have been contacted;
32. The procedure for reporting of child abuse, including the name of the county department of social/human services and phone number of where a child abuse report should be made (see rule section 2.122 of the General Rules for Child Care Facilities) Reporting of child abuse, including the name of the county department of social/human services and phone number of where a child abuse report should be made;
334. The procedure for filing a complaint about family childcare home, including the name, address, and telephone number of the Colorado Department of Early Childhood Department (see rule section 2.121 of the General Rules for Child Care Facilities) Filing a complaint about a family child care home, including the name, address and telephone number of the Colorado Department of Human Services, Division of Child Care, where a complaint may be filed;
342. Where a parent may obtain the official copy of these "Rules Regulating Family Child Care Homes," including the location on the Colorado Secretary of State's website;
354. Regularly identifying on a routine basis recalled toys, equipment, and furnishings, and food; developing a plan to remove the recalled items from the family child care home; and
36. The policy on interacting with chickens, reptiles, or amphibians, including notification to parents or guardians on the risks associated with children under the age of five (5) having access to these animals. The policy must include notification of the national recommendations from the Centers for Disease Control, the American Academy of Pediatrics found in Caring for Our Children, and the Colorado Department of Public Health and Environment that chickens, reptiles, or amphibians be inaccessible to children under the age of five (5) and are not suitable for school or child care settings with children under the age of five (5). The policy must notify parents or guardians that chickens,

reptiles, and amphibians are recommended to be inaccessible to children under the age of five (5) due to a higher risk of infection and increased disease severity.

2.317 7.707.6 COMMUNICATION, EMERGENCY AND SECURITY PROCEDURES

- A. The family child care home must have a working unblocked telephone that has the capacity to receive all incoming and reverse 911 calls, and record messages-voicemails during child care hours.
1. The telephone must be on the premises in the general area of the primary provider.
 2. The telephone number must be made available to each parent and the Department~~licensing authority~~.
 3. The following emergency telephone numbers must be posted in a prominent and conspicuous location easily observable to those caring for children~~near the telephone~~:
 - a. 911 or the alternate emergency number for local fire or police;
 - b. Name and phone number of at least one (1) designated emergency substitute for the provider;
 - c. Name and physical address of the family child care home;
 - d. Nearest hospital or emergency medical clinic;
 - e. Local health department;
 - f. Rocky Mountain Poison Center number at 1-800-222-1222; and,
 - g. Location of children's personal~~emergency~~ numbers.
 4. The telephone and alternative emergency telephone numbers for parent(s) or guardian(s) and other authorized emergency contacts of each child in care must be accessible in one (1) designated place.
 5. If 911 is not available, the provider must have a plan for accessing emergency transportation at all times.
 6. The primary provider~~provider, applicant 2, equally qualified provider, or qualified substitute~~ must immediately~~promptly~~ notify the child's parent(s) or guardian(s) when emergencies, accidents, injuries, or illnesses, not requiring medical attention, occur while in care.~~7. Emergency health care providers' numbers must be accessible in one designated place.~~
- B. Emergency procedures
1. The provider must have a written fire safety and evacuation plan that is reviewed at least annually. This plan must include:
 - a. Primary and secondary emergency escape routes;
 - b. The procedure for assisting persons unable to escape unassisted;
 - c. How to account for all persons that have evacuated;

d. A primary and alternate means of notifying emergency responders of a fire or other emergency;

e. An outside meeting location; and

f. The location of fire extinguishers.

2. The ~~primary provider home~~ must have a written emergency plan for severe weather, lockdown, shelter-in-place situations, and active shooter situations that is reviewed at least annually. The plan must include the items listed in the rule sections 2.126, 2.127, 2.128, 2.129, 2.130, and 2.131 of the "General Rules for Child Care Facilities" as well as these additional requirements and emergency response procedures that explain, at a minimum, the life-saving procedures that will be followed, and how the home will function during a fire, severe weather, lockdown, reverse evacuation, or shelter-in-place emergency situation. The plan must include, but not be limited to:

a1. The life-saving procedures that will be followed;

b. How the family child care home will function during the emergency;

c. Prompt notification of parent(s) or guardian(s);

d2. When local authorities will be notified; and

e3. How emergency transportation will be provided.

C. Release of Children

1. The provider must release the child only to the person(s) sixteen (16) years of age or older to whom the parent or guardian has given written authorization. ~~If the provider who releases the child does not know the person, picture identification must be required to assure that the person is authorized to pick-up the child.~~ Written authorization must be maintained in the child's record. In an urgent and/or emergency situation, the child may be released to a person twelve (12) years of age or older for whom the child's parent(s) or guardian(s) has given verbal authorization. ~~If the provider who releases the child does not know the person, picture identification must be required to assure that the person is authorized to pick-up the child.~~

DC. Sign In/Out Procedure

1. The provider must maintain a daily sign in/out method containing the date; the child's name; the time that the child arrived at and left the family child care home; and the parent, guardian, or authorized person's signature. A full signature or other unique identifier is required by the parent(s) or guardian(s) every time the child arrives at or leaves the family child care home. The provider may sign in or out children who arrive directly from school or an activity as needed on a daily basis. The provider must use their full signature or other unique identifier. The parent(s) or guardian(s) must provide a signature on a weekly basis to verify the record.

ED. Visitors

1. All non-resident visitors ~~including friends of the provider's own children, to the family child care home, during child care hours, including friends of the provider's own children.~~ Visits from all non-family members to the home must be documented on the sign in/out log, including the name, date, and arrival, and departure times.

2.318 7.707.37 ADMINISTRATIVE RECORDS AND REPORTS

- A. The primary provider must register their operational status information in the Department's provider status portal every calendar year in the months of April and October.
1. The primary provider must update their information any time their operational status changes during a declared state emergency. The provider must report in writing to the State Department any critical incident as defined at Section 7.701.52 and any fire that occurs at the home to which a local fire department has responded.
- B. As soon as possible, but not later than twenty-four (24) hours after the event, the primary provider must immediately telephone and also submit to the State Department as soon as possible, but not longer than within twenty-four (24) hours, excluding weekends and holidays, a written report about any child who has been separated from the group outside of the supervision of the provider or staff member, or for whom the local authorities have been contacted, lost from the provider's care and whether authorities have been contacted or not. Such report must indicate:
1. The name, birth date, address, and telephone number of the child;
 2. The names of the parent(s) or guardian(s) and their address and telephone number if different from those of the child;
 3. The date, location, time, and circumstances when the child was separated from the group outside of the supervision of the provider or staff member last seen;
 4. The location, time, and circumstances when the child was separated from the group;
 5. All actions taken to locate the child, including whether local authorities were notified; and,
 5. The name of the provider and/or person supervising the child at the time the child was separated from the group last seen.
- C. The following emergency records must be kept and maintained at the family child care home for twelve (12) months:
1. Dates of annual review of emergency plans per rule section 2.317(B);
 2. A record of all emergency drills held over the past twelve (12) months as required in rule section 2.313- of the "General Rules for Child Care Facilities;" and
 3. Dates of monthly smoke alarm testing.
- D. The following records must be kept and maintained in the files at the family child care home for three (3) years after the family child care home closes its license or stops providing care under its license; a child leaves the care of the family child care home termination of care; or a staff member or volunteer terminates employment or volunteerism at the family child care home:
1. A daily attendance sign in/sign out sheet for each child, including the time the child arrives at and departs from the family child care home;
 2. Children's records per rule section 2.3207-707.51;
 3. A list of current staff members, qualified substitutes, employees, and volunteers, and substitutes work schedules;

4. ~~Primary providers, applicant 2, equally qualified providers, sStaff members~~Employee, ~~qualified substitutes,~~ and volunteers records per ~~rule sections 2.311, 2.312, 2.313, 2.314, and 2.315~~7.707.36; and
5. A record of visitors and volunteers in the ~~family child care~~home during scheduled business hours.

E. Confidentiality and Retention

1. Information and records concerning ~~the primary provider, applicant 2, equally qualified providers, qualified substitutes, all staff members, employees, substitutes,~~ volunteers, children and their families must be ~~kept~~~~maintained~~ confidential (~~see rule sections 2.123 and 2.124 of the "General Rules for Child Care Facilities").~~ and All required records must be stored in a secure location.
2. ~~Records for Tthe primary provider, applicant 2, equally qualified providers, qualified substitutes, all staff members, volunteers, and children and their families~~Employee and children's records must be available, upon request, to authorized representatives of the ~~State~~Department.

~~7.707.34~~ — ~~Employees~~

~~A. — Any employee whose activities involve the care or supervision of children; or who has unsupervised access to children must complete:~~

- ~~1. — A fingerprint based criminal background record check as required at section 7.701.33 and,~~
- ~~2. — The State Department mandated automated system background check for child abuse and neglect as required at Section 7.701.32.~~

~~B. — Additionally, employees and substitutes for the primary provider, who provide care to children for fourteen (14) days (112 hours) or more per calendar year must complete:~~

- ~~1. — Verification of current certification of First Aid and CPR for all ages of children;~~
- ~~2. — A statement of a current health evaluation, signed by an approved health care professional, that was completed within the last twenty-four (24) months;~~
- ~~3. — Verification of current State Department approved medication administration training; and~~
- ~~4. — Verification of current State Department approved universal precaution training.~~

ADMISSION2.319 ~~7.707.5~~ **ADMISSION PROCEDURE**

- A. An admission process must be completed prior to the child's attendance at the ~~family child care~~home and must include:
 1. A pre-admission interview, by telephone or in person, with the child's parent(s) or guardian(s) to determine whether the services offered by the ~~family child care~~home will meet the needs of the child and the parent(s) or guardian(s);
 2. ~~The provider must obtain a signed document stating that the parent(s) or guardian(s) have received the policies and procedures, and by signing the policies and procedures~~

~~document, the parent(s) or guardian(s) agree to follow, accept the conditions of, and give authorization and approval for the activities described in the policies and procedures. An explanation of the provider's written policies and procedures. The child's parent(s) or guardian(s) must sign a statement indicating that they have read, received, and understand the provider's current policies and procedures;~~

3. ~~An itemized fee schedule plan for payment of fees;~~
4. Completion of the registration information and authorizations required for inclusion in the child's record.

~~B. At the time of admission, the provider must obtain:~~

- ~~1. Contact information for parents or guardians;~~
- ~~2. Contact information for other responsible adults;~~
- ~~3. Where the parent or guardian and can be reached in the event of an accident, illness or other emergency; and,~~
- ~~4. The telephone number of the child's health care provider;~~
- ~~5. Written authority to arrange for medical care in the event of an emergency; and~~
- ~~6. Names of individuals authorized to take the child from the home.~~

2.320 7.707.51 CHILDREN'S RECORDS

- A. An admission record must be completed for each child prior to or at the time of the child's admission and updated annually; ~~or if there are when any changes occur,~~ unless otherwise specified in these rules. The admission record must include:
 1. The child's full name, date of birth, current address, and date of enrollment;
 - ~~2. Family member names;~~
 - ~~3.~~ Parent(s) and guardian(s) home and e-mail addresses; telephone numbers, including home, work, ~~and cell and pager numbers, if the parent chooses to provide those numbers;~~ employer name and work address; and, any special instructions as to how the parent(s) or guardian(s) may be reached during the hours that the child is in care at the ~~family~~ child care home;
 - ~~34.~~ Names, addresses, and telephone numbers of ~~persons other than parent(s) or guardians(s) who are persons aged sixteen (16) years and older who are~~ authorized to ~~pick up take~~ the child from the family child care home;
 - ~~45.~~ Names, addresses, and telephone numbers of persons who can assume responsibility for the child in the event of an emergency if the parent(s) or guardian(s) cannot be reached immediately;
 - ~~56.~~ Names, addresses, and telephone numbers of the child's health care provider, dentist, ~~pedadentist,~~ and hospital of choice, if applicable;

