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|  Utah Department of<br><b>Health &amp; Human Services</b><br>Licensing & Background Checks                                                                                             |                                      | <b>Licensed Family Inspection Checklist</b>                           |  |                                                                                                                         |                                                                                                                                  | This inspection checklist is the tool CCL licensors use to ensure consistency for every inspection.<br>(Revised 05/2025) |  |
|                                                                                                                                                                                                                                                                         |                                      | R430-90 - <a href="#">Division of Licensing and Background Checks</a> |  |                                                                                                                         |                                                                                                                                  |                                                                                                                          |  |
| Facility Name:                                                                                                                                                                                                                                                          |                                      | Facility ID:                                                          |  |                                                                                                                         | Capacity:                                                                                                                        |                                                                                                                          |  |
| License Expiration Date:                                                                                                                                                                                                                                                |                                      | Last Announced Inspection:                                            |  |                                                                                                                         | Last Unannounced Inspection:                                                                                                     |                                                                                                                          |  |
| Please Review The following items prior to the inspection: (Place a check mark if completed and make any necessary notes)                                                                                                                                               |                                      |                                                                       |  | Please review the following items during the inspection: (Place a check mark if completed and make any necessary notes) |                                                                                                                                  |                                                                                                                          |  |
| <input type="checkbox"/>                                                                                                                                                                                                                                                | DWS Eligible                         |                                                                       |  | <input type="checkbox"/>                                                                                                | Sex Offender Registry <i>(Check at the Announced Inspection only. Offer TA at the Unannounced inspection to review Registry)</i> |                                                                                                                          |  |
| <input type="checkbox"/>                                                                                                                                                                                                                                                | DAS Review / Sticky Notes            |                                                                       |  | <input type="checkbox"/>                                                                                                | Training assessed at this inspection?                                                                                            |                                                                                                                          |  |
| <input type="checkbox"/>                                                                                                                                                                                                                                                | Facility Personnel Listed in UCCLAPP |                                                                       |  | <input type="checkbox"/>                                                                                                | Crib Form                                                                                                                        |                                                                                                                          |  |
|                                                                                                                                                                                                                                                                         |                                      |                                                                       |  | <input type="checkbox"/>                                                                                                | Current Variances                                                                                                                |                                                                                                                          |  |
|                                                                                                                                                                                                                                                                         |                                      |                                                                       |  | <input type="checkbox"/>                                                                                                | Grant Verification                                                                                                               |                                                                                                                          |  |
| <b>Inspection Information:</b>                                                                                                                                                                                                                                          |                                      |                                                                       |  |                                                                                                                         |                                                                                                                                  |                                                                                                                          |  |
| - All areas that are inaccessible to children in care must remain inaccessible for this inspection. During the inspection, the licensor will ask to have locked areas unlocked. All accessible areas must be compliant with all applicable rules during the inspection. |                                      |                                                                       |  |                                                                                                                         |                                                                                                                                  |                                                                                                                          |  |
| -The licensor will send you an official inspection report along with the inspection checklist and additional information form (if used), once this inspection has been approved by OL management.                                                                       |                                      |                                                                       |  |                                                                                                                         |                                                                                                                                  |                                                                                                                          |  |
| - If the only non compliances are documentation and/or records, please submit them to Licensing by the correction required date listed. A licensor may conduct a follow-up inspection to verify compliance and ensure compliance maintenance.                           |                                      |                                                                       |  |                                                                                                                         |                                                                                                                                  |                                                                                                                          |  |
| - You may submit feedback on this inspection through your Child Care Licensing Portal or through the <a href="#">DLBC website</a>                                                                                                                                       |                                      |                                                                       |  |                                                                                                                         |                                                                                                                                  |                                                                                                                          |  |
| <b>Signature Information</b>                                                                                                                                                                                                                                            |                                      |                                                                       |  |                                                                                                                         |                                                                                                                                  |                                                                                                                          |  |
| Inspection Type:                                                                                                                                                                                                                                                        |                                      | Date:                                                                 |  | Time Started:                                                                                                           |                                                                                                                                  | Time Ended:                                                                                                              |  |
| Number of Rule Noncompliances:                                                                                                                                                                                                                                          |                                      | Name of Individual Informed of this Inspection:                       |  |                                                                                                                         |                                                                                                                                  |                                                                                                                          |  |
| Licensor(s) Conducting this Inspection:                                                                                                                                                                                                                                 |                                      |                                                                       |  | OL Staff Observing this Inspection:                                                                                     |                                                                                                                                  |                                                                                                                          |  |
| <input type="checkbox"/>                                                                                                                                                                                                                                                | The Licensor reviewed compliance     | Please sign/type name of individual informed of this inspection:      |  | <i>No Signature Required</i>                                                                                            |                                                                                                                                  | Date Signed:                                                                                                             |  |



**Licensed Family Inspection Checklist**

**R430-90 - [Division of Licensing and Background Checks](#)**

This inspection checklist is the tool CCL licensors use to ensure consistency for every inspection.

**Licensors Introductory Items**

☐

Introduction of any unknown CCL staff to the provider

☐

**ASK:** Where do you store **medications**?

☐

Give a brief explanation of the inspection process to the provider

☐

**ASK:** Where are the **first aid supplies** for the facility and field trips?

☐

Wash hands or use hand sanitizer before touching items in the facility

**Cover the following items at the Pre-License Inspection**

☐

If the program transports children, **let the provider know that at some point during the inspection you will need to inspect the vehicles used to transport children.**

☐

Show the provider the **Child Care Licensing Portal**

☐

If children are diapered at the facility, **let the provider know that you will need to observe 1 diaper change.**

☐

Review where to locate the [rules and the Interpretation Manual](#)

☐

**ASK:** the provider if they **want you to tell staff about rule noncompliances** as you conduct the walk- though, or wait until the inspection is over to tell them.

☐

Show the [website](#) and review **Payments, Forms and Documents, and Contact List**

☐

**ASK:** Have any **cribs been replaced** since the last Announced Inspection? If YES: A new crib form must be filled out.

☐

**Please review the Provider's days and hours of operations.**

**General Notes**

|                                                                                                                                                                                                                                                                          |                                                                                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| Ratio and Group Size Verification                                                                                                                                                                                                                                        |                                                                                     |
| The information regarding ratios and group size was verified and electronically recorded for the Office of Child Care during the Licensing Inspection.<br>If you have any questions about the Child Care Quality System, please contact your local Care About Childcare. |                                                                                     |
| Name of Individual Informed of Outcome                                                                                                                                                                                                                                   | Signature of Informed Individual and Date Signed                                    |
|                                                                                                                                                                                                                                                                          |  |

|                                                                                                                                       |                                            |                                               |                                                           |                                                                               |
|---------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|-----------------------------------------------|-----------------------------------------------------------|-------------------------------------------------------------------------------|
| Number of Caregivers ( <i><u>Do not include family members or other adults who do not meet licensing caregiver requirements</u></i> ) | Number of children age 0 through 23 months | Number of children ages 2 through 5 years old | Number of qualifying children ages 6 through 12 years old | Number of provider's and caregiver's own children ages 6 through 12 years old |
|                                                                                                                                       |                                            |                                               |                                                           |                                                                               |

| R430-90 RULES CHECKLIST                                        |                                                                                                                                                                                                                                                                                                                                              |                          |                          |                          |                         |                             |                            |       |
|----------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|-------------------------|-----------------------------|----------------------------|-------|
| Rule #                                                         | C = Compliant<br>NC = Not Compliant<br>NA = Not Assessed During This Inspection                                                                                                                                                                                                                                                              | C                        | NC                       | NA                       | Compliance Required By: | Corrected During Inspection | Technical Assistance Given | Notes |
| Section 4 License Application, Renewal, Changes, and Variances |                                                                                                                                                                                                                                                                                                                                              | C                        | NC                       | NA                       | Date                    | CDI                         | TA                         | Notes |
| 90-4(1)(a)-(f)                                                 | If the local fire authority states in writing that an applicant for a new license or a renewal does not require a <b>fire inspection</b> , OL shall verify the applicant's compliance.                                                                                                                                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                         | <input type="checkbox"/>    | <input type="checkbox"/>   |       |
| 90-4(2)(a)-(g)                                                 | If the local health department states in writing that a <b>kitchen inspection</b> is not required, OL shall verify the applicant's compliance.                                                                                                                                                                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                         | <input type="checkbox"/>    | <input type="checkbox"/>   |       |
| R380-600-7 Licensing General Provisions - Enforcement          |                                                                                                                                                                                                                                                                                                                                              | C                        | NC                       | NA                       | Date                    | CDI                         | TA                         | Notes |
| 600-7(3)(a)-(d)                                                | The provider shall cooperate with the office to monitor rule compliance and rule compliance maintenance anytime the program or facility is serving clients by giving to the office full access to: <b>(a) the building;</b> (b) clients; (c) staff; and (d) any program or facility records.                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                         | <input type="checkbox"/>    | <input type="checkbox"/>   |       |
| Section 6: Administration and Children's Records               |                                                                                                                                                                                                                                                                                                                                              | C                        | NC                       | NA                       | Date                    | CDI                         | TA                         | Notes |
| 90-6(1)                                                        | The <b>provider shall:</b><br>(a) be at least 18 years old;<br>(b) be considered eligible by an OBP background check before becoming involved with child care;<br>(c) complete the new provider training offered by OL; and<br><b>(d) complete at least 20 hours of child care training each year, based on the facility's license date.</b> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                         | <input type="checkbox"/>    | <input type="checkbox"/>   |       |
| 90-6(2)                                                        | The provider shall protect children from conduct that endangers any child in care, or is contrary to the health, welfare, and safety of the public.                                                                                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                         | <input type="checkbox"/>    | <input type="checkbox"/>   |       |