67. Health admission information, including ~~a~~ health care plans, chronic medical conditions, allergies, and immunization history, shall be provided to the family child care provider prior to the first day the child attends the family child care home;
78. A dated, written authorization for emergency medical care signed and updated annually by the parent(s) or guardian(s). The authorization must be notarized if required by the local hospital, clinic, or emergency health care facility;
89. A written record of any ~~serious-reportable~~ accident, illness, or injury as defined in rule section 2.124 of "The General Rules for Child Care Facilities" occurring during care must be retained in each child's record, with a copy provided to the parent or guardian;
940. Written authorization for field trips and excursions can occur on a daily, weekly, monthly, or seasonal basis.
- a. Scheduled field trips and excursions away from the family child care home require advanced notice by written or electronic methods, which must include: locations, estimated times of attendance, and a phone number to contact the family child care home provider during the trip; and written permission from the parent(s) or guardian(s) for each scheduled trip or excursion.
- b. Unscheduled field trips or excursions away from the family child care home require notification upon departure to the parent(s) or guardian(s) via written or electronic methods, which must include: locations, estimated times of attendance, and a phone number to contact the family child care home provider during the trip.
- c. Routine field trips and excursions, such as daily transportation provided by the family child care home to and/or from care, require annual authorization by written or electronic methods, which must include departure and arrival times to and from the family child care home; and pick up and drop off times and locations. Written authorization, obtained in advance of the event from a parent or guardian, for a child to participate;
104. Written authorization for media use is required if the media use is not included in the written policies and procedures statement, including, but not limited to, television and video viewing, music, tablet and/or smart phone usage, video games, and computer use. The authorization must include approved time limits. The authorization form only needs to be on file if media use is not addressed in the home policies and procedures statement; and
112. Written authorization for special activities as defined in rule section 2.600 of the "Rules Regulating Special Activities," (see Section 7.714.1).
- B. All forms contained in the admission record must be current and accessible to providers, qualified substitutes, staff members, and representatives of the ~~State~~ Department.
- C. The complete file for each child in care must be kept confidential and retained by the family child care home primary provider for at least three (3) years after the child leaves the family child care home. It must be available without restriction to the Department licensing agency and to ~~the~~ child protective services ~~worker~~, police, and the child's parent(s) or guardian(s).
- D. ~~Except for the licensing authority, child protective services worker, police, and the child's parent(s) or guardian(s), children's reports and records and facts learned about children and their families must be kept confidential.~~**

2.321 HEALTH CARE **7.707.7 CHILD CARE SERVICES**

7.707.71 Health Care, Medication, Communicable Disease, Sun Protection, Second Hand Smoke, and First Aid Supplies [Rev. eff. 6/1/12]

A. Statements of Health Status and Immunization

1. The provider has the right to refuse to admit a child if a statement from a health care provider is not submitted.
2. At the time of admission, the parent or guardian must provide the following information to the provider for each child entering the family child care home:
 - a. Health information, including any known allergies, medication being taken and possible side effects, special ~~diets~~ dietary requirements, and chronic health conditions;
 - b. If applicable, a Department-approved health care plan authorized by the child's health care provider and parent(s) and/or guardian(s), defining the interventions needed to care for a child who has an identified health condition or developmental concerns, including, but not limited to: seizures, asthma, diabetes, severe allergies, heart or respiratory conditions, and physical or emotional disabilities; and, Any applicable medications, supplies, and or medical equipment must be available to the primary provider, applicant 2, equally qualified providers, qualified substitutes, and any staff members prior to the child's first day of care. The primary provider, applicant 2, equally qualified providers, qualified substitutes, and any staff members working with a child with a health care plan must be informed, trained, and delegated responsibility for carrying out the health care plan by the Department-approved child care health consultant; supervision of the plan and interventions must be documented.
 - c. Documentation of school-required immunization status or medical or nonmedical exemption, is required by the Colorado Board of Health, including month and year each immunization was administered. Up-to-date, school-required immunizations must be documented as specified on the Colorado Department of Public Health and Environment (CDPHE) certificate of immunization or on an "approved alternate" certificate of immunization as described in CDPHE regulations at 6 CCR 1009-2:VI(A), (May 15, 2023), no later editions or amendments are incorporated. These regulations are available from the Colorado Department of Public Health and Environment at no cost at www.sos.state.co.us/CCR. These regulations are also available for public inspection and copying at the Colorado Department of Early Childhood, 710 S. Ash St., Denver, CO 80246, during regular business hours, 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. Colorado law requires that proof of immunization be provided prior to the first day of admission.
- 1)3. If the parent(s) or legal-guardian(s) of a child ~~wishes wants an~~ wishes wants an ~~nonmedical exemption from the immunization requirement for immunizations due to based on a religious belief whose teachings are opposed to immunizations or a personal beliefs that is opposed to immunizations,~~ nonmedical exemption from the immunization requirement for immunizations due to based on a religious belief whose teachings are opposed to immunizations or a personal beliefs that is opposed to immunizations, the child's parent(s) or legal-guardian(s) must:

~~sa)~~ ~~Submit the CDPHE Certificate of Nonmedical Exemption (May 2023) with a signature from an immunizing provider in Colorado, or~~

~~2a)~~ ~~Submit the Colorado Department of Public Health and Environment Certificate of Nonmedical Exemption (May 2023) received upon the completion of Colorado Department of Public Health and Environment Online Immunization Education Module (Aug. 2021). The Certificate of Nonmedical Exemption and Education Module are herein incorporated by reference, no later editions or amendments are incorporated. The Certificate and Education Module are available at no cost from the Colorado Department of Public Health and Environment at <https://cdphe.colorado.gov/vaccine-exemptions>. The Certificate is available for public copying and inspection at the Colorado Department of Early Childhood, 720 S. Ash St., Denver, CO 80246, during normal business hours. ~~or complete and sign the current Colorado Department of Public Health and Environment immunization card which states the reason for such an exemption.~~~~

~~32ab)~~ ~~The family child care home primary provider has the right to refuse to admit any child if a completed certificate of nonmedical exemption current immunization card is not submitted.~~

~~32.~~ Within thirty (30) days after admission, and within thirty (30) days following the expiration date, the parent(s) or 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 healthcare provider/practitioner. 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 under two and one-half (2-1/2) 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 licensed family child care home.

~~45.~~ ~~Statements of health status of children less than two (2) years of age must be updated as required in writing by the health care provider, or in accordance with the American Academy of Pediatrics Recommendations for Preventive Pediatric Health Care recommended schedule at https://downloads.aap.org/AAP/PDF/periodicity_schedule.pdf (4th ed. American Academy of Pediatrics; 2017) herein incorporated by reference. No later editions or amendments are incorporated. These recommendations are available at no cost from <https://www.aap.org/>. These recommendations are also available for public inspection and copying at the Colorado Department of Early Childhood, 710 S. Ash St., Denver, CO 80246, during regular business hours. Statements of health status of children under two (2) years of age must be updated in accordance with the national pediatric recommended schedule for routine health supervision or as required in writing by health care provider.~~

~~56.~~ Health statements for children over two (2) years to seven (7) years of age must be updated in accordance with the American Academy of Pediatrics Recommendations for Preventive Pediatric Health Care annually or as required in writing by health care provider.

~~67.~~ For children seven (7) years of age and older, health statements must be updated every three (3) years as long as the children are in care.

~~4.~~ ~~Parent(s) or guardian(s) must be notified in the written policies if the provider's children are non-immunized, if children attending facility are non-immunized, and if children with personal and religious exemptions to immunization are accepted in care.~~

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BC. Medication

1. Children are not allowed to bring medications to the family child care home unless accompanied by a responsible adult.
2. Any routine unexpired medication, prescription or non-prescription (over-the-counter), homeopathic or vitamin, may be administered by the provider ~~must~~ may be administered to a non-school-age (under the age of five (5) years) child by a primary provider, applicant 2, or staff member with the Department-required approved medication administration training. ~~Medication can be administered~~ only with a current written order of a health care provider with prescriptive authority, and ~~with~~ written parental consent. Home remedies, homeopathics, vitamins, and supplements ~~must not be administered to children in-child-care~~ while in care at the family child care home ~~may never be given to a child.~~
- a. If the routine medication involves the administration of unit dose epinephrine, the administration must be accompanied by a written individual health care plan by the prescribing health care provider that identifies the factors for determining the need for the administration of the medication, and is limited to emergency situations only.
- b. If the routine medication involves the administration of a nebulized-inhaled medication, the administration must be accompanied by a written health care plan by the prescribing health care provider that identifies the factors for determining the need for the administration of the medication.
- c. If applicable, the primary provider must have a written policy on the storage and access of inhalers and epinephrine carried by school-age children (five (5) years to eighteen (18) years). The policy must include a written contract with the parent(s) or guardian(s) and child acknowledgement assigning levels of responsibility of each individual. This contract includes orders for the medication from their 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.
3. The written order by the health care provider with prescriptive authority must include:
 - a. Child's name and birthdate;
 - b. Licensed prescribing health care provider's 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; and

j. ~~Special instructions.~~

4. ~~Medications must be kept in the original labeled bottle or container. Prescription medications must contain the original pharmacy label.~~

~~The provider can accept such medicines only in the original container. Prescription medicine containers must bear the original pharmacy label that shows the prescription number, name of medication, date filled, physician's name, child's name, and directions for dosage. When no longer needed, medications must be returned to the parent or guardian or destroyed.~~

5. ~~Over-the-counter and homeopathic medications must be labeled with the child's first and last name. The provider can administer medication only to the child whose name appears on the written order from the prescribing health care provider.~~

6. ~~In the case where 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 health care provider and a change in the prescription label.~~

7. ~~The provider, applicant 2, equally qualified providers, qualified substitutes, and any staff responsible for administering medications must have a current Department-approved medication administration training; current Department-approved CPR certification; current Department-approved first aid certification; and the Department-approved standard precautions training prior to administering medication.~~

a. ~~All providers who administer medication must have daily face-to-face communication verbal contact with parent(s) or guardian(s) of children needing medication and must be currently trained through the State Department-approved medication administration course and must administer medication in compliance with the concepts taught in the course.~~

8. ~~All medications in the family child care home, vitamins, and supplements, except those medications specified in the Department-approved medication administration training as emergency medications, must be locked and inaccessible to children, but available to the primary provider, applicant 2, equally qualified provider, qualified substitute, or staff members trained in administering medication. The family child care home primary provider must have specific policies regarding controlled medications. Controlled medications must be counted, safely secured, and access to these medications must be limited.~~

a. ~~If refrigeration of medication is required, it must be stored in a locked, leak-proof container in a designated area of the refrigerator separated from food.~~

b. ~~The primary provider must have specific policies regarding controlled medications. Controlled medications must be counted, locked, and access to these medications must be limited.~~

c. ~~All personal medications, vitamins, and supplements of the primary provider, applicant 2, staff members, or any residents of the home must be locked and inaccessible to children.~~

da. ~~When away from the family child care home, the primary provider, applicant 2, equally qualified provider, qualified substitute, or staff members trained in~~

~~administering medication the family child care home provider or staff must carry emergency medications.~~

9. ~~If a medication is expired or left over, parent(s) and or guardian(s) are responsible for picking up the medication. If the parent(s) and or guardian(s) do not respond, the family child care home medication shall be provider shall dispose disposed of in accordance with 6 CCR 1007-2, Part 1, Regulations Pertaining to Solid Waste sSites and Facilities (Sept. 30, 2023) and 6 CCR 1007-3, Parts 99 (June 30, 2018), 100 (July 15, 2020) and 260-165 (July 15, 2023), 266 (June 30, 2014), 267 (Apr. 14, 2021), and 268 (July 15, 2023), and Parts 99 and 100 and as required by the Colorado Department of Public Health and Environment (CDPHE) <https://cdphe.colorado.gov/colorado-medication-take-back-program> (2023), herein incorporated by reference. No later editions or amendments are incorporated. These regulations are available at no cost from CDPHE at <https://www.sos.state.co.us/CCR>. The recommendations are available at no cost from CDPHE at <https://cdphe.colorado.gov/hm/prep-med-waste-disposal> and <https://cdphe.colorado.gov/colorado-medication-take-back-program>. These regulations and recommendations are also available for public inspection and copying at the Colorado Department of Early Childhood, 710 S. Ash St., Denver, CO 80246, during regular business hours.~~
5. ~~Medication must be stored in a locked cabinet, cupboard, or locked box so that it is inaccessible to children. If refrigeration is required, it must be stored in a leak- proof container in a designated area of the refrigerator separated from food.~~
6. ~~Medication must be administered, documented and disposed of in accordance with the State Department approved training in medication administration.~~
107. A written medication log must be kept for each child. This log is a part of the child's record. The log must contain the following:
- a. ~~Child's name and birthdate;~~
 - b. ~~Time medication was is supposed to be given according to the by written medication authorization;~~
 - c. ~~Name of the medication, dosage, and route;~~
 - d. ~~Time medication is actually administered to the child;~~
 - e. ~~Special instructions;~~
 - f. ~~Name or initials of the individual giving the medication;~~ and
 - g. ~~Notation if the medication was not given, and the reason.~~
- 11e. ~~Topical preparations such as used for prevention on unbroken skin including, but not limited to, petroleum jelly, diaper rash ointments, sunscreen, and insect repellants, sprays, and other ointments may can be administered to children solely with written parent and/or guardian authorization. These Topical preparations may not be applied toused as treatment on open wounds or broken skin unless there is must have a written order from a prescribing health care provider in addition to parent authorization.~~

C. Children With Special Needs

1. 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 the primary provider, applicant 2, equally qualified provider, qualified substitute, or staff member, 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 rule section 2.119 in the General Rules for Child Care Facilities)
2. The ~~family child care home~~primary provider must secure the services of a registered nurse, physician or Department-approved child care health consultant (CCHC) prior to the first day of care of the enrollment of a child with special health care needs that require delegation beyond routine medications, so the primary provider, applicant 2, equally qualified provider, qualified substitute, and or staff members can receive training, delegation, and supervision by the registered nurse, physician, or Ddepartment-approved CCHC 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 primary provider must obtain written instructions for providing services from the child's parent or guardian, and the child's health care provider. If an existing individualized health care plan is provided for the child, it must be reviewed and followed by the primary provider, applicant 2, equally qualified provider, qualified substitute, and or staff members 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 (4th)-day of care.
4. For an enrolled child with a newly identified special health care need, the ~~family child care home~~primary provider must obtain written instructions for providing services from the child's parent(s) or guardian(s) 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 identified need. For a life-threatening health care need, the health care plan and any associated medication(s) must be available prior to the child's re-admittance to the family child care home.
5. The individual health care plan must be updated at least every twelve (12) months from the date of the initial plan and as changes occur. The plan must include all information needed to care for the child, and must be signed by the health care provider, and the parent(s) or guardian(s). The plan must include if applicable, but not be-limited to, the following:
 - a. Medication and dosing 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; and
 - g. Medical procedure/intervention orders.

DE. Sun Protection

1. The primary provider must obtain written authorization and instructions from the parent(s) or guardian(s) for the application of sunscreen to their children's sun exposed skin prior to outdoor play, year-round. The authorization must include instructions for the application of full-spectrum UVA/UVB rating sunscreen with an SPF of thirty (30) or greater; or the use of alternative forms of sun protection approved by the parent(s) or guardian(s), which may include but is not limited to: hats, long sleeves, umbrellas, and tents. The provider must inform the parent or guardian, through the policies and procedures statement or an authorization form, that sunscreen will be applied to the children's exposed skin prior to outside play. A doctor's permission is not needed to use sunscreen at the home. When a parent or guardian supplies sunscreen for an individual child, the container must be labeled with the child's first and last name. If sunscreen is provided by the provider, parents must be notified in advance, in writing, of the type of sunscreen the provider will use. Parent(s) or guardian(s) must notify the provider if sunscreen has been applied to the child's skin prior to arriving at the home. Sunscreen must never be applied to an infant's skin.
2. The family child care home primary provider, applicant 2, equally qualified provider, qualified substitutes, or staff members must apply sunscreen, have the parent(s) and/or guardian(s) apply sunscreen, or use an alternative form of sun protection for children approved by the parent(s) or guardian(s), prior to children going outside. Sunscreen must be reapplied as directed by the product label.
 - a. When the parent(s) and/or guardian(s) applies sunscreen, the family child care home provider must have a mechanism for documenting application times to ensure sunscreen is reapplied as directed by the product label. If documentation of application time is not available, the provider must ensure that sunscreen is applied thirty (30) minutes before going outdoors. If the child will be outside for more than two (2) hours one (1) hour, sunscreen must be reapplied every two (2) hours or 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 family child care home primary provider, parent(s) and/or guardian(s) must be notified in advance, in writing, of the type of sunscreen the family child care home primary provider will use.
5. Children over four (4) years of age may apply sunscreen to themselves under the direct supervision of the family child care home primary provider, applicant 2, equally qualified provider, qualified substitute, or staff member.
6. Sunscreen must not be applied to infants under six (6) months of age. Infants under six (6) months must be kept out of direct sunlight while outdoors.

3. Sunscreen used must be full spectrum UVA/UVB with an SPF of thirty or greater and applied according to manufacturer's instructions.

CHILD CARE SERVICES

2.322B. EMERGENCY MEDICAL CARE

- A1. The provider must obtain written authority to arrange for emergency medical care for each child. Written authorization to obtain emergency medical care must be on file prior to or on the first day of admission and must be re-authorized annually. In the event of injury or illness, the affected child must be separated from the other children in the room or area where child care is being provided

and made as comfortable as possible. First Aid care must be provided as required. If additional care, medical attention, or removal from the family child care home is indicated, the child's parent(s) or guardian(s) must be contacted by telephone, if possible, and medical assistance obtained without undue delay.

~~B2. F. First Aid Supplies~~ A first aid kit ~~Supplies~~ must be maintained and stored in an area inaccessible to children. Supplies ~~must~~ shall include band aids, adhesive tape, cold pack, gauze pads, rolled gauze, plastic bags, disposable gloves, and ~~compression bandages~~, scissors, masks, and a mechanism for cleaning hands in a remote location.

1. Portable first aid kits must be available to staff members at all times, including field trips and short excursions, and must be checked and restocked on at least a monthly basis.

2. Expired first aid supplies and equipment must be discarded and replaced.

~~2.323D.~~ CONTROL OF COMMUNICABLE ILLNESS

A4. When a child in care, resident of the family child care home, ~~or family child care home primary provider, equally qualified provider, or any staff member~~ has been diagnosed with a reportable communicable illness, ~~or when an outbreak of illness occurs, including, but not limited to, chicken pox, COVID-19, hepatitis A, measles, mumps, meningitis, diphtheria, rubella, salmonella, giardia, tuberculosis, shiga toxin-producing E. coli, and shigella,~~ the provider must immediately notify the parents or guardians of all children in care and report the diagnosis to the local county department of health or the Colorado Department of Public Health and Environment. The complete list of reportable communicable illnesses can be found in 6 CCR 1009-1 (Apr. 19, 2023). Rules and Regulations Pertaining to Epidemic and Communicable Disease Control, herein incorporated by reference. No later editions or amendments are incorporated. These regulations are available at no cost from the Colorado Department of Public Health and Environment at <http://sos.state.co.us/ccr>. These regulations are also available for public inspection and copying at the Department at 710 S. Ash St., Denver, CO 80246, during normal business hours.

B2. Any residents of the family child care home, primary provider, applicant 2, equally qualified providers, qualified substitutes, staff members, and children in care ~~individual~~ diagnosed with a reportable communicable illness must be excluded from contact with children in care at the family child care home for a period of time determined by the diagnosed individual's health care provider or by the local health department.

C. One room or area in the family child care home, within sight or sound of the family child care home primary provider, applicant 2, equally qualified provider, or qualified substitute, that contains a bed, cot, or sofa must be available for a child in the event of an illness or injury where a child can be separated from other children and comfortably cared for. A crib or playpen with a pad must be provided for children under twelve (12) months of age. A clean, washable sheet and blanket must be provided for each child over (12) months, and must be cleaned and changed after each use by a sick or injured child.

D. ~~Family child care home~~ Primary providers, applicant 2, equally qualified providers, qualified substitutes, and staff members must be in good health and free from communicable diseases while caring for children, preparing food, or employed in any capacity where there is a likelihood of transmitting disease to others in the family child care home.

E. Residents of the family child care home with symptoms of illness must be kept separate from the family child care home primary provider, applicant 2, equally qualified providers, qualified substitutes, staff members, and children in care.

2.3247.707.72 PERSONAL HYGIENE, HAND WASHING AND BATHING, DIAPERING AND TOILETING, AND CLEANING TOYS

A. Hand Washing and Bathing

~~1. Family child care home~~Primary providers, applicant 2, equally qualified providers, qualified substitutes, staff members, and children must wash their hands using the following procedures:

- a. Moisten hands with warm running water;
- b. Apply soap;
- c. Rub hands vigorously until a soapy lather appears;
- d. Continue washing for at least twenty (20) seconds outside of the water, rubbing areas between fingers, around nail beds, under fingernails, under jewelry and the backs of hands;
- e. Rinse hands under warm running water until they are free of soap and dirt; and
- f. Dry hands with a disposable towel, a clean cloth towel laundered after use, or a mechanical drying device.

~~2. Family child care home~~Primary providers, applicant 2, equally qualified providers, qualified substitutes, staff members, and children toddler-aged and older must wash their hands at the following times:

- a. Upon arrival for the day;
- b. Before and after:
 - 1) Preparing food or beverages;
 - 2) Eating, handling food, or feeding a child;
 - 3) Giving medication, applying a medical ointment or cream, or administering first aid; and
 - 4) Setup or use of sensory materials.
- c. After:
 - 1) Using the toilet or assisting a child with toileting;
 - 2) Diapering each child;
 - 3) Handling body fluids;
 - 4) Handling animals or cleaning up animal waste;
 - 5) Coming in from outdoors;
 - 6) Cleaning or handling garbage; and

- 7) At any other time the hands become soiled.
3. Infants must have their hands washed with:
- a. Soap and running water;
 - b. A clean cloth that contains soap and is laundered after each use; or
 - c. The use of soap and warm water solution dispensed from a clean spray bottle, followed by a rinse before drying with a clean cloth or disposable towel.
4. Infants hands must be washed:
- a. Before and after meals and snacks; and
 - b. After:
 - 1) Having their diaper changed;
 - 2) Coming in from outdoors; and
 - 3) Whenever their hands become soiled.
- ~~4. All providers must wash their hands thoroughly with soap under warm running water, when available, and dry with an individual use and/or single use disposable towel before preparing, serving, and eating food; before administering medication; after helping a child with toileting or diapering; after provider's own toileting; after wiping a child's nose; whenever possible on field trips, at a park, or at another location away from the home; after handling animals, their toys, or food and water bowls; after contact with bodily fluids or secretions; and, any other time the hands become soiled or contaminated.~~
- ~~2. All children must wash their hands thoroughly with soap under warm running water, when available, and dry with an individual use and/or single use disposable towel; before preparing and eating food; after toileting or diapering; after wiping his/her nose; whenever possible on field trips, at a park, or at another location away from the home; after handling animals, their toys, or food and water bowls; after contact with bodily fluids or secretions; and, any other time the hands become soiled or contaminated.~~
- ~~53. The Hand washing areas should promote self-help skills to include, but not be limited to, sturdy and age-appropriate step stools, soap, and single-use or disposable towels accessible to children.~~
- ~~4. If paper towels are not used, each child shall have an assigned towel that is used consistently, doesn't touch other towels, and is laundered weekly or more often if needed.~~
6. Hand washing areas shall be routinely disinfected when visibly dirty ~~or and prior to use~~ after any use of the ~~area~~ for tasks other than different from; hand washing including immediately after the sink is used to clean tanks, feeders, water containers and any equipment used by pets or animals.
7. Hand sanitizers and wipes are not acceptable alternatives to hand washing, except on outings where running water may be unavailable. Alcohol based hand sanitizers shall not be used for children under three (3) years of age.

8. When a child is bathing, the bath water must be between ninety (90) and one hundred ~~and twenty~~ (120) degrees. Children under five (5) years of age must not be left unattended while being bathed. For children over five (5) years of age, primary providers or staff members must periodically check on the child and be able to hear children at all times while bathing.

9. If towels are used for bathing or recreational activities, each child must have an assigned towel that is used consistently, doesn't touch other towels, and is laundered weekly or more often if needed.

105. Children's towels and drinking cups must not be shared.

B. Diapering and Toileting

1. The family child care home must comply with the following for toileting needs:

a. Toilets must be flushed between uses; and

b. ~~Non-flushing toilets are prohibited; and~~

be. Non-flushing toilets and toilet inserts must be disinfected after each use.