|                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                          |                                     |                          |  |                          |                          |  |
|-----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|--------------------------|--|--------------------------|--------------------------|--|
| 90-6(5)         | The provider shall <b>post their unaltered child care license</b> on the facility premises in a place readily visible and accessible to the public.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-6(6)         | The provider shall post a <b>current copy of OL's Parent Guide</b> at the facility for parent review during business hours or give a current copy to each parent.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-6(7)         | The provider shall inform each parent and OL of <b>any changes to the program's telephone number and other contact information</b> within 48 hours of the change.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-6(8)(a)-(b)  | The provider shall: <b>(a)</b> have <b>liability insurance</b> ; or <b>(b)</b> inform parents in writing that the provider does not have liability insurance.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-6(9)         | The provider shall ensure that a parent <b>completes an admission and health assessment form</b> for their child before the child is admitted into the child care program.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-6(10)(a)-(m) | The provider shall ensure that each child's admission and health assessment form <b>includes: (a)</b> the child's name; <b>(b)</b> the child's date of birth; <b>(c)</b> each parent's name, address, and phone number, including a daytime phone number; <b>(d)</b> the names of individuals authorized by the parent to sign the child out from the facility; <b>(e)</b> the name, address, and phone number of an individual to be contacted if an emergency happens and the provider cannot contact the parent; <b>(f)</b> if available, the name, address, and phone number of an out-of-area emergency contact individual for the child; <b>(g)</b> the parent's permission for emergency transportation and emergency medical treatment; <b>(h)</b> any known allergies of the child; <b>(i)</b> any known food sensitivities of the child; <b>(j)</b> any chronic medical condition that the child may have; <b>(k)</b> any instructions for special or nonroutine daily health care of the child; <b>(l)</b> any current ongoing medication that the child may be taking; and <b>(m)</b> any other special health instructions for the caregiver. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-6(11)(a)-(b) | The provider shall ensure that the <b>admission and health assessment form is: (a) reviewed, updated, and signed or initialed by the parent at least annually; and (b) kept on-site for review by OL.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |

|                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                          |                          |             |                          |                          |              |
|-------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|-------------|--------------------------|--------------------------|--------------|
| 90-6(12)(a)-(d)                                       | Before admitting any child younger than five years old into the program, including the provider's and employees' own child, the provider shall obtain the following documentation from the child's parent: <b>(a) current immunizations; (b)</b> a medical schedule to receive required immunizations; <b>(c)</b> a legal exemption; or <b>(d)</b> a 90-day exemption for any foster child and child who is experiencing homelessness.          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-6(13)                                              | For each child younger than five years old, including the provider's and employees' own children, the provider shall keep the child's current <b>immunization records on-site for review by OL.</b>                                                                                                                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-6(14)                                              | The provider shall submit the <b>annual immunization report</b> to the Utah Statewide Immunization Information System by the date specified by the department. <b>**REMIND the provider to submit this report when it is due.</b>                                                                                                                                                                                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| <b>Section 7: Personnel and Training Requirements</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>C</b>                 | <b>NC</b>                | <b>NA</b>                | <b>Date</b> | <b>CDI</b>               | <b>TA</b>                | <b>Notes</b> |
| 90-7(1)                                               | The <b>provider or the provider designee shall be present</b> at the home when a child is in care                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-7(2)                                               | The provider must ensure that, before being left alone with a child, the <b>provider designee: (a) completes OL's new provider training; and (b) has current first aid and pediatric CPR certifications.</b>                                                                                                                                                                                                                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-7(4)(a)-(c)                                        | The provider shall ensure that a <b>caregiver: (a) completes at least 20 hours of child care training each year;</b> based on the facility's license date, or at least 1-1/2 hours of child care training each month they work if hired partway through the facility's licensing year. <b>(b) completes the 2-1/2 hours of preservice training</b> offered by OL <b>before becoming involved with child care; (c) is at least 16 years old.</b> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-7(5)(a)                                            | The provider shall ensure that any <b>other staff</b> including any driver, cook, and clerk: <b>(a) completes the 2-1/2 hour preservice training</b> offered by OL before becoming involved with child care.                                                                                                                                                                                                                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |

|                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                          |                                     |                          |  |                          |                          |  |
|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|--------------------------|--|--------------------------|--------------------------|--|
| 90-7(6)         | The provider shall ensure that each <b>volunteer</b> is considered eligible by an OBP background check before becoming involved with child care.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-7(7)         | The provider shall submit a background check as required in Section R430-90-8 for <b>each guest</b> who is 12 years old and older and stays in the home for more than two weeks.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-7(11)(a)-(o) | The provider shall ensure that each covered individual required to complete <b>preservice training</b> receives the 2-1/2 hour preservice training offered by OL that <b>includes</b> at least the following topics:<br><b>(a)</b> administration of medication; <b>(b)</b> applicable laws and requirements under Rule R381-70; <b>(c)</b> building and physical premises safety; <b>(d)</b> child and brain development, including the social, emotional, physical, cognitive, and language principles of child growth; <b>(e)</b> children whose special needs may include a disability; <b>(f)</b> emergency preparedness, response, and recovery plan; <b>(g)</b> pediatric first aid and CPR; <b>(h)</b> precautions in transporting children; <b>(i)</b> prevention and control of infectious diseases including immunizations; <b>(j)</b> prevention of and response to emergencies due to food and allergy reactions; <b>(k)</b> prevention of shaken baby syndrome, abusive head trauma, child maltreatment, and coping with crying babies; <b>(l)</b> prevention of sudden infant death syndrome and the use of safe sleep practices; <b>(m)</b> prevention, signs, and symptoms of child abuse and neglect, including child sexual abuse, and legal reporting requirements; <b>(n)</b> recognizing the signs of an individual experiencing homelessness and available assistance; and <b>(o)</b> safe handling and disposal of hazardous materials and bio contaminants. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |

|                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                          |                          |  |                          |                          |  |
|------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--|--------------------------|--------------------------|--|
| 90-7(12)(a)-(o)  | The provider shall ensure <b>that annual child care training</b> includes at least each topic listed in: <b>(a)</b> administration of medication; <b>(b)</b> building and physical premises safety; <b>(c)</b> child and brain development, including the social, emotional, physical, cognitive, and language principles of child growth; <b>(d)</b> children with special needs; <b>(e)</b> emergency preparedness, response, and recovery plan; <b>(f)</b> pediatric first aid and CPR; <b>(g)</b> prevention and control of infectious diseases including immunizations; <b>(h)</b> precautions in transporting children; <b>(i)</b> prevention of and response to emergencies due to food and allergy reactions; <b>(j)</b> prevention of shaken baby syndrome, abusive head trauma, child maltreatment, and coping with crying babies; <b>(k)</b> prevention of sudden infant death syndrome and the use of safe sleeping practices; <b>(l)</b> prevention, signs, and symptoms of child abuse and neglect, including child sexual abuse, and legal reporting requirements; <b>(m)</b> recognizing the signs of an individual experiencing homelessness and available assistance; <b>(n)</b> safe handling and disposal of hazardous materials and bio contaminants; and <b>(o)</b> Sections R430-90-7 through R430-90-24. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-7(13)         | The provider shall ensure that at least <b>half of the required annual training is interactive.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-7(14)(a)-(e)  | The provider shall ensure that <b>documentation of each individual's annual child care training is on-site for review</b> by OL and includes the: <b>(a)</b> date of the training; <b>(b)</b> name of the individual or organization that presented the training; <b>(c)</b> total hours or minutes of the training; <b>(d)</b> training topic; and <b>(e)</b> whether the training was interactive or not.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-7(15) (a)-(c) | The provider shall ensure that <b>at least one covered individual with a current Red Cross, American Heart Association, or equivalent pediatric first aid and CPR</b> certification is present when a child is in care: <b>(a)</b> at each offsite activity; <b>(b)</b> at the facility; and <b>(c)</b> in each vehicle transporting a child.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-7(16)         | The provider shall ensure that <b>CPR certification includes hands-on testing.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-7(17)(a)-(c)  | The provider shall ensure that the <b>following records for each caregiver and volunteer are on-site for review</b> by OL: <b>(a)</b> the date of initial employment or association with the program; <b>(b)</b> a current pediatric first aid and CPR certification, if required in this rule; and <b>(c)</b> a six-week record of the times worked each day.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |



| Section 8: Background Checks |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | C                        | NC                       | NA                       | Date | CDI                      | TA                       | Notes |
|------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|------|--------------------------|--------------------------|-------|
| 90-8(1)(a)-(b)               | Before a <b>new covered individual becomes involved with child care</b> , the provider shall use the licensing provider portal search to verify that the individual is eligible; and <b>(a) associate</b> that individual with the provider's facility; or <b>(b) not associate</b> the individual <b>if the individual is associated with another CCL facility</b> and the new individual will be at the facility for no more than one business day.                                                                                                                                                                                                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-8(2)(a)-(c)               | Before a <b>new covered individual who does not appear in the licensing provider portal search becomes involved with child care</b> in the program, the provider must require the individual to submit an online background check application and fingerprints for any individuals age <b>16 years old and older, except for any individual 12 - 17 years old who is only listed as a household member</b> and; <b>(a) authorize</b> the individual's background check through the licensing provider portal; <b>(b) pay</b> any required fee; and <b>(c) only allow the individual</b> to be involved with child care if they have an eligible OBP background check determination. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-8(3)(c)                   | To keep a covered individual's background check eligibility current, the provider shall require the covered individual to submit a new background check application, fingerprints and any fee if the covered individual has: <b>(c) turned 18 years old</b> and has not previously submitted fingerprints for an OBP background check, except when the 18-year-old has previously submitted fingerprints for an OBP background check, then only a new background check application is required.                                                                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-8(4)(a)-(b)               | Within <b>ten working days</b> from when <b>a child who resides in the facility turns 12 years old</b> , the provider shall ensure that an online background check application is submitted, and: <b>(a)</b> authorize the child's background check through the licensing portal; and <b>(b)</b> pay any required fee.                                                                                                                                                                                                                                                                                                                                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-8(11)                     | If a <b>covered individual is considered not eligible by OBP</b> , including if the individual has been convicted, has pleaded no contest, or is currently subject to a plea in abeyance or diversion agreement for a felony or misdemeanor, <b>the provider shall prohibit that individual from being employed by the child care program or residing at the facility until the reason for the background check finding is resolved.</b>                                                                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |

|                     |                                                                                                                                                                                                                                                                                                                                                                                                                    |                          |                          |                          |      |                          |                          |       |
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| 90-8(13)            | The provider and the covered individual shall notify OBP within 48 hours of becoming <b>aware of a covered individual's arrest warrant, felony or misdemeanor arrest, charge, conviction, or LIS supported finding.</b> Failure to notify OBP within 48 hours may result in disciplinary action, including license revocation.                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| Section 9: Facility |                                                                                                                                                                                                                                                                                                                                                                                                                    | C                        | NC                       | NA                       | Date | CDI                      | TA                       | Notes |
| 90-9(1)             | The provider shall ensure that there is <b>at least 35 square feet of indoor space for each child in care</b> , including the provider's or employee's own child.                                                                                                                                                                                                                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-9(4)             | The provider shall ensure that the <b>number of children in care</b> at any given time <b>does not exceed the capacity</b> identified on the license, except when providing after school child care for up to three additional school-age children. <b>**Total number includes children being transported and on off site activities</b>                                                                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-9(5)(a)-(b)      | (a) The provider shall ensure that any building or play structure on the premises constructed before 1978 that has <b>peeling, flaking, chalking, or failing paint undergoes a test for lead.</b><br>(b) If there is lead-based paint at the facility, the provider shall <b>contact their local health department within five working days</b> and follow required procedures for remediation of the lead hazard. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-9(6)             | The provider shall ensure that <b>each room and indoor area</b> that children use <b>is ventilated</b> by mechanical ventilation, or by windows that open and have screens.                                                                                                                                                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-9(7)             | The provider shall ensure that rooms and areas have <b>adequate light intensity</b> for the safety of the children and the type of activity the provider is conducting.                                                                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-9(8)             | The provider shall maintain the <b>indoor temperature between 65 and 82 degrees</b> Fahrenheit.                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-9(9)(a)-(c)      | The provider shall ensure that there is a <b>working telephone: (a) at the facility; (b) during any offsite activity; and (c) in each vehicle while transporting a child.</b>                                                                                                                                                                                                                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |

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| 90-9(10)        | The provider shall ensure that there is at least <b>one working toilet and one working handwashing sink accessible</b> to each nondiapered child in care.                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-9(11)        | The provider shall ensure that there is a <b>bathroom</b> that provides <b>privacy</b> available for use by any <b>school-age child</b> .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-9(12)(a)-(c) | If there is a <b>swimming pool</b> on the premises that the provider does not empty after each use, the provider shall: <b>(a)</b> maintain the pool in a safe manner; <b>(b)</b> meet applicable state and local laws and ordinances related to the operation of a swimming pool; and <b>(c) when not in use: (i) cover the pool with a commercially made safety enclosure</b> that is installed according to the manufacturer's instructions or <b>(ii) enclose the pool within at least a four-foot-high fence or solid barrier</b> that is kept locked and that separates the pool from any other areas on the premises. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-9(13)(a)-(b) | If there is a <b>hot tub with water in it</b> on the premises, the provider shall make the hot tub inaccessible to children by: <b>(a) keeping the hot tub locked with a properly working cover</b> ; or <b>(b) enclosing the hot tub within at least a four-foot-high fence or solid barrier</b> that is locked and that separates the hot tub from any other areas on the premises.                                                                                                                                                                                                                                        | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-9(14)(a)-(f) | The provider shall <b>maintain any building and outdoor area in good repair and safe condition</b> including any: <b>(a)</b> ceiling, wall, and floor covering; <b>(b)</b> drape, blind, and other window covering; <b>(c)</b> entrance, exit, step, and walkway, including keeping them free of ice, snow, and other hazards; <b>(d)</b> furniture, toy, and material accessible to a child; <b>(e)</b> indoor and outdoor equipment; and <b>(f)</b> lighting, bathroom, and other fixture.                                                                                                                                 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-9(15)        | The provider shall ensure that a <b>protective barrier of at least three feet or higher</b> exists for: <b>(a)</b> any accessible raised deck or balcony that is five feet or higher; and <b>(b)</b> any open stairwell that is five feet or deeper.                                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |

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| 90-9(16)(a)-(e) | If the <b>house is subdivided, any part of the building is rented out, or any area of the facility is shared including the outdoor area</b> , OL <b>may inspect the entire facility</b> and the provider shall ensure that covered individuals in the facility comply with this rule, <b>except when:</b> <b>(a)</b> there are no connecting interior doorways that can be used by an unauthorized individual; <b>(b)</b> there is a separate entrance for the child care program; <b>(c)</b> there is a separate mailing address for the rented area; <b>(d)</b> there is a signed rental or lease agreement for the rented area; and <b>(e)</b> there is no shared access to the outdoor area, unless a qualified caregiver is with the children each time children in care are using the outdoor area.                                                           | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-9(17)        | The provider shall ensure that <b>there is an outdoor area that is safely accessible</b> to any child.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-9(18)        | The provider shall ensure that the <b>outdoor area has at least 40 square feet of space for each child using the area at one time.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-9(19)(a)-(b) | The provider shall ensure that the <b>outdoor area is enclosed within a fence, wall, or solid natural barrier that is at least four feet high</b> if the facility is on a street or within a half mile of a street that: <b>(a)</b> has a speed of 25 miles per hour or higher: or <b>(b)</b> has more than two lanes of traffic.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-9(20)(a)-(e) | The provider shall ensure that the following <b>hazards are separated from the children's outdoor area with a fence, wall, or solid natural barrier that is at least four feet high:</b> <b>(a)</b> a drop-off of more than five feet on or within 50 yards of the property line; <b>(b)</b> a water hazard, including: <b>(i)</b> a creek; <b>(ii)</b> a ditch; <b>(iii)</b> a lake; <b>(iv)</b> a pond; <b>(v)</b> a pool; <b>(vi)</b> a reservoir; <b>(vii)</b> a river; <b>(viii)</b> a swimming pool; or <b>(ix)</b> an animal watering trough, on or within 100 yards of the property line; <b>(c)</b> any barbed wire that is within 30 feet of the children's play area; <b>(d)</b> any dangerous machinery, including farm equipment, on or within 50 yards of the property line; and <b>(e)</b> any livestock on or within 50 yards of the property line. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-9(21)        | The provider shall ensure that there is <b>no gap five by five inches or greater</b> in or under the outdoor area fence or barrier.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-9(22)        | The provider shall ensure that there is <b>shade available</b> to protect any child from excessive sun and heat when children are in the outdoor area.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |

| Section 10: Ratios and Group Size          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | C                        | NC                       | NA                       | Date | CDI                      | TA                       | Notes |
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| 90-10(1)(a)-(b)                            | The provider shall maintain at least: <b>(a) one caregiver for up to eight children</b> in care; and <b>(b) two caregivers for nine to 16 children</b> in care.                                                                                                                                                                                                                                                                                                                                                                                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-10(3)(a)-(c)                            | When <b>caring for children younger than two years old</b> , the provider shall ensure that: <b>(a)</b> there is at least <b>one caregiver for every three children younger than two years old</b> ; <b>(b)</b> each caregiver cares for <b>no more than two children younger than 18 months old</b> ; and <b>(c)</b> there are at least two caregivers if more than three children younger than two years old are present and there are more than six children in care.                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-10(4)                                   | The provider shall <b>not exceed the group sizes</b> as listed in Table 1 <b>Maximum Group Size with One Caregiver</b> , and Table 2 <b>Maximum Group Size with Two Caregivers</b> .                                                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-10(5)                                   | The provider may include <b>caregivers and volunteers who are 16 or 17 years old in the caregiver-to-child ratio</b> .                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-10(6)                                   | The provider shall ensure that <b>guests do not count</b> in caregiver-to-child ratio.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| Section 11: Child Supervision and Security |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | C                        | NC                       | NA                       | Date | CDI                      | TA                       | Notes |
| 90-11(1)(a)-(e)                            | The provider shall ensure that each caregiver provides and maintains <b>active supervision of each child</b> , including: <b>(a)</b> being in the outdoor area when a child younger than five years old is in the outdoor area; <b>(b)</b> being inside the home when a child in care is inside the home; <b>(c)</b> each child receives in-person interaction with a caregiver at least every 15 minutes; <b>(d)</b> focusing attention on the children and not on caregivers' personal interests; and <b>(e)</b> knowing the number of children in their care at any time. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |

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| 90-11(2)(a)-(b) | The provider shall ensure a <b>16 or 17 year old staff or household member may only have unsupervised contact</b> with a child in care, including during offsite activities and transportation, <b>if: (a)</b> the director or the director designee is physically present and available as needed; and <b>(b)</b> the staff or household member is not a volunteer.                                                                                           | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-11(4)        | The provider shall ensure that <b>any guest does not have unsupervised contact with any child in care</b> , including during any offsite activity and transportation.                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-11(5)        | The provider shall ensure that <b>any parent of a child in care does not have unsupervised contact</b> with any child in care, <b>except with their own child</b> .                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-11(6)(a)-(b) | The provider may allow <b>school-age children to go outdoors while caregivers are indoors</b> if: <b>(a)</b> a caregiver can hear the children when children are outdoors; and <b>(b)</b> the children are in an area completely enclosed within a fence, wall, or solid natural barrier that is at least four feet high.                                                                                                                                      | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-11(7)(a)-(b) | The provider shall ensure that a caregiver <b>monitors each sleeping infant</b> by: <b>(a) personally observing</b> each sleeping infant <b>at least once every 15 minutes</b> ; or <b>(b) placing each infant to sleep within the sight and hearing</b> of a caregiver.                                                                                                                                                                                       | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-11(8)(a)-(b) | The provider may allow a <b>child to participate in supervised offsite activities without a caregiver</b> if: <b>(a)</b> the provider has <b>prior written permission</b> from the child's parent for the child's participation; and <b>(b)</b> the <b>provider has clearly assigned the responsibility for the child's whereabouts and supervision to a responsible adult who accepts that responsibility throughout the period of the offsite activity</b> . | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |

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| 90-11(10)(a)-(f)                                  | To <b>maintain security and supervision of children</b> , the provider shall ensure that: <b>(a)</b> any individual signing a child in and out uses an identifier, including a signature, initials, or electronic code; <b>(b)</b> each child is signed in and out in accordance with this section; <b>(c)</b> only a child's parent or an individual with written authorization from the parent may sign-out a child; <b>(d)</b> photo identification is required if the individual signing the child out is unknown to the provider; <b>(e)</b> the sign-in and sign-out records include the date and time each child arrives and leaves; and <b>(f)</b> there is written permission from the child's parent if children sign themselves in or out. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-11(12)                                         | The provider shall ensure that <b>a six-week record of each child's daily attendance, including sign-in and sign-out records</b> , is on-site for review by OL.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| <b>Section 12: Child Guidance and Interaction</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <b>C</b>                 | <b>NC</b>                           | <b>NA</b>                | <b>Date</b> | <b>CDI</b>               | <b>TA</b>                | <b>Notes</b> |
| 90-12(1)                                          | The provider shall ensure that no child is subjected to physical, emotional, or sexual abuse while in care.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-12(2)                                          | The provider shall inform each child, each parent, and anyone who interacts with any child in care of the facility's behavioral expectations and how any misbehavior will be handled.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-12(5)(a)-(f)                                   | The provider shall ensure that <b>each interaction with a child does not include</b> : <b>(a)</b> any action that produces physical pain or discomfort, including hitting, spanking, shaking, biting, or pinching; <b>(b)</b> any form of corporal punishment; <b>(c)</b> any form of emotional mistreatment; <b>(d)</b> confining a child in a closet, locked room, or other enclosure including a box, cupboard, or cage; forcing or withholding food, rest, or toileting; <b>(e)</b> restraining a child's movement by binding, tying, or any other form of restraint that exceeds gentle, passive restraint; or shouting at children.                                                                                                             | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |

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| 90-12(6)                                              | Any individual who witnesses or suspects that a child has been subjected to abuse, neglect, or exploitation shall immediately <b>notify Child Protective Services or law enforcement as required in state law.</b> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| <b>Section 13: Child Safety and Injury Prevention</b> |                                                                                                                                                                                                                    | <b>C</b>                 | <b>NC</b>                | <b>NA</b>                | <b>Date</b> | <b>CDI</b>               | <b>TA</b>                | <b>Notes</b> |
| 90-13(1)                                              | The provider shall ensure that any child and staff use each <b>building, outdoor area, toy, and any equipment safely and as intended by the manufacturer</b> to prevent injury to children.                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-13(3)                                              | The provider shall ensure that any <b>sharp object, edge, corner, or point</b> that could cut or puncture skin is inaccessible to children.                                                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-13(4)                                              | The provider shall ensure that any <b>choking hazard is inaccessible</b> to any child younger than three years old.                                                                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-13(5)                                              | The provider shall ensure that any <b>strangulation hazard</b> , including any rope, cord, chain, and wire attached to a structure and long enough to encircle a child's neck is inaccessible to children.         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-13(6)                                              | The provider shall ensure that any <b>tripping hazard</b> including unsecured flooring, any rug with a curled edge, or cord in a walkway is inaccessible to children.                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-13(7)                                              | The provider shall ensure that any <b>empty plastic bag</b> large enough for a child's head to fit inside, any <b>latex glove, or balloon</b> is inaccessible to any child younger than five years old.            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-13(8)                                              | The provider shall ensure that <b>standing water that measures two inches or deeper and five by five inches or greater in diameter is inaccessible</b> to children.                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |



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| 90-13(9)(a)-(d)  | The provider shall ensure that any <b>toxic or hazardous chemical</b> , including any cleaner, insecticide, lawn product, and flammable, corrosive, and reactive material is: <b>(a)</b> disposed of properly; <b>(b)</b> inaccessible to any child; <b>(c)</b> stored in a container labeled with the contents of the container; and <b>(d)</b> used according to manufacturer instructions. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-13(10)(a)-(d) | The provider shall ensure that the <b>following items are inaccessible</b> to children: <b>(a) cigarette lighters; (b) hot wax</b> or other hot substances; <b>(c) matches; (d) open flames</b> ; and <b>(e)</b> when in use, <b>portable space heaters, wood burning stoves, and fireplaces</b> .                                                                                            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-13(11)(a)-(b) | The provider shall ensure that the <b>following items are inaccessible</b> to a child: <b>(a) any live electrical wire</b> ; and <b>(b)</b> for a child younger than five years old, <b>any electrical outlet and surge protector without a protective cap or safety device when not in use</b> .                                                                                             | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-13(12)(a)-(b) | Unless used and stored as allowed by any state or federal law, the provider shall ensure that any <b>firearm, including a gun, muzzleloader, rifle, shotgun, handgun, pistol, and automatic gun</b> , is: <b>(a) locked</b> in a cabinet or area using a key, combination lock, or fingerprint lock; and <b>(b) stored unloaded and separate from ammunition</b> .                            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-13(13)        | The provider shall ensure that <b>any weapon, including a paintball gun, BB gun, airsoft gun, sling shot, arrow, and mace</b> , is inaccessible to children.                                                                                                                                                                                                                                  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-13(14)        | The provider shall ensure that any <b>alcohol, illegal substance, or sexually explicit material is inaccessible</b> and not used on the premises, during any offsite activity, or in any facility vehicle any time a child is in care.                                                                                                                                                        | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-13(15)        | The provider shall ensure that an <b>outdoor source of drinking water</b> , including individually labeled water bottles, a pitcher of water and individual cups, or a working water fountain is available to each child <b>when the outside temperature is 75 degrees Fahrenheit or higher</b> .                                                                                             | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-13(16)        | The provider shall ensure that each area accessible to a child is <b>free of any heavy or unstable object</b> that a child could pull down on themselves, including any furniture, unsecured television, and standing ladder.                                                                                                                                                                 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |

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| 90-13(17)                                                        | The provider shall ensure that <b>hot water accessible</b> to a child <b>does not exceed 120 degrees Fahrenheit</b> .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-13(18)                                                        | The provider shall ensure that <b>highchairs</b> that are used by children <b>have T-shaped safety straps or safety devices</b> that are used when a child is in the chair.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-13(19)                                                        | The provider shall ensure that <b>infant walkers with wheels</b> are inaccessible to children.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-13(20)(a)-(d)                                                 | The provider shall ensure that any <b>tobacco, e-cigarette, e-juice, e-liquid, or similar product is inaccessible</b> and, in compliance with Title 26, Chapter 38, Utah Indoor Clean Air Act, is not used: <b>(a) in a facility or any other building</b> when a child is in care; <b>(b) in any vehicle</b> that is being used to transport a child in care; <b>(c) in any outdoor area</b> or within 25 feet of any outdoor area occupied by a child in care; <b>(d) within 25 feet of any entrance to a facility</b> or other building occupied by a child in care.                                                                                                                                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| <b>Section 14: Emergency Preparedness Response, and Recovery</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>C</b>                 | <b>NC</b>                | <b>NA</b>                | <b>Date</b> | <b>CDI</b>               | <b>TA</b>                | <b>Notes</b> |
| 90-14(1)(a)-(d)                                                  | The provider shall develop and follow a <b>written emergency preparedness, response, and recovery plan</b> that: <b>(a)</b> includes a procedure for: <b>(i)</b> accommodating a child with a disability; <b>(ii)</b> accommodating a child with a chronic medical condition; <b>(iii)</b> accommodating any infant and toddler; <b>(iv)</b> communication with and reunification of families; <b>(v)</b> continuity of operations; <b>(vi)</b> evacuation; <b>(vii)</b> lockdown; <b>(viii)</b> relocation; and shelter in place. <b>(b)</b> includes instructions to follow if there is an allergy, serious reaction to food, or any other trigger that may affect a child's health; and <b>(c)</b> is followed if an emergency happens, unless otherwise instructed by emergency personnel. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-14(2)                                                         | The provider shall <b>post the facility's street address and any emergency numbers</b> , including at least fire, police, and poison control, near each telephone or in an area clearly visible to anyone needing the information.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-14(3)                                                         | The provider shall keep <b>first aid supplies in the facility</b> , including at least antiseptic, bandages, and tweezers.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |

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| 90-14(4)         | The provider shall <b>conduct a fire evacuation drill at least quarterly</b> and ensure each drill includes a complete exit of each child, staff member, and volunteer from the building.                                                                                                                                                                                                                                                                | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-14(5)(a)-(e)  | The provider shall <b>document each fire drill</b> , including: <b>(a)</b> any problems encountered and remediation; <b>(b)</b> the date and time of the drill; <b>(c)</b> the name of the individual supervising the drill; <b>(d)</b> the number of children participating; and <b>(e)</b> the total time to complete the evacuation.                                                                                                                  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-14(6)         | The provider shall <b>conduct a drill for disasters</b> , other than fires, at least once every six months.                                                                                                                                                                                                                                                                                                                                              | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-14(7)(a)-(e)  | The provider shall <b>document each disaster drill</b> , including: <b>(a)</b> any problems encountered and remediation; <b>(b)</b> the date and time of the drill; <b>(c)</b> the name of the individual supervising the drill; <b>(d)</b> the number of children participating; and <b>(e)</b> the type of disaster, including earthquake, flood, prolonged power or water outage, or tornado;                                                         | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-14(8)         | The provider shall <b>vary the days and times when fire and other disaster drills are held</b> .                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-14(9)         | The provider shall keep <b>documentation of the previous 12 months of fire and disaster drills on-site for review</b> by OL.                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-14(10)(a)-(c) | The provider shall: <b>(a)</b> give each parent a <b>written report on the day of occurrence of each incident, accident, or injury</b> involving their child; <b>(b)</b> ensure the report has the signatures of the caregivers involved, the provider, and the individual picking up the child; and <b>(c)</b> if a school-age child signs themselves out of the facility, send a copy of the report to the parent on the day following the occurrence. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |

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| 90-14(13)(a)-(b)                                | If a <b>child is injured while in care and receives medical attention, or for a child fatality</b> , the provider shall: <b>(a)</b> submit a completed accident report form to OL within the next business day of the incident; or <b>(b)</b> contact OL within the next business day and submit a completed accident report form within five business days of the incident.                                                                                                                                                                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-14(14)                                       | The provider shall <b>keep a six-week record of each incident, accident, and injury report on-site</b> for review by OL.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-14(15)                                       | If the <b>provider must leave the children due to an emergency</b> and a background checked covered individual who is at least 18 years old or older is not available to stay with the children, the provider may leave the children in the care of an emergency substitute who: <b>(a)</b> is at least 18 years old; <b>(b)</b> substitutes the caregiver for the minimum time possible and for less than one business day; and <b>(c)</b> signs a written background statement before being left alone with the children.                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-14(17)                                       | <b>Within five working days after the occurrence</b> , the provider shall <b>submit emergency substitute's written background statements to OBP for review.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| <b>Section 15: Health and Infection Control</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <b>C</b>                 | <b>NC</b>                | <b>NA</b>                | <b>Date</b> | <b>CDI</b>               | <b>TA</b>                | <b>Notes</b> |
| 90-15(1)(a)-(f)                                 | The provider shall <b>maintain the building, furnishings, equipment, and outdoor area</b> including keeping: <b>(a)</b> any frequently touched surface, including each doorknob and light switch, clean and sanitized; <b>(b)</b> each area and any equipment used for the storage, preparation, and service of food clean and sanitized; <b>(c)</b> each surface free of rotting food or a build-up of food; <b>(d)</b> each wall and floor clean and free of spills, dirt, and grime; <b>(e)</b> the building and grounds free of a build-up of litter and garbage; and <b>(f)</b> the building and grounds free of animal feces. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-15(2)                                        | The provider shall take safe and effective measures to <b>prevent and eliminate the presence of insects, rodents, and other pests.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |

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| 90-15(3)(a)-(c)  | The provider shall <b>clean and sanitize any toys and materials used by children:</b> <b>(a)</b> at least once a week or more often if needed; <b>(b)</b> after being put in a child's mouth and before another child plays with the toy; and <b>(c)</b> after being contaminated by a body fluid.                                                                                                                                                                                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-15(4)         | The provider shall ensure that <b>any fabric toy and item</b> including any stuffed animal, cloth doll, pillow cover, and dress-up clothing is machine washable and if used, washed at least each week or as needed.                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-15(5)         | The provider shall clean and <b>sanitize each highchair tray</b> before each use.                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-15(6)         | The provider shall clean and <b>sanitize each water play table or tub</b> daily, if used by the children.                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-15(7)         | The provider shall <b>clean and sanitize each bathroom surface</b> including each toilet, sink, faucet, toilet and sink handle, and counter each business day.                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-15(8)         | The provider shall <b>clean and sanitize each potty chair</b> after each use.                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-15(9)         | The provider shall ensure that <b>toilet paper</b> is accessible and kept in a dispenser.                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-15(10)(a)-(g) | The provider shall ensure that <b>each staff member and volunteer washes their hands thoroughly with liquid soap and running water:</b> <b>(a)</b> after cleaning up or taking out garbage <b>(b)</b> after contact with a body fluid; <b>(c)</b> after using the toilet or helping a child use the toilet; <b>(d)</b> before and after eating meals and snacks or feeding a child; <b>(e)</b> before handling or preparing food or bottles; <b>(f)</b> upon arrival; and <b>(g)</b> when coming in from outdoors. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-15(12)(a)-(f) | The provider shall ensure that <b>each child washes their hands thoroughly with liquid soap and running water:</b> <b>(a)</b> after contact with a body fluid; <b>(b)</b> after using the toilet; <b>(c)</b> before and after eating meals and snacks; <b>(d)</b> before using a water play table or tub; <b>(e)</b> upon arrival; and <b>(f)</b> when coming in from outdoors.                                                                                                                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |

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| 90-15(13)                             | The provider shall ensure that <b>only single-use towels, an electric hand dryer, or individually labeled cloth towels are used to dry hands.</b>                                                                                                                                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-15(14)(a)-(b)                      | The provider shall ensure that <b>if cloth towels are used</b> , cloth towels are: <b>(a)</b> not shared; and <b>(b)</b> washed daily.                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-15(15)                             | The provider shall ensure that any <b>personal hygiene items</b> , including a toothbrush, comb, and hair accessory, <b>are not shared and are stored so they do not touch each other or they are sanitized between each use.</b>                                                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-15(16)(a)-(b)                      | The provider shall ensure that <b>any pacifier, bottle, and nondisposable drinking cup</b> is: <b>(a)</b> labeled with each child's name or individually identified; and <b>(b)</b> not shared, or washed and sanitized before being used by another child.                                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-15(17)                             | The provider shall ensure the <b>prompt change of a child's clothing if the child has a toileting accident.</b>                                                                                                                                                                                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-15(18)(a)-(c)                      | The provider shall ensure that a <b>child's clothing that is wet or soiled from a body fluid</b> is: <b>(a)</b> not rinsed or washed at the center; <b>(b)</b> placed in a leakproof container that is labeled with the child's name; and <b>(c)</b> returned to the parent or thrown away with parental consent. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| <b>Section 16: Food and Nutrition</b> |                                                                                                                                                                                                                                                                                                                   | <b>C</b>                 | <b>NC</b>                | <b>NA</b>                | <b>Date</b> | <b>CDI</b>               | <b>TA</b>                | <b>Notes</b> |
| 90-16(1)                              | The provider shall ensure that each child two years old and older is offered a <b>meal or snack at least once every three hours.</b>                                                                                                                                                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |

|                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                  |                          |                          |      |                          |                          |       |
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| 90-16(2)(a)-(e)         | If the <b>provider supplies food for children's meals or snacks</b> , the provider shall ensure that: <b>(a)</b> the meal service meets local health department food service rules; <b>(b)</b> the foods that are served meet the nutritional requirements of the USDA Child and Adult Care Food Program (CACFP) whether or not the provider participates in the CACFP; <b>(c)</b> the provider uses the CACFP meal pattern requirements, the standard OL-approved menus, or menus approved by a registered dietitian, and that dietitian approval is noted and dated on the menus, and current within the past five years; <b>(d) the current week's menu is posted for review by parents and OL</b> ; and (e) if not participating or in good standing with the CACFP, keep a six-week record of foods served at each meal and snack. | <input type="checkbox"/>                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-16(3)(a)-(b)         | The provider shall ensure that <b>the individual who serves food to a child</b> : <b>(a)</b> is aware of each child in their assigned group who has any food allergy or sensitivity; and <b>(b)</b> ensures that a child is not served the food that the child is allergic or sensitive to.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/>                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-16(4)                | The provider <b>may not place a child's food on a bare table</b> , and shall serve a child's food on a dish, napkin, or sanitary highchair tray, except an individual finger food, including a cracker, that may be placed directly in a child's hand.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/>                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-16(5)(a)-(c)         | If a <b>parent brings food and drink for their child's use</b> , the provider shall ensure that the food and drink is: <b>(a)</b> consumed only by that child; <b>(b)</b> labeled with the child's name; and <b>(c)</b> refrigerated if needed.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/>                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| Section 17: Medications |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/> Check here if there are NO Medications on the premises and the provider does not administer medications |                          |                          |      |                          |                          |       |
|                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | C                                                                                                                                | NC                       | NA                       | Date | CDI                      | TA                       | Notes |
| 90-17(1)                | The provider shall make <b>medications inaccessible to children in care</b> .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/>                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-17(2)                | The provider shall <b>lock any refrigerated medication or store it at least 36 inches above the floor and, if liquid, store it in a separate leakproof container</b> .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/>                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |

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| 90-17(3)(a)-(d) | If a <b>parent supplies any over-the-counter or prescription medication</b> , the provider shall ensure that medication: <b>(a)</b> is labeled with the child's full name; <b>(b)</b> is stored in the original or pharmacy container; and <b>(c)</b> has the original label.                                                                                                                                                               | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-17(4)        | The provider shall <b>obtain a written medication permission form</b> completed and signed by the parent <b>before administering any medication supplied by the parent</b> for their child.                                                                                                                                                                                                                                                 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-17(5)(a)-(d) | The provider shall ensure that the <b>medication permission form includes</b> at least: <b>(a)</b> a parent signature and the date signed; <b>(b)</b> any written instructions for administration; <b>(c)</b> the name of the child; and <b>(d)</b> the name of the medication.                                                                                                                                                             | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-17(6)(a)-(d) | The provider shall ensure that <b>instructions for administering the medication include</b> at least: <b>(a)</b> how the medication will be given; <b>(b)</b> the disease or condition being treated; and <b>(c)</b> the dosage; and <b>(d)</b> the times and dates to administer the medication.                                                                                                                                           | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-17(7)(a)-(b) | If the <b>provider supplies an over-the-counter medication for a child's use</b> , the provider shall <b>ensure that no staff administer the medication to any child without previous parental consent for each instance it is given</b> . The provider shall ensure that the consent is: <b>(a)</b> written; or <b>(b)</b> verbal, if the date and time of the consent is documented and signed by the parent upon picking up their child. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-17(8)(a)-(d) | The provider shall ensure that the <b>staff administering the medication: (a)</b> checks the medication label to confirm the child's name if the parent supplied the medication; <b>(b)</b> checks the medication label or the package to ensure that a child is not given a dosage larger than that recommended by the health care professional or manufacturer; <b>(c)</b> washes their hands; and <b>(d)</b> administers the medication. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-17(9)(a)-(c) | The provider shall ensure that immediately after administering a medication, <b>the staff giving the medication records: (a)</b> any error in administering the medication or adverse reactions; <b>(b)</b> the date, time, and dosage of the medication given; and <b>(c)</b> their signature or initials.                                                                                                                                 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |



|                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                          |                          |             |                          |                          |              |
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| 90-17(10)                     | The provider shall <b>report to the parent a child's adverse reaction to a medication or error in administration of the medication immediately</b> upon recognizing the reaction or error, or after notifying emergency personnel if the reaction is life-threatening                                                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-17(11)                     | The provider shall notify the parent before the scheduled medication dosage to a child <b>if the provider chooses not to administer medication as instructed by the parent.</b>                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-17(12)                     | The provider shall keep a <b>six-week record of medication permission and administration forms</b> on-site for review by OL.                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| <b>Section 18: Activities</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>C</b>                 | <b>NC</b>                | <b>NA</b>                | <b>Date</b> | <b>CDI</b>               | <b>TA</b>                | <b>Notes</b> |
| 90-18(1)                      | The provider shall offer <b>daily activities that support each child's healthy physical, social, emotional, cognitive, and language development.</b>                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-18(2)                      | The provider shall ensure that <b>daily activities include outdoor play</b> as weather and air quality allow.                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-18(3)                      | The provider shall ensure that <b>physical development activities include light, moderate, and vigorous physical activity for a daily total of at least 15 minutes for every two hours that children spend in the program.</b>                                                                                                                                                                                                                                                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-18(4)(a)-(b)               | For each <b>child two years and older</b> , the provider shall <b>post a daily schedule that includes: (a) activities that support children's healthy development; and (b) the times activities occur</b> including at least meal, snack, nap or rest, and outdoor play times.                                                                                                                                                                                                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-18(5)                      | The provider shall ensure that <b>any toy, material, and equipment needed to support a child's healthy development</b> is available to each child.                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-18(6)(a)-(c)               | Except for occasional special events, the provider shall ensure that <b>each child's primary screen time activity on media</b> , including any television, cell phone, tablet, and computer, is: <b>(a)</b> not allowed for a child zero to 17 months old; <b>(b)</b> limited for a child 18 months to four years old to one hour a day, or five hours a week with a maximum screen time of two hours per activity; and <b>(c)</b> planned to address the needs of a child five to 12 years old. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |

|                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                   |                                     |                          |      |                          |                          |       |
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| 90-18(7)(a)-(f)            | If the <b>provider offers swimming activities, or if a wading pool is used</b> , the provider shall ensure that: <b>(a) a caregiver stays at the pool</b> supervising when a child is in the pool or has access to the pool, and when an accessible pool has water in it; <b>(b) any diapered child wears a swim diaper</b> when the child is in the pool; <b>(c) each lifeguard and pool personnel does not count toward the caregiver-to-child ratio</b> ; <b>(d) each wading pool is emptied and sanitized after use</b> by each group of children; <b>(e) if the pool is deeper than four feet, there is a lifeguard on duty who is certified by the Red Cross or another approved certification program</b> any time a child has access to the pool; and <b>(f) the parent gives permission before</b> their child uses the pool. | <input type="checkbox"/>                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-18(8)(a)-(e)            | If the <b>provider offers offsite activities</b> , the provider shall ensure that: <b>(a)</b> a child's name is not used on a nametag, t-shirt, or in any other visible way; <b>(b)</b> first aid supplies, including at least antiseptic, bandages, and tweezers are available; <b>(c)</b> the child's parent gives written consent before each activity; <b>(d)</b> the required caregiver-to-child ratio and supervision are maintained during the entire activity; and <b>(e)</b> there is a way for each child and caregiver to wash their hands with soap and water, or, if there is no source of running water, with a wet wipe or hand sanitizer.                                                                                                                                                                              | <input type="checkbox"/>                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-18(9)(a)-(e)            | The provider shall ensure that a caregiver with the children <b>takes the emergency information and releases for each child in the group on each offsite activity, and that the information includes at least:</b> <b>(a)</b> the child's name; <b>(b)</b> the parent's name and phone number; <b>(c)</b> the name and phone number of a person to notify if there is an emergency and the parent cannot be contacted; <b>(d)</b> the name of any person authorized by the parent to pick up the child; and <b>(e)</b> current emergency medical treatment and emergency medical transportation releases.                                                                                                                                                                                                                              | <input type="checkbox"/>                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| Section 19: Play Equipment |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input type="checkbox"/> Check here if there is no play equipment |                                     |                          |      |                          |                          |       |
|                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | C                                                                 | NC                                  | NA                       | Date | CDI                      | TA                       | Notes |
| 90-19(1)                   | The provider shall ensure that children using <b>play equipment use it safely and as intended by the manufacturer.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/>                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-19(2)                   | The provider shall ensure that, when in use, <b>stationary play equipment is not placed on a hard surface including concrete, asphalt, dirt, or the bare floor.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/>                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |

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| 90-19(3)(a)-(c) | Except for trampolines, the provider shall ensure that <b>stationary play equipment with a designated play surface that is 18 inches high or higher: (a)</b> has a surrounding three-foot use zone, free of hard objects or surfaces, that extends from the outermost edge of the equipment; <b>(b)</b> has cushioning that covers the entire required use zone; and <b>(c)</b> is stable or securely anchored. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-19(4)(a)-(c) | OL may consider <b>a trampoline on the premises is inaccessible to children in care if the trampoline: (a)</b> is enclosed behind a locked fence or safety net that is at least three feet high; <b>(b)</b> has no jumping mat; or <b>(c)</b> is placed upside down.                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-19(5)        | The provider shall ensure that <b>each accessible trampoline without a safety net enclosure has at least a six-foot use zone</b> that is measured from the outermost edge of the trampoline frame, and <b>that is free from any structure or object</b> including play equipment, trees, and fences.                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-19(6)        | The provider shall ensure that <b>each accessible trampoline with a properly installed, used as specified by the manufacturer, and in good repair safety net enclosure has at least a three-foot use zone</b> that is measured from the outermost edge of the trampoline frame, and that is <b>free from any structure or object</b> including play equipment, trees, and fences.                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-19(7)(a)-(c) | The provider shall ensure <b>that each accessible trampoline</b> with or without a safety net enclosure is placed over <b>(a) grass; (b) six-inch deep cushioning; or (c) other commercial cushioning.</b>                                                                                                                                                                                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-19(8)        | The provider shall ensure that <b>cushioning for each accessible trampoline covers the entire required use zone.</b>                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-19(9)(a)-(b) | The provider shall ensure that <b>each accessible trampoline has: (a) no ladders or other objects within the use zone</b> a child could use to climb on the trampoline; and <b>(b) shock absorbing pads</b> that completely cover the trampoline springs, hooks , and frame.                                                                                                                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-19(10)       | The provider must obtain <b>written permission from a child's parent or legal guardian before that child uses the trampoline.</b>                                                                                                                                                                                                                                                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |

|                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                 |                          |                          |             |                          |                          |              |
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| 90-19(11)(a)-(e)                  | The provider shall ensure that if a <b>child uses an accessible trampoline: (a) a caregiver</b> is at the trampoline <b>supervising; (b) only one person at a time</b> uses the trampoline; <b>(c) no</b> child in care is allowed to do <b>somersaults or flips</b> on the trampoline; <b>(d) no one is permittred under the trampoline</b> while the trampoline is in use; and <b>(e) only school-age children</b> in care are allowed to use a trampoline. | <input type="checkbox"/>                                                        | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-19(12)                         | The provider shall ensure that there are no <b>entrapment hazards</b> on or within the use zone of any piece of stationary play equipment.                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/>                                                        | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-19(13)                         | The provider shall ensure that there is no <b>strangulation hazard</b> on or within the use zone of any piece of stationary play equipment.                                                                                                                                                                                                                                                                                                                   | <input type="checkbox"/>                                                        | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-19(14)                         | The provider shall ensure that there are no <b>crush, shearing, or sharp edge hazard</b> on or within the use zone of any piece of stationary play equipment.                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/>                                                        | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-19(15)                         | The provider shall ensure there is no <b>tripping hazard</b> including any concrete footing, tree stump, tree root, or rock within the use zone of any piece of stationary play equipment.                                                                                                                                                                                                                                                                    | <input type="checkbox"/>                                                        | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| <b>Section 20: Transportation</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Check here if the provider does not transport children |                          |                          |             |                          |                          |              |
|                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>C</b>                                                                        | <b>NC</b>                | <b>NA</b>                | <b>Date</b> | <b>CDI</b>               | <b>TA</b>                | <b>Notes</b> |
| 90-20(1)(a)-(b)                   | For <b>each child that the provider transports, the provider shall obtain a transportation permission form that is: (a)</b> signed by a parent; and <b>(b)</b> on-site for review by OL.                                                                                                                                                                                                                                                                      | <input type="checkbox"/>                                                        | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-20(2)(a)-(e)                   | The provider shall ensure that <b>each vehicle used for transporting children: (a) is enclosed with a roof</b> or top; <b>(b) is equipped with safety restraints; (c) has a current vehicle registration; (d) is maintained in a safe and clean condition; and (e) contains first aid supplies</b> , including at least antiseptic, bandages, and tweezers.                                                                                                   | <input type="checkbox"/>                                                        | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-20(3)(a)-(c)                   | The provider shall ensure that the <b>safety restraints in each vehicle that transports children</b> are: <b>(a)</b> appropriate for the age and size of each child who is transported, as required by law; <b>(b)</b> properly installed; and <b>(c)</b> in safe condition and working order.                                                                                                                                                                | <input type="checkbox"/>                                                        | <input type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |

|                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                          |                                                    |                          |      |                          |                          |       |  |
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| 90-20(4)(a)-(g)     | The provider shall ensure that <b>the driver of each vehicle who is transporting children:</b> (a) is at least <b>18 years old</b> ; (b) has and carries with them <b>a current, valid driver's license for the type of vehicle being driven</b> ; (c) ensures that <b>each child being transported is in an individual safety restraint</b> as required by law; (d) ensures that the <b>inside vehicle temperature is between 60 and 85 degrees Fahrenheit</b> ; (e) ensures that <b>each child stay seated while the vehicle is moving</b> ; (f) ensures that <b>the vehicle is locked during transport</b> ; (g) <b>never leaves a child in the vehicle unattended by an adult</b> ; and (h) <b>never leaves the keys in the ignition when not in the driver's seat</b> . | <input type="checkbox"/> | <input type="checkbox"/>                           | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |  |
| 90-20(5)(a)-(d)     | If the <b>provider walks or uses public transportation to transport a child to or from a facility</b> , the provider shall ensure that: (a) each child being transported has a completed transportation permission form signed by their parent; (b) a caregiver goes with and actively supervises each child; (c) a caregiver transporting a child has emergency contact information outlined in Subsection R430-90-18(9) and a release for each child being transported; and (d) the caregiver-to-child ratio is maintained.                                                                                                                                                                                                                                                | <input type="checkbox"/> | <input type="checkbox"/>                           | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |  |
| 90-20(6)            | The provider shall: (a) <b>have transport liability insurance</b> ; or (b) <b>inform parents in writing that the provider does not have transport liability insurance</b> .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> | <input type="checkbox"/>                           | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |  |
| Section 21: Animals |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <input type="checkbox"/> | Check here if there are no animals on the premises |                          |      |                          |                          |       |  |
|                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | C                        | NC                                                 | NA                       | Date | CDI                      | TA                       | Notes |  |
| 90-21(1)            | The provider shall <b>inform parents of the kinds of animals allowed</b> at the facility.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> | <input type="checkbox"/>                           | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |  |
| 90-21(2)(a)-(c)     | The provider shall ensure that there is <b>no animal on the premises</b> that: (a) has a <b>history of biting</b> even one individual; (b) has a <b>history of dangerous, attacking, or aggressive</b> behavior; or (c) is <b>naturally aggressive</b> .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/>                           | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |  |
| 90-21(3)            | The provider shall ensure that <b>any animal at the facility is clean and free of any obvious disease or health problem</b> that could adversely affect a child.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/>                           | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |  |
| 90-21(4)            | The provider shall ensure that there is <b>no animal or animal equipment in food preparation or eating areas</b> .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> | <input type="checkbox"/>                           | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |  |