2. The family child care home must have a designated diaper change area for all children in need of diaper changing. The diaper change area must:

a. Have a smooth, durable, nonabsorbent, and easily cleanable surface; ~~and~~

b. Be large enough to accommodate the size of the child being changed; ~~;~~

c. Be located to the closest handwashing sink that is not used for food preparation;

3. The following procedure must be followed each time a diaper is changed:

a. Diapers must be checked for wetness or feces at least every two (2) hours, or whenever the child indicates discomfort or exhibits behavior that suggests a soiled or wet diaper. Soiled or wet diapers and clothing must be changed promptly and be replaced with clean diapers and clothing whenever necessary;

b. Children being diapered must be within arm's reach of the provider or staff member and actively supervised throughout the diapering process;

c. All supplies needed for diaper changing must be placed at the diaper changing area before the child is brought to the changing area;

db. The child must be placed on a clean, ~~disinfected~~sanitized, dry changing table or mat;

ec. Family child care homePrimary providers, applicant 2, equally qualified providers, qualified substitutes, and staff members must use single use disposable gloves;

fd. Use closest hand washing sink to the diaper changing area that is not used for food preparation;

ge. Children's hands must be washed with soap and water after diapering;

- hf. ~~Family child care home~~ Primary providers, applicant 2, equally qualified providers, qualified substitutes, and staff members ~~providers~~ must clean and disinfect the diaper changing area after each diaper change;
- ig. ~~Primary providers, applicant 2, equally qualified providers, qualified substitutes, and staff members~~ ~~Family child care home providers~~ must vigorously clean all parts of their hands with soap and warm running water and dry their hands with ~~single-use or disposable individual paper or cloth~~ towels after diapering each child;
- jh. During child care hours, clothing soiled by bodily fluids must be placed in a leak proof container. The container must be stored inaccessible to children and sent home on a daily basis;
- ki. Parent(s) or provider(s) must provide extra clothing; ~~and~~
- lj. For each child who is learning to use a toilet, the ~~Pprimary provider family child care home provider~~ must accommodate the child's individual developmental abilities and needs, ~~in accordance with nationally recommended procedures,~~ and as contained in the provider's written policies and procedures;
- k. ~~Toilets must be flushed between uses; and~~
- l. ~~If potty chairs are used, all parts of the potty chair must be disinfected immediately after each use.~~

C. Cleaning Toys

1. Toys that are not mouthed or otherwise contaminated by body fluids ~~must~~ shall be cleaned and sanitized at least once a week and whenever visibly soiled.
2. Toys that are placed in children's mouths or are otherwise contaminated by body fluids ~~must~~ shall be cleaned and sanitized prior to use by another child.
3. ~~Toys that are contaminated by feces, urine, vomit, blood, or other bodily fluids with blood must be cleaned and disinfected.~~
4. ~~Toys, tables, or any item that would be placed in children's mouths must be rinsed after disinfection.~~

7.707.73 ~~FOOD AND NUTRITION~~

2.325 MEALS AND SNACKS PROVIDED BY THE PROVIDER

- A. All meals and snacks provided by the primary provider, applicant 2, equally qualified providers, qualified substitutes, and staff members must meet current United States Department of Agriculture (USDA) Child and Adult Care Food Program (CACFP) meal pattern guidance and requirements published by the USDA Food Nutrition Service at <https://www.cacfp.org/meal-pattern-guidance/> (April 2016) and 7 C.F.R. sections §§ 210.10 and 226.20 (July 1, 2022), herein incorporated by reference. No later editions or amendments are incorporated and be offered at suitable intervals. These regulations are available at no cost from the USDA Food Nutrition Service at <https://www.ecfr.gov>. These regulations are also available for public inspection and copying at the Colorado Department of Early Childhood, 710 S. Ash St., Denver, CO 80246, during regular business hours. Children who are at the Family Child Care home for more than four (4) hours, day or evening, must be offered a meal. A nutritious snack or meal must be offered

during the midmorning and mid-afternoon hours. A mid-day meal must also be provided and must meet at least one-third (1/3) of the child's daily nutritional needs as required by the USDA child and adult care food program meal pattern requirements. Arrangements must be made for feeding children who are in care before 6 a.m. or after 6 p.m.

- ~~B.~~ Food must be offered to children when they are awake at intervals not more than three hours apart.
- ~~C.~~ Food must be wholesome and nutritious and stored in a safe and sanitary manner. A wide variety of foods, including fresh fruits and vegetables and whole grain products must be provided to children to ensure adequate intake of dietary fiber, vitamins, minerals, and other important nutrients.
- ~~D.~~ If the provider does not regularly provide meals, the provider must supplement children's meals that are inadequate with foods to meet the nationally recognized meal pattern requirements.
- ~~BE.~~ Family child care home Primary provider(s) and parent(s) must have ongoing communication regarding special diet and feeding needs of the child(ren).
- ~~C.~~ All parents must have access to menus and must be notified of meals being served.
- ~~1.~~ All substitutions must be compliant with dietary restrictions and or food allergies.
 - ~~2.~~ All substitutions must be documented.
- ~~DL.~~ Food must be offered to the child from the child's individual dish and utensil(s). If uneaten portion(s) from the child's plate are saved, they must be refrigerated and stored safely and must be served, eaten, or discarded within four (4) hours of being prepared. Uneaten portions from one child must not be given to another child; and children must not share dishes and/or utensil(s).
- ~~EN.~~ Dishes, cookware, high chair trays and utensils must be washed, sanitized, and stored in a safe and sanitary manner. When used, disposable dishes and utensils must be disposed of after use. Food preparation and service areas including, but not limited to, sinks, faucets, counters, and tables must be sanitarysanitized.
- ~~F.~~ All milk and juice offered to children must be pasteurized.
- G. Children are encouraged, but must not be forced, to eat food or drink fluids.
- ~~HF.~~ Foods offered shall be age appropriate and not pose a choking hazard.
- ~~H.~~ Children with special needs are included in regular meal areas and routines.
- ~~HI.~~ 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 two (2) times per week.
- ~~IJ.~~ Family child care home Primary providers, applicant 2, equally qualified providers, qualified substitutes, and staff members must not provide sugar sweetened beverages to children. These are beverages 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.

- J. ~~Juice must be limited to one (1) serving a day. Sweet type foods must be limited to no more than two (2) servings per week.~~
- KJK. Water must be offered and available at all times and cannot be a substitute for milk during meals.
- LK. The size of servings must be suitable for the child's age and sufficient time must be allowed so that meals are unhurried'
- M ~~If the family child care home primary provider does not regularly provide a meal, if and 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 family child care home primary provider must have foods available to offer as a supplement to that meal.~~
- N. During meals, children should be encouraged to engage in conversation and to express their independence.
- Q.M. Children must not be given foods that are contrary to the religious or cultural beliefs of their families or that are known to cause an allergic reaction or a health hazard.
- P. Food and beverages are not to be used as a reward.
- Q. Family child care providers must not serve grain-based desserts to children more than two servings per week. These desserts include but are not limited to: cookies, donuts, cereal bars, cake, and brownies.
- R. All children must be sitting when eating.
- S. Children under the age of eighteen (18) months must be sitting or standing stationary while drinking.
- T. Family child care home Primary providers, applicant 2, equally qualified providers, qualified substitutes, or staff members must either feed children under three (3) years of age or supervise them when they are eating.
- U. Children who are actively eating may be in a highchair or other approved feeding equipment for longer than fifteen (15) minutes. Children must be moved away from the feeding location once feeding is complete. Older children must be allowed to leave the feeding location once they are finished eating.

2.3260-FEEDING THE INFANTS ~~Bottles and Formula~~

- A1. An individualized diet and feeding schedule must be provided in a written plan submitted by the parent(s) or guardians(s), or by the child's physician with the knowledge and consent of the parent. Any change of diet and schedule must be communicated to the primary provider prior to implementing a new diet or schedule. ~~to staff and parent(s) or guardian(s) prior to the family child care home implementing a new diet or schedule.~~
- B. Bottles of milk, formula, or breast milk must never be warmed or thawed in a microwave oven. Infant formula and breast milk cannot be reused. If a child does not finish the bottle of formula or breast milk within one (1) hour, the contents must be thrown out.
- C2. If the infant is breast fed, the provider must not offer formula, water, or other liquids without discussing substitutions or supplementation with the infant's parent(s) or guardian(s).

- D3. The ~~family child care home~~primary provider must make an area in the home available for a breast feeding mother to breast feed her infant while visiting the home during business hours.
- E4. All infants ~~less than six (6) months of age unable to hold their own bottles~~ must be held by the ~~provider during~~for bottle feedings and should be held so they can see the face of the ~~family child care home primary~~ provider, applicant 2, equally qualified provider, qualified substitute, or staff member if it is appropriate for the child. Bottles must not be propped.
- F5. ~~Infants over six (6) months of age must not be allowed to hold their own bottles when lying flat. Infants and toddlers must not be allowed to hold their own bottles or sippie cups when lying flat to prevent choking, ear infections, bottle mouth or tooth decay.~~
- G. Bottles must not be allowed in sleep equipment with the infant.
- H6. There must be a sufficient supply of bottles provided for the entire day; or, if bottles are to be reused, they must be washed, rinsed, and sanitized after each use.
- I. ~~Family child care home~~Primary providers, applicant 2, equally qualified providers, qualified substitutes, or staff members may not mix cereal with breast milk or formula and feed it to an infant from a bottle or infant feeder unless there are written instructions from the child's health care provider.
- J7. Commercially prepared formula must be mixed in accordance with the directions of the manufacturer or written instructions from the child's health care provider.
- K8. Each bottle must be marked with the child's name when there is more than one (1) child in care that drinks from a bottle.
- P. Solid Foods
- L4. At a minimum, meals and snacks provided for infants under the age of one (1) year must contain the foods listed in the United States Department of Agriculture's (USDA) child and adult care food program meal pattern for infants, found in "Feeding Infants in the Child and Adult Care Food Program guide (July 2021), herein incorporated by reference. This guide is available for no cost from the USDA at https://fns-prod.azureedge.us/sites/default/files/resource-files/FI_FullGuide_2021.pdf. The guide is also available for inspection and copying from the Department at 710 S. Ash St., Denver, CO 80246, during regular business hours.
- M2. Foods must be appropriate for infants' developmental stages as determined by instructions obtained from the infant's parent(s), guardian(s), or health care provider.
- N3. ~~No~~ new foods must shall not be introduced to children under twelve (12) months of age without parent(s) ~~at~~ or guardian(s) permission.
- O. Infants who are eating solid foods must shall be provided with suitable solid foods ~~developmentally appropriate solid foods~~ that encourage freedom in self-feeding and must be fed in safe chairs such as highchairs.
- P. When the family child care home primary provider, applicant 2, equally qualified provider, qualified substitute, or staff member provides food other than breast milk or formula, food must be varied and include food from cereal, vegetable, fruit, and protein sources. When the parent(s) or guardian(s) provide solid food, the provider must supply any additional foods as needed and/or monitor the infant's total nutritional intake.

- Q. ~~Children who are actively eating may be in a highchair or other approved feeding equipment for longer than fifteen (15) minutes. Children must be moved once feeding is complete.~~
5. ~~Provider(s) must either feed infants and toddlers or directly supervise them while they are eating.~~
- R6. Honey and products containing honey must never be served to infants under twelve (12) months of age.

~~7.707.74~~ **Direct CARE OF CHILDREN**~~2.327 7.707.741~~ **SUPERVISION**

- A. The primary ~~family child care home~~ provider, ~~applicant 2, equally qualified providers, and/or qualified substitutes~~ must supervise ~~all children by sight and or sound~~ and know the location and ~~the activity of all children, both indoors and outdoors,~~ at all times while they are in care.
- B. ~~All children in care, including the family child care home primary provider's, or applicant 2's own children under the age of ten (10), -must only be cared for in areas approved/licensed by the Department for child care use, by the Department.~~
- CB. The ~~family child care home~~ primary provider's ~~and applicant 2's~~ own children who are age ~~ten (10)~~ ~~twelve (12)~~ years of age ~~up to sixteen (16) years if age and older~~ ~~and over~~ may each have one (1) friend over during child care hours if the following conditions are met:
1. The visiting children are not present for supervision; ~~and,~~
 2. The visiting children can immediately be sent home if needed; ~~and,~~
 3. The visiting children must be age ~~ten (10) years to sixteen (16)~~ ~~twelve (12) years or over;~~ ~~and,~~
 4. Visiting children must ~~not neither~~ compromise ~~nor~~ participate in the care ~~and~~ supervision of children.
- D. ~~The family child care home primary provider's and applicant 2's own children over the age of sixteen (16) years of age and older may have more than one (1) friend over during child care hours if the following conditions are met:~~
1. ~~The visiting children must be over the age of sixteen (16) years of age;~~
 2. ~~The visiting children are not present for supervision;~~
 3. ~~The visiting children can immediately be sent home if needed;~~
 4. ~~Visiting children must not neither compromise nor participate in the supervision or care of children;~~
 5. ~~Visiting children over the age of sixteen (16) years of age cannot have unsupervised access to children in care.~~
- EC. The ~~family child care home~~ primary provider ~~and applicant 2~~ may have other children over ~~on occasion~~ ~~periodically~~ if the following conditions have been met:
1. The visiting children are under the active supervision of their parent(s) or guardian(s) or their own child care providers; ~~and,~~

2. The square footage requirements for the family child care home accommodates all children present.

2.328 7-707.742 PHYSICAL CARE

- A. Children must be provided a developmentally appropriate environment.
- B. The Family child care home primary provider(s), applicant 2, equally qualified provider, qualified substitute, and all staff members must provide for children's appropriate care and well-being, taking into consideration the individual needs of each child.
- C. Throughout the day, each child must have frequent, individual personal contact and attention from the family child care home primary provider, applicant 2, equally qualified provider, qualified substitute, and staff members(s) ~~an adult~~, such as being held, rocked, taken on walks inside and outside the family child care home, talked to, read to, and sung to.
- ~~D. Infants in care who are unable to hold a bottle must be held during bottle feedings.~~
- ~~D~~E. Infants must be held frequently while in care.
- ~~E~~F. The primary provider, applicant 2, equally qualified provider, qualified substitute, and staff members ~~Family child care home provider(s)~~ must pick-up children appropriately around their upper chest and under their arms, and based on the developmental needs of the child.
- ~~F~~G. Children leaving the family child care home for school or other activities must be dressed appropriately to protect the health and safety of children for the weather.
- ~~G~~H. The Family primary provider, applicant 2, equally qualified provider, qualified substitute, and staff members ~~ly child care home provider(s)~~ must respond promptly to the needs of a child, including, but not limited to: crying, toileting, hunger, and thirst. ~~The timing of the response must not result in physical harm to the child.~~
- ~~H~~I. The primary provider, applicant 2, equally qualified provider, qualified substitute, and staff members ~~Family child care home providers~~ must investigate whenever children cry and must try to verbally or physically soothe the child.
- ~~I~~J. The primary provider, applicant 2, equally qualified provider, qualified substitute, and staff members ~~Family child care home providers~~ must develop/provide an environment that minimizes the risk to children from hurting themselves or each other.
- ~~J~~K. Greetings/Departures
 1. Children should be greeted individually and pleasantly upon arrival and departure.
 2. Parent(s) or guardian(s) shall be allowed access to their children and all ~~approved and~~ licensed areas at all times.
 3. When necessary, upon arrival and departure, the parent(s) or guardian(s) and family child care home provider, primary provider, applicant 2, equally qualified provider, or qualified substitute ~~must~~ shall share information related to the child's health, ~~and safety,~~ and overall well-being including, but not limited to, special diets, accident reports, specific fears, and family traumas.
- ~~K~~L. The Family child care home primary providers, applicant 2, equally qualified providers, qualified substitutes, and all staff members, must not use any substance that impairs their ability to care for

~~children, or be under the influence of~~ any controlled substance or consume any alcoholic beverage during the operating hours of the ~~family child care home~~ facility ~~or be under the influence of a controlled substance or alcoholic beverage during the operating hours of the facility, or use any substance that impairs their ability to care for children.~~

LM. ~~The Family child care home~~ primary providers, applicant 2, equally qualified providers, qualified substitutes, all staff members, substitutes, visitors, volunteers, and residents of the family child care primary provider and applicant 2's home ~~provider's home~~ who ~~consume or~~ are under the influence of any controlled substances or alcohol are not permitted to work with children or be in the area used for child care during business hours.

MN. Illegal drugs or paraphernalia must never be present on the premises of the family child care home.

2.3297-707-75 SLEEP AND WAKING TIME

- A. Children must be allowed to form and observe their own pattern of sleep and waking periods. Provision must be made so that children requiring a nap time have a separate area for their nap away from other children currently playing.
- B. Children who are awake must not be confined for more than ~~fifteen (15)~~ thirty (30) minutes at a time to cribs, high chairs (unless they are eating), swings, playpens, or other equipment that inhibit freedom of movement ~~unless they are eating~~. Confinement must never be used as a form of discipline. ~~They~~ Children must have an opportunity each day for freedom of gross motor movement ~~such as creeping, crawling, or walking in a safe, clean open, uncluttered area.~~
- C. ~~The provider must~~ Each provide a rest period for all preschool-age children remaining in the family child care home for longer than ~~five (5)~~ four (4) hours must be provided a rest period. A rest period and rest equipment must also be provided for older children who require a rest time.
- D. Rest or sleep periods must be scheduled appropriately for the age and development of the child(ren) and not forced. Children who do not sleep after thirty (30) minutes must be provided with developmentally appropriate alternative activities. ~~Infants and Toddlers who fall asleep must immediately be moved to~~ must be placed in their approved CPSC compliant sleeping equipment, incorporated by reference in rule section 2.329(H)(1), within ten (10) minutes of falling asleep, unless being held by the ~~family child care home~~ primary provider, applicant 2, equally qualified provider, qualified substitute, or staff member while being transported, or on a field trip, ~~or if children are not at the provider's home.~~
- E. Toddlers, preschoolers, and older children, as necessary, must have a suitable mat at least ~~not less than~~ two inches thick, cot, bed, or sofa, with a clean washable sheet and blanket or other suitable covering that has been laundered ~~sanitized~~ between uses by different children. ~~Children must be provided with a clean blanket.~~
- F. During rest/nap time the primary provider, applicant 2, equally qualified provider, qualified substitute, and all staff members must remain alert and supervise all children by sight or sound. ~~The atmosphere should be calm and conducive to rest or sleep.~~
- G. The atmosphere should be calm and conducive to rest or sleep. The lighting must be dim at nap time but must be bright enough for supervision of children. Safe Sleep Training for Family Child Care Staff

~~All staff who work with infants must complete Department-approved safe sleep training prior to working with infants and on an annual basis~~

H. Safe Sleep Environments for Infants

1. Each infant up to twelve (12) months of age must be provided with an individual crib or futon approved for infants or other approved sleep/rest equipment meeting Consumer Product Safety Commission (CPSC) standards published by the Consumer Product Safety Commission (CPSC) at 16 CFR § 1218.2 (April 23, 2015); 16 CFR § 1219.2 (October 28, 2019); 16 CFR § 1220.2 (June 3, 2023); 16 CFR § 1221.2 (January 20, 2020); 16 CFR § 1222.2 (August 5, 2023); 16 C.F.R. § 1236.2 (June 23, 2022), and 16 C.F.R. 1241.2 (February 15, 2022) herein incorporated by reference. No later editions or amendments are incorporated. These regulations are available at no cost from the CPSC at <https://www.ecfr.gov>. These regulations are also available for public inspection and copying at the Colorado Department of Early Childhood, 710 S. Ash St., Denver, CO 80246, during regular business hours. ~~located at 16 CFR Parts 1218-1222 (June 23, 2022), herein incorporated by reference. No later editions or amendments are incorporated. These regulations are available at no cost from the CPSC at <https://www.ecfr.gov/>. These regulations are also available for inspection and copying at the Department, 710 S. Ash St., Denver, CO 80246, during normal business hours.~~ Approved sleep equipment must provide each infant with sufficient space for the infant's length, size, and movement.
 - a. Other sleep equipment not manufactured for commercial use is prohibited.
2. ~~In the infant room,~~ Soft bedding or materials that could pose a suffocation hazard are not permitted in cribs, futons approved for infants, or other ~~approved~~ sleep/rest equipment that meets the CPSC standards incorporated by referenced in rule ~~subsection (1), above~~ 2.329(A).

Soft bedding means, but is not limited to; any soft sleep surface like bumper pads, pillows, blankets, quilts, comforters, sleep positioning devices, sheepskins, blankets, flat sheets, cloth diapers, bibs, plush toys, pacifiers with stuffed animals attached, and stuffed animals.

 - a. Mattresses for cribs and futons must have a properly fitted, clean sheet.
3. Infants must be placed on their back for sleeping. Infants who by their own ability roll onto their stomach do not need to be returned to their back.
4. Alternative sleep positions for infants must only be allowed with a health care plan completed and signed by the child's physician.
5. Swaddling of infants must only be allowed with a health care plan completed and signed by the child's physician.
6. Each infant up to twelve (12) months of age who uses a pacifier must have the pacifier offered when being put down to sleep, unless the parent directs otherwise.
7. All sleep/rest equipment must be safe, sturdy, and free from hazards including, but not limited to: broken or loose slats, torn mattress, chipping paint, ~~or~~ and loose screws.
8. Approved sleeping ~~equipment~~ mattresses meeting Consumer Product Safety Commission (CPSC) standards incorporated by referenced in rule ~~section 2.329(A),~~ must be firm and must fit snugly ensuring no more than two adult fingers are able to be inserted between the mattress and the side of the ~~approved CPSC compliant~~ sleeping equipment, incorporated by reference in rule ~~section subsection (1), above~~ 2.329(A).

9. Toys, including mobiles and other types of play equipment that are designed to be attached to any part of sleeping equipment must be kept away from sleeping infants and out of sleep environments, including hanging toys. Blankets and other items must not be hung from or draped over the sides or any part of sleeping equipment.
10. Drop side and stacking cribs are prohibited.
11. Infant sound monitors must be used when infants are sleeping in a separate room out of the direct supervision of the primary caregiver. When in use, infant sound monitors must meet the following conditions:
 - a. The sound monitoring equipment must be able to pick up the sounds of all sleeping infants;
 - b. The receiver of the sound monitoring equipment must be actively monitored by the primary provider or staff member at all times;
 - c. All sleeping infants must be physically observed at least every ten (10) minutes by the primary provider or a staff member; ~~and~~
 - d. Sound monitoring equipment must be regularly checked to ensure it is working correctly; ~~and~~
 - e. The monitor must be out of reach of children.
12. Infants who fall asleep in a piece of equipment not approved for sleep must immediately be moved to their approved sleep equipment meeting Consumer Product Safety Commission (CPSC) standards, incorporated by reference in rule section subsection (1), above 2.329(A), and placed on their back to sleep unless being held by the provider, while being transported, or on a field trip in a car safety seat, bean bag chair, bouncy seat, infant seat, swing, jumping chair, play pen or play yard, high chair, chair, sofa, adult futon, adult bed or ANY other piece of equipment not approved for sleep must immediately be moved to their approved sleep area and placed on their back to sleep.
13. Cribs must be used for sleeping, not extended play or confinement.
- ~~14. Children who are awake must not be confined for more than fifteen (15) minutes at a time to cribs, playpens, swings, high chairs, infant seats, or other equipment that inhibits freedom of movement. Children who are actively eating may be in a high chair or other approved feeding equipment for longer than fifteen (15) minutes. Children must be moved once feeding is complete.~~
145. If music is played in the infant sleep area, the music must not be played at a loud volume that would prevent infants from being heard by the family child care home primary provider, applicant 2, equally qualified provider, or staff member provider caregiver(s). Music equipment must not be placed under a crib or within three (3) feet of the sleeping infant.
156. Supervised tummy time must be offered to infants one (1) month of age or older at least four (4) times per day, for full-day family child care homes. The tummy time must be for short periods of three-five (3-5) minutes, and increase increasing the amount of time as the infant shows they enjoy the activity up to twenty to thirty (20-30) minutes per day. If the infant falls asleep during tummy time, immediately place the infant him/her on their back in approved-CPSC compliant sleeping equipment, incorporated by reference in rule section subsection (1) above 2.329(A).

167. When the primary provider, applicant 2, equally qualified provider, or staff member family child care home provider places infants in approved sleeping equipment for sleep, they must check to ensure that the temperature in the room is comfortable for a lightly clothed adult, check the infants to ensure that they are comfortably clothed (not overheated or sweaty), and that bibs, necklaces, and garments with ties or hoods are removed. ~~Clothing sacks or other clothing designed for sleep must be used in lieu of blankets if needed for additional warmth.~~

a. Clothing sacks or other clothing designed for sleep must be worn in lieu of blankets if needed for additional warmth. Sleep sacks or clothing that swaddles the infant, restricts movement of the child's arms or legs, that are too big for the infant, weighted, or not used in the manner the manufacturer intends are prohibited.

178. Infants must not ~~be placed to~~ sleep in the same crib or futon as another infant ~~or child,~~ and ~~A child~~ must never sleep with an adult in a bed, on a couch, or in any other setting or manner.

~~I. The facility must have policies, and ensure they are followed for safe sleep environments for infants.~~

~~J. The facility must have a policy, and ensure it is followed on the protection of infants from second hand smoke.~~

2.3307.707.76 OVERNIGHT CARE

- A. Regular overnight care (care ~~that~~ past midnight) of children is permitted only when approved by the Department ~~licensed to do so.~~
- B. All children in care must be provided with a comfortable cot, crib, bed, or couch suitable for the child's age, a bottom and a top sheet two (2) sheets, and a suitable warm covering. At least forty (40) square feet of floor space must be available for each bed. Beds arranged in parallel must be at least two (2) feet apart.
- C. Sheets must be changed weekly, between use by different persons, and more frequently if needed. The family child care home ~~No~~ provider must not ~~shall~~ knowingly allow a child to sleep in a wet bed.
- D. Children's faces and hands must be washed, teeth brushed, and children must change into comfortable clothing for sleeping. Extra sleepwear must be available ~~in the event that a change is necessary.~~
- E. ~~When the provider goes to sleep,~~ The primary provider, applicant 2, equally qualified providers, or qualified substitute family child care home provider must sleep on the same level of the home where children under eight (8) years of age are sleeping.
- F. Written permission must be obtained from parent(s) or guardian(s) approving ~~on~~ where the child sleeps, whether the child shares a room with another individual, and the child's sleep equipment ~~that the child is sleeping on.~~

G. Screen time, which includes television, recorded media, computer, tablet, cell phones, video games, and other media devices, must be turned off at least one (1) hour before bedtime.