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| 90-21(5)                          | The provider shall ensure that <b>no child younger than five years old assists with the cleaning of any animal or animal cage, pen, or equipment.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-21(6)                          | If a <b>school-age child helps</b> in the cleaning of animals or animal equipment, the provider shall <b>ensure that the child washes their hands immediately after cleaning the animal or equipment.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-21(7)                          | The provider shall ensure that <b>each child and staff wash their hands immediately after playing with or touching any reptile or amphibian.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-21(8)                          | The provider shall ensure that <b>any dog, cat, or ferret that the facility houses have current rabies vaccinations.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-21(9)                          | The provider shall keep current <b>animal vaccination records on-site for review</b> by OL.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| <b>Section 22: Rest and Sleep</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>C</b>                 | <b>NC</b>                           | <b>NA</b>                | <b>Date</b> | <b>CDI</b>               | <b>TA</b>                | <b>Notes</b> |
| 90-22(1)                          | The provider shall offer children in care a <b>daily opportunity for rest or sleep</b> in an environment with: <b>(a)</b> a low noise level; <b>(b)</b> freedom from distractions; and <b>(c)</b> subdued lighting                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-22(2)(a)-(e)                   | The provider shall <b>ensure that each crib:</b> <b>(a)</b> does not have strings, cords, ropes, or other entanglement hazards on the crib or within reach of the child; <b>(b)</b> has a tight-fitting mattress; <b>(c)</b> has at least 20 inches from the top of the mattress to the top of the crib rail, or at least 12 inches from the top of the mattress to the top of the crib rail if the child using the crib cannot sit up without assistance; <b>(d)</b> has documentation from the manufacturer or retailer stating that the crib was built after June 28, 2011, or that the crib is certified if the crib was manufactured before that date; and <b>(e)</b> has slats spaced no more than 2-3/8 inches apart. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-22(3)                          | The provider shall ensure that <b>sleeping equipment does not block any exits.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |
| 90-22(4)(a)-(b)                   | The provider shall ensure that <b>sleeping equipment and bedding items</b> are: <b>(a)</b> clearly assigned to one child; and <b>(b)</b> laundered as needed, but at least once a week, and before use by another child.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |             | <input type="checkbox"/> | <input type="checkbox"/> |              |

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| 90-22(5)              | The provider shall <b>clean and sanitize sleeping equipment, that is not clearly assigned</b> to and used by an individual child, before each use.                                                                                                                                                                               | <input type="checkbox"/>                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| Section 23: Diapering |                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> Check here if the provider does not care for diapered children |                                     |                          |      |                          |                          |       |
|                       |                                                                                                                                                                                                                                                                                                                                  | C                                                                                       | NC                                  | NA                       | Date | CDI                      | TA                       | Notes |
| 90-23(1)(a)-(c)       | If the provider accepts <b>children who wear diapers</b> , the provider shall ensure that each child's diaper is: <b>(a)</b> checked as soon as a sleeping child awakens; <b>(b)</b> checked at least once every two hours; and <b>(c)</b> promptly changed when wet or soiled.                                                  | <input type="checkbox"/>                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-23(2)              | The provider shall ensure that caregivers <b>do not change children's diapers directly on the floor, in a food preparation or eating area, or on any surface used for another purpose.</b>                                                                                                                                       | <input type="checkbox"/>                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-23(3)              | The provider shall ensure that the <b>diapering surface is smooth, waterproof, and in good repair.</b>                                                                                                                                                                                                                           | <input type="checkbox"/>                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-23(4)              | The provider shall ensure that a <b>caregiver cleans and sanitizes the diapering surface after each diaper change</b> or uses a disposable, waterproof diapering surface that is thrown away after each diaper change.                                                                                                           | <input type="checkbox"/>                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-23(5)              | The provider shall ensure that a <b>caregiver washes their hands after each diaper change.</b>                                                                                                                                                                                                                                   | <input type="checkbox"/>                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-23(6)(a)-(c)       | The provider shall ensure that <b>caregivers places any wet and soiled disposable diapers: (a)</b> in a container that has a disposable plastic lining and a tight-fitting lid; <b>(b)</b> directly in an outdoor garbage container that has a tight fitting lid; or <b>(c)</b> in a container that is inaccessible to children. | <input type="checkbox"/>                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-23(7)              | The provider shall ensure that each <b>indoor container where any wet and soiled diaper is placed is cleaned and sanitized each day.</b>                                                                                                                                                                                         | <input type="checkbox"/>                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |

|                                     |                                                                                                                                                                                                                                                                                                                                         |                                                                                            |                          |                          |      |                          |                          |       |
|-------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|--------------------------|--------------------------|------|--------------------------|--------------------------|-------|
| 90-23(8)(a)-(c)                     | If <b>cloth diapers are used</b> , the provider shall: <b>(a) not rinse cloth diapers at the facility</b> ; and <b>(b) (i) place cloth diapers directly into a leakproof container that is inaccessible to any child and labeled with the child's name; or (ii) place the cloth diapers in a leakproof diapering service container.</b> | <input type="checkbox"/>                                                                   | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| Section 24: Infant and Toddler Care |                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/> Check here if the provider does not care for infants and toddlers |                          |                          |      |                          |                          |       |
|                                     |                                                                                                                                                                                                                                                                                                                                         | C                                                                                          | NC                       | NA                       | Date | CDI                      | L, M, H, Ex              | Notes |
| 90-24(1)                            | The provider shall ensure that <b>each awake infant and toddler receives positive physical and verbal interaction with a caregiver at least once every 15 minutes.</b>                                                                                                                                                                  | <input type="checkbox"/>                                                                   | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-24(2)                            | To stimulate their healthy development, the provider shall ensure that <b>infants receive daily interactions with adults</b> ; including on the ground interaction and closely supervised time spent in the prone position for infants less than six months old.                                                                        | <input type="checkbox"/>                                                                   | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-24(3)(a)-(f)                     | The provider shall ensure that <b>a caregiver responds promptly to an infant and toddler who is in emotional distress</b> due to any conditions including: <b>(a)</b> a wet or soiled diaper; <b>(b)</b> fatigue; <b>(c)</b> fear; <b>(d)</b> hunger; <b>(e)</b> illness; or <b>(f)</b> teething.                                       | <input type="checkbox"/>                                                                   | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-24(4)                            | <b>To stimulate healthy development</b> , the provider shall make safe toys available and accessible for each infant and toddler to engage in play.                                                                                                                                                                                     | <input type="checkbox"/>                                                                   | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-24(5)                            | The provider shall ensure that any <b>mobile infant and toddler has freedom of movement in a safe area.</b>                                                                                                                                                                                                                             | <input type="checkbox"/>                                                                   | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-24(6)                            | The provider <b>may not confine an awake infant or toddler in any piece of equipment</b> , including a swing, high chair, crib, playpen, or other similar piece of equipment <b>for more than 30 minutes.</b>                                                                                                                           | <input type="checkbox"/>                                                                   | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-24(7)                            | The provider shall ensure that <b>only one infant or toddler occupies any one piece of equipment at a time</b> , unless the equipment has individual seats for more than one child.                                                                                                                                                     | <input type="checkbox"/>                                                                   | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |
| 90-24(8)                            | The provider shall make objects made of <b>styrofoam inaccessible</b> to any infant and toddler.                                                                                                                                                                                                                                        | <input type="checkbox"/>                                                                   | <input type="checkbox"/> | <input type="checkbox"/> |      | <input type="checkbox"/> | <input type="checkbox"/> |       |



|                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                          |                                     |                          |  |                          |                          |  |
|------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|--------------------------|--|--------------------------|--------------------------|--|
| 90-24(9)         | The provider shall <b>allow each infant and toddler to eat and sleep on their own schedule.</b>                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-24(10)(a)-(d) | The provider shall ensure that <b>baby food, formula, or breast milk that is brought from home</b> for an individual infant and toddlers use is: <b>(a) labeled with the child's name; (b) labeled with the date and time of preparation or opening</b> of the container, including a jar of baby food; <b>(c) kept refrigerated</b> if needed; and <b>(d) discarded within 24 hours of preparation or opening</b> , except for unprepared powdered formula or dry food. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-24(11)        | If an <b>infant cannot sit upright and hold their own bottle</b> , the provider shall ensure that <b>a caregiver is within arm's reach of each infant during bottle feeding and that a bottle is not propped.</b>                                                                                                                                                                                                                                                        | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-24(12)        | The provider shall ensure that the <b>caregiver swirls and tests warm bottles for temperature before feeding</b> to a child.                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-24(13)        | The provider shall <b>discard formula and milk, including breast milk, after feeding or within two hours of starting a feeding.</b>                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-24(14)        | The provider shall ensure that a caregiver <b>cut solid foods for (a) an infant into pieces no larger than 1/4 inch</b> in diameter; and <b>(b) a toddler into pieces no larger than 1/2 inch</b> in diameter.                                                                                                                                                                                                                                                           | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-24(15)        | The provider shall ensure that <b>each infant sleeps in equipment designed for sleep</b> including a crib, bassinet, porta-crib or playpen, and that an infant is not placed to sleep on a mat, cot, pillow, bouncer, swing, car seat, or other similar piece of equipment.                                                                                                                                                                                              | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-24(16)        | The provider shall <b>place an infant on their back for sleeping</b> unless there is documentation from a health care provider requiring a different sleep position.                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |
| 90-24(17)        | The provider may not <b>place any soft toy, loose blanket, or other object in sleep equipment while in use</b> by a sleeping infant.                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  | <input type="checkbox"/> | <input type="checkbox"/> |  |

TECHNICAL ASSISTANCE GIVEN DURING INSPECTION