7.707.8 GUIDANCE, LEARNING ACTIVITIES, MATERIALS AND MEDIA USE

2.3317-707-81 GUIDANCE

- A. At the time of admission, the family child care home primary provider ~~must~~shall discuss with the parent(s) or guardian(s) the family child care home's guidance expectations and consequences of a child's behavior.
- B. ~~Guidance used at the family child care home must be developmentally appropriate to the age of the child and is used as an opportunity to teach children social-emotional skills, such as self-regulation, problem-solving, and empathy for others. Guidance must be appropriate to the developmental age of child, constructive or educational in nature, and may include such measures as diversion, separation, talking with the child about the situation, praise for appropriate behavior, and gentle holding.~~
- C. Children must not be subjected to physical or emotional harm or humiliation. The family child care home primary provider must not use, or permit anyone else to use, corporal punishment as defined in section 22-1-140, C.R.S. 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 discipline.
- D. Physical, mechanical, and chemical restraint shall never be used.
- E. ~~Guidance must not be associated with food, rest or toileting.~~ Children must not be punished for not resting or sleeping, toileting accidents, failure to eat all or part of meals or snacks, or failure to complete an activity. Food or drink may must not be denied or forced upon children as a disciplinary measure.
- F. Meals and snacks can be temporarily postponed or provided individually, but deprivation of meals, snacks, and beverages must not be used as punishment.
- G. Separation, when used as guidance, must be brief and appropriate for the child's age and circumstances. The child must be in a safe, lighted, well-ventilated room within the hearing and vision of the primary provider, applicant 2, or staff members or other qualified adult. Children must never be isolated in a locked room, ~~attic~~ or closet area.
- H. Verbal or emotional abuse and derogatory remarks about any child ~~and~~or any child's family and home environment is prohibited.
- I. The family child care home primary provider, applicant 2, equally qualified provider, or qualified substitutes or approved substitute isare responsible for and shall supervise all guidance used within the family child care home. The family child care home primary, applicant 2, equally qualified provide, or qualified substitutes provider must not allow one child to punish another child.
- J. A child must not be punished for the actions of a parent(s) or guardian(s). This includes, but is not limited to, failure to pay fees, failure to provide appropriate clothing, failure to provide materials for an activity, or any conflict between the provider and the parent(s) or guardian(s).
- K. Physical redirection may be used to keep a child from immediate imminent danger. The child must be immediately released once removed from imminent danger.

2.3327-707-82 LEARNING ACTIVITIES

- A. The primary providers, applicant 2, equally qualified providers, qualified substitutes, and staff members ~~family child care home provider~~ must talk and interact with children throughout the day.

~~Corrective or controlling speech must be limited. Talking with children is generally social and not limited to only custodial or control speech.~~

- B. Children must be encouraged to relate, ~~interact, and/ or~~ to communicate with each other and with adults using developmentally appropriate behavior.
- C. ~~Primary providers, applicant 2, equally qualified providers, qualified substitutes, and staff members~~ Family child care home provider(s) ~~must~~ shall respond to children's attempts to communicate, ~~in a positive~~ using culturally sensitive ~~manner~~ eye contact and ~~make~~ making an effort to create two-way conversation.
- D. Each child in care must be provided with an opportunity for both group and individual play.
- E. ~~Primary providers, applicant 2, equally qualified providers, qualified substitutes, and staff members~~ The family child care home provider ~~must~~ shall encourage individual expression and adult directed projects ~~must~~ shall be kept to a minimum, ~~allowing~~ since children's work ~~to be~~ is varied and individual.
- F. Children ~~must~~ shall not be forced to participate in activities; alternate developmentally appropriate activities ~~must~~ shall always be available.
- G. Activities must be available to ~~the~~ children that are culturally sensitive and represent diversity in ethnicity, race, gender, ~~and age, and abilities.~~ ~~Variety shall exist in toys, books, and pictures.~~
- H. ~~Children must~~ Boys and girls should not be restricted to specific ~~gender~~ roles in play.
- I. ~~Family child care home~~ At least one (1) provider-initiated language activity ~~must~~ shall be offered daily, such as reading, storytelling, flannel boards, or puppetry.
- J. The ~~family child care home primary~~ provider(s) shall initiate at least one (1) interactive musical activity weekly, such as singing, dancing, playing instruments, marching, listening to tapes or recordings, radios, and musical videos.

~~2.3337-707-83~~ MATERIALS

- A. A selection of at least ~~five (5)~~ four (4) books must be available for the group of infants/toddlers in care.
- B. A selection of at least ten (10) books must be available for all children over two (2) years of age in care and must be organized and accessible to children most of the day. If children over five (5) years of age are in care, books relevant to the ~~eat~~ age of ~~the~~ child must be included within the ten (10) books.
- C. ~~At least three (3)~~ materials must be available to the children that are developmentally appropriate, culturally sensitive, and represent diversity in ethnicity, race, gender, ~~and age, and abilities.~~ Variety ~~must~~ shall exist in toys, books, and pictures.
- D. At least ~~five (5) types of~~ four (4) language developmentally ~~materials~~ appropriate ~~language materials to age of the children shall~~ must be available, such as ~~toy~~ telephones, puppets, story boards, dolls, ~~and pictures and chalk boards.~~
- E. At least ~~five (5)~~ four (4) types of age-appropriate ~~fine motoreye-hand~~ materials ~~must~~ shall be available for use daily which should include at least some of the following: crayons, paper, scissors, non-chokable small building toys, developmentally appropriate multi-size stringing beads, pegs, sewing cards, and puzzles.

- F. Age-appropriate blocks and accessories ~~must~~ shall be accessible for free play daily allowing at least two (2) children to play independently, yet simultaneously.
- G. ~~At least five (5) four (4)~~ types of developmentally appropriate nature or science related games, materials, or activities ~~must~~ shall be available such as: natural object collections, plants, gardens, pets, magnets, magnifying glasses, and/or science props.
- H. At least ~~five (5) four (4)~~ types of developmentally appropriate math or number materials ~~must~~ shall be available: counting objects, balance scales, rulers, number puzzles, magnetic numbers, and dominoes.
- I. At least ~~five (5) four (4)~~ types of art materials ~~must~~ shall be available such as: crayons, pencils, markers, paints, play dough, scissors, and glue. Some art materials must be readily available each day.
- ~~J. Glitter must not be used with children under three (3) years of age.~~
- ~~KJ. At least five (5) four (4) types of dramatic play materials shall be accessible for free play daily such as: backpacks, purses, hats, dress up clothing, housekeeping toys, dolls and accessories, toy telephones, play houses, toy animals, cars and trucks, costumes, and safe jewelry.~~
- ~~LK. Outdoor physical free play materials must shall consist of at least five (5) four (4) age appropriate toys and equipment including, but not limited to, the following in good repair, such as: push toys, riding toys, tossing toys, climbing equipment, balance boards, stationary swings, slides, balls, toss games, and sports equipment. These must be provided daily except in extreme weather, such as rain, snow, or extreme temperatures when indoor physical play may be substituted.~~
- ~~ML. Materials provided in large family child care homes must be double the requirements for the regular home as listed above when nine (9) or more children are present.~~
- ~~NM. Some sand or equivalent dry material or water play should be offered to children eighteen (18) months of age or older, indoors or outdoors, at least monthly and year round. If used, food and/or organic material must be discarded each week.~~
- ~~O. Daily physical gross motor activities, with or without equipment or materials, must be provided outdoors, or indoors to children for no less than sixty (60) minutes total for full-day family child care homes programs. Activities do not have to occur all at once.~~

2.3347-707-84 SCREEN TIME AND MEDIA USE

- A. ~~There must not be intentional screen time, which includes television, recorded media, computer, tablet, cell phones, video games, and other media devices for children under twenty-four (24) months of age. Children under twenty- four (24) months must be redirected from an area where screen time is displayed and provided with alternate activities. Media use including, but not limited to, television, video viewing, music, video games, and computer use should be permitted only with:~~
- ~~1. The written approval of a child's parent(s) or guardian(s). The authorization may be included in the parent handbook or contract;~~
 - ~~2. Parent-approved time limits; and~~
- ~~B. Screen time is prohibited during snack or meal times.~~

- C. ~~All media that children are exposed to must be developmentally appropriate and must not contain explicit language or topics.~~ Activities must not contain violence, profanity, nudity, or sexual content, and must have a rating appropriate for the age of children in care.
- D. ~~For children two (2) to five (5) years of age, screen time must be limited to no more than sixty (60) minutes per day.~~
- E. ~~For children two (2) years of age and older, screen time may only exceed sixty (60) minutes for a special occasion and must not occur more than once every two (2) weeks.~~
- FB. All children must be provided with a developmentally appropriate alternative activity once they ~~child(ren)~~ lose interest in the media activity.
- G. ~~There is no time restriction for children using personal adaptive equipment or assistive technology, or participating in mandatory school activities.~~

7.707.9 FACILITY REQUIREMENTS AND TRANSPORTATION**2.3357.707.91 GENERAL REQUIREMENTS**

- A. The entire premises are subject to inspection for licensing and safety purposes including, but not limited ~~to, to~~ the entire residence and where care is to be provided, the grounds surrounding the residence, the basement, the attic ~~(if accessible)~~, the storage shed, garage ~~and/or~~ carport, and any vehicles used for transportation of children in care.
- B. ~~A business of a nature and~~ Any other business activities that might be hazardous to the health, safety, or well-being of children, or that interferes with the supervision of children, cannot be operated or conducted on the premises of the family child care home during child care business hours.
- C. Mobile homes used as family child care homes must ~~have at least two (2) exits,~~ be secured, attached, skirted, ~~and~~ properly installed and stabilized, and have at least two (2) exits.
- D. The premises of the family child care home must be kept safe and free from hazards to health at all times.
- E. All weapons on the premises of the licensed family child care home must be unloaded, locked, and inaccessible to children. ~~Ammunition and arrows must be locked and stored separately.~~ This includes, but is not limited to, firearms, air rifles, bb guns, paintball guns, bows, hunting knives, swords, hunting sling shots, and martial arts weapons. ~~Trigger locks are acceptable. Antique and other guns used for decoration must be unloaded, inoperable and have the firing pin removed. An unstrung bow need not be stored in a locked container. Weapons must not be transported in any vehicle in which children are riding unless the weapons are made inoperable and inaccessible. The provider, employees, and substitutes must know the location of any weapons in the home.~~
1. ~~Weapons, and~~ ammunition, and /arrows must be locked and stored separately. Trigger locks are acceptable.
 2. Antique and other guns used for decoration must be unloaded, inoperable, and have the firing pin removed, -if applicable.
 3. Weapons must not be transported in any vehicle in which children are riding unless the weapons are made inoperable and inaccessible.

4. ~~Employees~~ Equally qualified providers, qualified substitute, staff members and volunteers are prohibited from carrying firearms as defined in section 18-1-901(3)(h), C.R.S., on the premises, both indoor and outdoor, and in any vehicle in which children are transported.
5. ~~The family child care home primary provider, applicant 2, equally qualified provider, qualified substitute, and staff members employees, and substitutes~~ must know the location of any weapons in the family child care home.
- F. All garbage and other wastes must be stored in a manner that is inaccessible to children and disposed of in a manner that does not constitute a health hazard or nuisance.
- G. Fire hazards, such as ~~defective electrical or gas appliances and electric cords, dangerous or defective heating or cooking equipment, or exposed wiring, must be repaired by a qualified repair and/or service company or removed from the family child care home~~ defective electrical or gas appliances and electric cords, dangerous or defective heating or cooking equipment, exposed wiring and flammable material stored in such a manner as to create a risk of fire must be ~~corrected or eliminated~~.
- H. All stairways must be free from hazards, and ~~open-sided portions that are located more than thirty (30) inches above the floor or grade below~~ those with more than five (5) steps must be equipped with banisters or handrails within reach of children. The slats on all railings must be no wider than four (4) inches apart or modified to prevent entrapment.
- ~~I.~~ Stairways of more than four (4) steps, ~~in indoor and licensed outdoor areas,~~ that are accessible to children must have gates that prevent access from the area being used when children under two (2) years old are present. The gate may be taken down as long as the ~~family child care home primary provider, applicant 2, equally qualified provider, qualified substitute, or staff member~~ is providing direct supervision of the child who is learning climbing skills on the stairs. ~~Because of the risk of serious physical injury to a child, providers, employees, substitutes, volunteers, and visitors must never lift children over the gates while on a stairway.~~
- ~~J.~~ Because of the risk of serious physical injury to a child, providers, employees, substitutes, volunteers, and visitors must never step over a gate while holding a child or lift a child over a gate.
- ~~K.~~ ~~Drinking water obtained from a source other than a regulated public water system must be tested annually for total coliform, e. Coli bacteria, and nitrate, at a minimum. The results must be in compliance with rule section 11.45 of the "Colorado Primary Drinking Water Regulations" located in 5 CCR 1002-11. Results must be maintained and available for review.~~

The Colorado Primary Drinking Water Regulations (January 14, 2023), are herein incorporated by reference. No later editions or amendments are incorporated. These rules are available at no cost from the Colorado Department of Public Health And Environment, 4300 Cherry Creek Drive South Denver, CO 80246; or at www.sos.state.co.us. These rules are also available for inspection and copying at the Colorado Department of Early Childhood Department, 710 S. Ash Street, Bldg. C, Denver, Colorado 80246, during regular business hours. Drinking and food preparation water from any source other than a regular municipal water supply or commercially bottled water must be tested annually and the results available for review. The water must be in compliance with water quality requirements of the Colorado Department of Public Health and Environment.

- L. The following types of animals and their enclosures must be inaccessible to children in care at all times: psittacine/hooked beak birds, poultry, ferrets, reptiles, amphibians, primates, hermit crabs, and any poisonous animals.
- M.J. Any provider's, employee's, substitute's, volunteer's, and/or visitor's animal(s) and for fish that are dangerous, and/or pose a potential threat to a child's safety or health must be confined in a place away from the child care area and inaccessible to children.
- N. ~~The provider's~~ Any animals in the family child care home must be vaccinated as required by state law and local ordinance, and proof of vaccination must be available for review by the licensing specialist.
- O. Children over thirty-six (36) months of age having direct physical contact with poultry, reptiles, and amphibians must be under the direct supervision of the primary provider, equally qualified provider, applicant 2, or the qualified substitute.
- P. Primary providers, applicant 2, equally qualified providers, and all staff must wash their hands with water and soap after: touching or handling poultry, reptiles, and amphibians; feeding or handling their food; after handling animal feces or supplies (for example, cages, terrariums, aquariums, water bowls, and toys); and after cleaning the animal's habitat.
- Q. Children must wash their hands with water and soap after: touching or handling poultry, reptiles, and amphibians and feeding or handling their food. Children are prohibited from handling animal feces or cleaning the animal's habitat.
- R. When around animals, the primary providers, applicant 2, equally qualified providers, all staff, and children must wash hands after removing dirty clothes or shoes, before eating and drinking, and before preparing food or drinks.
- S. Primary providers, applicant 2, equally qualified providers, and all staff must always supervise handwashing for children.
- T. Primary providers, applicant 2, equally qualified providers, all staff, and children must use hand sanitizer if running water and soap are not available. If only hand sanitizer is used, hands must be washed with soap and water as soon as possible.
- U. Primary providers, applicant 2, equally qualified providers, and all staff must clean and disinfect all indoor surface areas where poultry, reptiles and amphibians have been that are accessible to children.
- V. ~~Tanks, feeders, water containers, and other equipment are prohibited from being cleaned in sinks or areas where food is prepared, served, or eaten.~~
- V. Chickens, reptiles, or amphibians must not be allowed to roam freely through a home or outdoor play area. Primary providers, applicant 2, equally qualified providers, and all staff must always supervise chickens, reptiles or amphibians when outside of their habitat to prevent accidents and contamination.
- K. ~~Psittacine/hooked beak birds must be in a separate room inaccessible to children in care.~~
- W.L. Children must not be permitted to mistreat animals.
- M. ~~All play equipment must be designed to guard against entrapment and strangulation. Swing sets and other outdoor play equipment must be correctly assembled, well maintained, and securely~~

stabilized or anchored. All swings for children three (3) years of age and older must have seats made of flexible material.

~~XN.~~ All adult exercise equipment must be inaccessible to children.

~~Y.~~ Indoor and outdoor equipment, materials, and furnishings must be sturdy, safe, and free of hazards.

2.3367.707.92 INDOOR REQUIREMENTS

A.7.707.921 General Indoor Requirements

1A. There must be open, uncluttered, and safe indoor play space of at least thirty-five (35) square feet of floor space per child, including space for moveable furniture and equipment exclusive of:

a4. Hallways;

b2. Bathrooms;

c3. Stairways;

d4. Closets;

e5. Laundry rooms;

f6. Furnace rooms; and

g7. Space occupied by permanent built-in cabinets and permanent storage shelves.

~~B.~~ ~~The large home must provide sufficient floor space in the specific room(s) designated for use for child care that does not include space used by household furniture.~~

~~C.~~ ~~One room or area in the home, within sight or sound of the provider, that contains a bed, cot or sofa must be available for a child in the event of an illness or injury where a child can be separated from other children and comfortably cared for. A crib or playpen with a pad must be provided for children under twelve (12) months of age. A clean, washable sheet and blanket must be provided for each child, and shall be cleaned and changed after each use by a sick or injured child.~~

2BD. All floors must have an easily cleanable finish including, but not limited to: carpets, tile, wood, or concrete.

3CE. Interior walls must be free of holes and constructed of solid material with a smooth finish that can be easily cleaned. Painted finishes shall be maintained free from peeling, chipping or otherwise deteriorating paint.

4DF. The family child care home must be equipped with adequate light, heat, ventilation, and plumbing for safe and comfortable occupancy. The heating unit facility must be capable of maintaining a draft-free temperature of a minimum of sixty-eight (68) degrees Fahrenheit at floor level in all rooms used for child care.

5EG. All rooms must be kept in a clean and sanitary condition and be free of any evidence of pest or rodent infestation.

7.707.922 ~~BB~~ Indoor Equipment, Materials and Furnishings

- 1A. Toys, toy parts, furnishings, equipment, and any materials accessible to children under three (3) years of age must ~~not be a choke hazard, be large enough that they cannot be swallowed or inhaled, to prevent or able to be inhaled.~~
- 2B. An adequate number of high chairs and other child size suitable equipment that meet ~~s~~ nationally recognized standards ~~Federal Consumer Product Safety Commission standards published by the Consumer Product Safety Commission (CPSC) at 16 CFR § 1112 and 1321 (June 19, 2019), herein incorporated by reference. No later editions or amendments are incorporated. These regulations are available at no cost from the CPSC at <https://www.ecfr.gov>. These regulations are also available for public inspection and copying at the Colorado Department of Early Childhood, 710 S. Ash St., Denver, CO 80246, during regular business hours; must be provided when feeding each child under two (2) years of age.~~
- 3C. Children's use of walkers with wheels is prohibited unless specifically provided for a child's special needs as ordered in the child's health care plan.
- ~~D. Furnishings and equipment in the area approved for child care must be in good repair.~~
- 4E. Furnishings for relaxation and comfort must ~~shall~~ include, but not be limited to:
- a1. Soft play areas, which may include rugs, carpets, mats, and cushions; and
- b2. Clean and soft toys.

C.7.707.923 Indoor Safety

- 1A. All hazardous items and materials must be inaccessible to children including, but not limited to, office supplies, matches, plastic bags, cleaning and laundry materials, ~~medicines,~~ perfumes, curling irons, adult sharp scissors and knives, cosmetics, shaving lotions, hair products, poisonous plants, and all items labeled by manufacturer as "keep out of reach of children."
- 2B. In rooms accessible to children, all electrical outlets and power strips must have protective covers, or safety outlets must be installed; all exposed light bulbs accessible to children in areas where children can play must have protective covers. Electrical cords must be in good condition and must ~~shall~~ not pose ~~a hazard, such as~~ strangulation, falling, or tripping hazards.
- a. Extension cords must not be used in place of permanent wiring and must be used in accordance with the manufacturer's specifications.
- b. Extension cords and space heaters must be plugged directly into a wall outlet.
- c. Space heaters must be plugged directly into a wall outlet.
- 3C. Window blind cords and coverings must be secured out of children's reach or otherwise made safe to prevent strangulation.
- 4D. During child care hours, fans that pose a safety hazard to children (~~such as dangling cords,~~ fans that can be pulled onto the child, and those where the child can stick fingers in the blades) must be inaccessible to children.

- ~~5E.~~ Although Exterior doors ~~may~~ be locked, ~~and they must be maintained so as to permit easy exit~~; interior doors must be designed to prevent children from becoming trapped. ~~No locks or fastening devices can be used that would prevent emergency evacuation. No more than one (1) lock can be used on an exit door during business hours.~~
- ~~F.~~ ~~No locks or fastening devices can be used that would prevent emergency evacuation.~~
- ~~6G.~~ Any level where child care occurs must have at least two (2) means of escape. A basement exit may include a window large enough for the ~~family child care home~~primary provider, applicant 2, equally qualified provider, qualified substitute, staff members, employees, substitute, volunteers, visitors, and children to individually exit.
- ~~7H.~~ For windows used as a second exit ~~where~~ the window sill height is over thirty (-30) inches, there must be permanent access to the window. ~~Permanent access can~~This includes a ladder bolted to the wall or sturdy and easily climbed furniture permanently attached to the wall or steps.
- ~~a.~~ For window wells over forty-four (44) inches, there must be an attached escape ladder designed specifically for the purpose of evacuation of children from the window well to the ground level.
- ~~b.~~ For newly licensed family child care homes licensed after March 1, 2024, the emergency escape opening must be a minimum of 5.7 square feet with a minimum width of twenty (20) inches and a minimum height of twenty-four (24) inches.
- ~~I.~~ ~~Upper levels where child care occurs, without a second exit, must have escape ladders designed specifically for the purpose of evacuation of children.~~
- ~~8J.~~ All unvented gas or electric heating units, ~~unvented gas or electric~~, must be installed and maintained with safety devices to prevent fire, explosions, and other hazards. ~~No o~~pen-flame gas or oil stoves, unscreened fireplaces, hot plates, or and unvented heaters can ~~must not~~ be used.
- ~~9.~~ All heating units must be used and maintained in accordance with the manufacturer's specifications. Space heaters must have a heating element that does not exceed 212 degrees Fahrenheit and be equipped with a tip-over safety switch.
- ~~10K.~~ Any cooking stoves with controls within reach of a child shall have a safety guard.
- ~~11L.~~ Flammable or combustible items must be stored in a locked area remote from the kitchen, and at least three (3) feet from the furnace, hot water heater or any other heating device. These items include, but are not limited to, paints, fuels, insecticides, and other hazardous chemicals.
- ~~12.~~ Furnaces and hot water heaters must be maintained in accordance with the manufacturer specifications and inaccessible to children.
- ~~M.~~ ~~A smoke detector in working condition must be installed on each level of the home.~~
- ~~13N.~~ All family child care homes must have smoke alarms installed in every bedroom licensed for care, in the immediate vicinity outside every of the bedrooms, in every area used as a sleeping room, and at least one on each floor of the house.
- ~~a.~~ Smoke alarms must not be older than the manufacturer directs.

b. For family child care homes licensed after March 1, 2024, smoke alarms must be interconnected so that when one (1) alarm is activated all are activated.

14. There must be a carbon monoxide detector in working condition installed in the area of the family child care home as recommended by the manufacturer and in the hallway outside the licensed bedrooms or area where children sleep.

15. The family child care home must contain at least one (1) fire extinguisher in working condition with the minimum weight of five (5) pounds, and minimum rating of 2A-10-BC as listed on the fire extinguisher label. The fire extinguisher must be easily accessible or the identifying sign where the fire extinguisher is located must be highly visible and easily accessible.

a. Fire extinguishers must be replaced at least every six (6) years.

P. The use of indoor and/or climbing equipment indoors is subject to Section 7.707.932.

2.3377.707.93 OUTDOOR REQUIREMENTS

A7.707.934 General Outdoor Requirements

1A. At least seventy-five (75) square feet of useable outdoor play space must be available for each child in care.

2B. The outdoor play space must be enclosed with at least a forty-two inch (42") fence with slats no more than four (4) inches apart, or a natural barrier. If a natural barrier is used, it must begin no higher than three and one-half inches (3-1/2") from the ground. If the family Child Care home does not have a fenced play space, the provider may apply for an outdoor hardship waiver provisions must be made for outdoor play in an area approved by the State Department.

3C. All parts of the play area must be visible and easily supervised.

4D. Shade must be available.

5E. Decks that are more than twelve (12) inches high must have or be modified to have a protective railing or other barrier with slats no wider than four (4) inches apart.

a. If additionally, for decks installed at ground level with more than a twelve inch (12") gap between flooring and ground, the gap must be inaccessible to children.

6F. Tiered yards that have drop offs of more than twelve inches (12") must have a protective railing or other barrier with slats no wider than four inches (4") apart.

7G. All outdoor areas where children may pass or play must shall be kept free of animal contamination. All animal wastes must be promptly removed and placed in a lidded container or otherwise inaccessible to children.

8H. Window wells accessible to children must have covers that are in good condition and will protect children from falling into the window well. Window well covers must not prevent exiting from a basement window designated as the second exit.

9I. Swimming pools, permanent wading pools, and above ground pools located on the property of the family child care home must be enclosed with a five foot (5') fence and a locked gate.

- aF. With written permission of the parent(s) or guardian(s), children in care ~~may~~shall be permitted to use the permanent pool in the presence of an adult who holds a current Red Cross basic lifeguarding certificate or equivalent, and is actively responsible for lifeguarding protection.
- ~~10J.~~ Water used by children in play areas, including wading pools, must be ~~drained and equipment must be cleaned~~ and ~~disinfected at the end of each day~~not left to stand more than one (1) day.
- ~~11K.~~ All hot tubs must have bolted and securely locked covers. ~~All children in care are prohibited from using hot tubs.~~
- ~~12L.~~ Decorative ponds in the designated play area must ~~have use~~-childproofing grates to prevent risk of drowning when there is no fence.
- ~~13M.~~ The use of ~~any~~ trampoline by children in care is prohibited. If there is a trampoline on the property of the ~~family child care~~ home, it must be stored in a way that makes it ~~totally~~ inaccessible to children.
- ~~14N.~~ Tree houses must be inaccessible to children in care.
- ~~15O.~~ Walkways must be cleared of snow and ice to provide safe entry and exit from the ~~family child care~~ home.
- ~~16.~~ ~~If a sand box designated for play sand box is used it must be covered when not in use.~~
- ~~17.~~ Outdoor space hardship
- ~~a.~~ If an outdoor play space is not directly attached to the ~~facility~~family child care home or accessible via secure access, or the ~~childcare facility~~family child care home cannot meet outdoor space requirements due to a hardship based on the location of the ~~facility~~family child care home, the ~~facility~~family child care home must develop a site-specific plan, which will be submitted to the Department for review and approval, that includes the following:
- ~~1)~~ Identification of an accessible (appropriate for the age group of children served) alternate outdoor space including a description and approximate square footage of the space;
 - ~~2)~~ A diagram outlining how children will safely travel to and from this location;
 - ~~3)~~ A plan for supervision, including any special staffing requirements, to safely access and utilize the alternate outdoor space that includes:
 - ~~a)~~ Attendance tracking upon arrival to the outdoor space and return to the family child care home;
 - ~~b)~~ Children's toileting and diapering needs;
 - ~~c)~~ Children's routine and emergency medical needs including the use of first aid kits and accessibility of emergency contact

information when not on site at the childcare facility family child care home;

d) Plans for alternate activities if the outdoor space is unavailable; and

e) If play equipment or climbing structures are present in the outdoor space, a plan for assessing safety of equipment and supervising age-appropriate play;

4) b. An emergency evacuation plan including the location of a secondary site for reunification with parents in the case of an emergency while at the offsite location and plans for accessing shelter in the case of emergency; and

5) e. A policy that notifies the parent(s) or guardian(s) of the alternate outdoor space.

b. 1) If the outdoor space becomes unusable or the family child care home program cannot maintain what was approved in the plan, the primary provider must submit a new plan to the Department within ten (10) calendar days of a change in the usability of such outdoor space.

c. 2) Family child care homes licensed prior to March 1, 2024, may not reduce or eliminate existing licensed outdoor space to qualify for the outdoor space hardship.

B.7.707.932 Outdoor Equipment, Materials and Surfaces

1A. Resilient Surfacing as defined in rule section 2.304(.77) Requirements: Protective Surfacing Requirements

a. All climbing equipment, sliding equipment, or equipment with attached platforms, eighteen (18) inches or higher must have resilient surfacing of at least six (6) inches in the use zone, see rule section 2.337(B)(3), surrounding the equipment.

b. 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 sand. Solid unitary materials include poured in place surfacing, approved rubber mats, playground tiles, and artificial turf with built in resilient pad.

c. Loose fill resilient surface must be raked regularly to retain its resiliency and to retain a depth of at least six (6) inches.

1) Any newly installed solid unitary materials used for resilient materials must have written documentation from the manufacturer stating the material meets current federal requirements.

4. All pieces of permanently installed climbing equipment must be surrounded by and have at least four inches (4") of a nationally recognized protective surface underneath the equipment.

~~2. By December 31, 2010, all pieces of permanently installed playground equipment must be surrounded by and have at least six inches (6") of a nationally recognized protective surface underneath the equipment.~~

~~B. Sand may be used as a protective surfacing when regularly raked, rototilled or replaced to retain its resiliency.~~

~~C. If during any type of licensing visit the sand has become compacted and lost resiliency or depth, the provider must immediately replace the sand with one of the other approved protective surfacing materials.~~

~~D. Portable climbing equipment over two feet (2') in height, whether indoor or outdoor, must be on a protective surfacing. No equipment can be placed on cement or grass.~~

2. Maximum height of equipment

~~a. The maximum height of toddler climbing equipment, sliding equipment, or equipment with attached platforms cannot exceed thirty-two (32) inches.~~

~~b. The maximum height for preschool and school-age climbing equipment, sliding equipment, or equipment with attached platforms must not exceed six (6) feet in height with six (6) inches of department-approved resilient surfacing as listed in rule section 2.337(B)(1).~~

3. Use zone

~~a. Toddler climbing equipment, sliding equipment, or equipment with attached platforms must have a three (3) foot use zone surrounding the equipment. Toddler slides require a six (6) foot use zone extending out from the base of the slide.~~

~~b. Preschool and school-age climbing equipment, sliding equipment, or equipment with attached platforms must have a six (6) foot use zone surrounding the equipment.~~

~~c. 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.~~

4. Metal equipment must be placed in the shade.

5. All play equipment must be designed to guard against entrapment and strangulation. Swing sets and other outdoor play equipment must be correctly assembled, well maintained, and securely stabilized or anchored.

6. All swings for children three (3) years of age and older must have seats made of flexible material.

~~E. By December 31, 2010, all swing sets or permanent climbing equipment must ensure a minimum fall zone consistent with the nationally recognized standards.~~

C.7.707.933 Outdoor Activities

1A. The family child care home program must include outdoor play for all ages each day except when the severity of weather, including temperature extremes, makes it a health

hazard, or when a child must remain indoors as indicated in writing by a health care provider or in a health care plan.

~~2B.~~ Developmentally appropriate supervision must be provided during outdoor play ~~in the approved, adjoining fenced play area.~~

~~3C.~~ Children playing in an unfenced area or any other outdoor play area ~~outside of the, other than the required,~~ approved fenced play area must be under direct supervision at all times.

~~4D.~~ Children must wear ~~protective equipment~~ ~~helmets, wrist protection, and knee and elbow pads~~ when riding a scooter, bicycle, ~~balance bike,~~ skateboard, or rollerblades.

~~5.~~ Motorized riding toys are not permitted.

~~E.~~ ~~All protective surfacing (excluding sand, wood chips, wood mulch, engineered wood fiber, pea gravel, synthetic pea gravel, and shredded rubber tires) and rubber mats must be manufactured for such use consistent with federal guidelines and be approved by the State Department.~~

~~D.7.707.934~~ Outdoor Safety

~~1A.~~ Children must be directly and actively supervised near standing water including, but not limited to, fountains, buckets, wading pools, and animal troughs.

~~2B.~~ All outdoor play areas shall frequently be surveyed and must be kept safe and free from hazardous materials or debris that could cause harm to children.

~~3C.~~ Outdoor play space, including areas under decks must be free from safety hazards including, but not limited to, lawn mowers, tools, propane, gasoline, building scraps, and scrap metal.

~~4.~~ Gas grills with propane tanks must ~~be inaccessible or~~ have a safety on/off knob ~~on it.~~

~~5.~~ ~~Gates used for emergency evacuation must remain unlocked during child care hours.~~

~~C.7.707.94~~ ~~2.338~~ **TRANSPORTATION**

~~A4A.~~ The driver of a vehicle used to transport children must follow required state laws, including possession of a current valid Colorado driver's license, ~~current~~ automobile insurance, and meet the requirements of Colorado child passenger safety laws ~~at sections 42-4-236 and 42-4-237, C.R.S.~~

~~B2B.~~ At least one (1) adult in the vehicle transporting children must have ~~a current State Department-approved First Aid certificate and Department-approved CPR certificate,~~ and for all ages of children. A ~~First Aid~~ kit must be available in the vehicle.

~~C3C.~~ Any child transported must be properly restrained in a child restraint system that meets the requirements of the Colorado child passenger safety laws ~~in sections at 42-4-236 and 42-4-237, C.R.S.,~~ that requires:

1. Children ~~under the age of one (1) years and weighing less than twenty pounds,~~ must ride ~~the back seat of the vehicle,~~ in a rear-facing child ~~restraint system,~~ ~~according to the manufacturer's instructions, safety seat until they are at least one (1) year old and weigh at least twenty (20) pound~~

2. Children ages one (1) to four (4) years and who weigh twenty (20) to forty (40) pounds must be properly restrained in a rear-facing or forward-facing child restraint system, according to the manufacturer's instructions seat.
3. Children who are under eight (8) years of age and who are being transported, shall be properly restrained in a child restraint system, according to manufacturer's instructions. Children at least four (4) years of age and are less than six (6) years old must continue to ride in a child restraint (unless they are fifty-five inches tall); typically, this is a booster seat; and
4. Children who are at least eight (8) years of age but less than sixteen (16) years of age who are being transported, shall be properly restrained in a safety belt or child restraint system according to manufacturer's instructions. Children between six (6) and sixteen (16) years old or are fifty-five inches (55") tall must be properly restrained in a seat belt.

D4D. When any vehicle is used by the family child care home to transport children in care, the following requirements must be met:

- ~~1.~~ ~~Each child under four years of age and weighs less than forty pounds must be properly fastened into a child restraint system in a seating position equipped with a safety belt or other means to secure the system according to the manufacturer's instructions;~~
- 1a2. Two (2) or more children must never be restrained in one (1) seat belt or child restraint system;
- 2b3. It is the responsibility of the driver transporting children to ensure that such children are provided with, and that they properly use, a child restraint system or safety belt system;
- 3e4. Children who meet the requirements to be restrained in a safety belt must be instructed and monitored to keep the seat belt properly fastened and adjusted ~~Children between six (6) and sixteen (16) years of age or are fifty inches tall or more must be instructed and monitored to keep the seat belt properly fastened and adjusted;~~
- 4d5. Children, who are appropriately placed in a safety belt system according to state law, must be properly secured by the safety belt system. The shoulder belt must never be placed behind the back or under the arm. The lap belt must be secured low and tight across the upper thighs;
- 5f6. Children under thirteen (13) years of age must never be transported in the front seat of a vehicle;
- 6g7. Children must never be left alone in a vehicle;
- 7h8. Children must be loaded and unloaded safely and out of the path of moving vehicles;
- 8i9. The total number of passengers being transported shall never exceed the vehicle manufacturer's specifications;

- ~~9i~~^{9j}10. The provider cannot transport more children than any vehicle can safely accommodate with child restraint systems and seat belts that are properly installed in the vehicle;
- ~~10k~~^{10l}14. The seats of the vehicle must be constructed and installed according to the manufacturer's specifications;
- ~~11l~~^{11m}12. 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 by the Licensing Specialist Department;
- ~~12m~~¹²ⁿ13. The vehicle must be enclosed and have door locks in proper working order;
- ~~13n~~^{13o}14. 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 (section 42-4-236, C.R.S.); and
- ~~14o~~^{14p}15. At a large family child care home, there must be at least one (1) adult supervisor, in addition to the driver, ~~for when~~ nine (9) to twelve (12) children are being transported in using the vehicle.
- ~~E5E~~. The family child care home primary provider must obtain written permission from the parent or guardian for transportation of the child.
- ~~F6F~~. If the family child care home provides transportation to and from care, the family child care home primary provider, applicant 2, equally qualified provider, qualified substitute, or staff member must ~~supervise~~ monitor the child between the vehicle and the child's home or another home authorized by the child's parent(s) or guardian(s) until the child is safely in the care of another adult.
- ~~G7~~. If the family child care home provides transportation to and or from care, children remaining at the family child care home must be supervised by the primary provider, applicant 2, an equally qualified provider, a qualified substitute, or staff member.
- ~~G~~. — Transportation arrangements for school-age children must, be by agreement between the home and the child's parent or guardian (e.g., whether the child can walk, ride a bicycle, or travel in a car). The home must exercise reasonable precaution to see that the children arrive at the home from school when expected and must follow up on their whereabouts if late. Written permission from a parent or guardian for the child to attend community functions after school hours must include agreements regarding transportation.
- ~~H8~~. Agreement must be made annually between the provider and parents or guardians on transportation arrangements for school age children (e.g. walking, riding a bicycle, bus, or traveling in a vehicle) to and from the family child care home. It is the provider's responsibility to ensure the child arrives to the destination at agreed upon time.
- ~~H~~. — If transportation is provided between the home and school for school-age children, the required adult-to-child ratio and supervision must be maintained for children remaining at the home.

...