CHAPTER 9503 DEPARTMENT OF HUMAN SERVICES CHILD CARE CENTERS

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LICENSING REQUIREMENTS FOR CHILD CARE CENTERS

9503.0005 **DEFINITIONS.**

Subpart 1. **Scope.** The definitions in this part apply to parts 9503.0005 to 9503.0170.

- Subp. 2. Age category. "Age category" means the designation given a child according to the child's age. The age categories are as follows:
- A. "Infant" means a child who is at least six weeks old but less than 16 months old.
- B. "Toddler" means a child at least 16 months old but less than 33 months old.
- C. "Preschooler" means a child who is at least 33 months old but who has not yet attended the first day of kindergarten.
- D. "School age child" means a child who has at least attended the first day of kindergarten but is less than 13 years old.

The age designation given a child may be further modified in accordance with part 9503.0040, subpart 4.

- Subp. 3. Applicant. "Applicant" means a person, corporation, partnership, voluntary association, or other organization that has applied for licensure under Minnesota Statutes, chapter 245A, section 252.28, subdivision 2; and parts 9503.0005 to 9503.0170. The term includes license holders that have applied for a new license to continue operating a child care program after the expiration date of their current license.
- Subp. 4. **Building official.** "Building official" means a person appointed according to Minnesota Statutes, section 16B.65, to administer the state building code. The term includes the appointee's authorized representative.
- Subp. 5. Center. "Center" means a facility in which a child care program is operated when the facility is not excluded by Minnesota Statutes, section 245A.03, subdivision 2, and is not required to be licensed under parts 9502.0315 to 9502.0445 as a family or group family day care home.
 - Subp. 6. Child. "Child" means a person 12 years old or younger.

- Subp. 7. Child care program. "Child care program" means the systematic organization or arrangement of activities, personnel, materials, and equipment in a facility to promote the physical, intellectual, social, and emotional development of a child in the absence of the parent for a period of less than 24 hours a day.
- Subp. 8. Child care program plan. "Child care program plan" means the written document that states the specific activities that will be provided by the license holder to promote the physical, intellectual, social, and emotional development of the children enrolled in the center.
- Subp. 9. Clean. "Clean" means free from dirt or other contaminants that can be detected by sight, smell, or touch.
- Subp. 10. Commissioner. "Commissioner" means the commissioner of the Department of Human Services or the commissioner's designated representative.
- Subp. 11. **Disinfected.** "Disinfected" means treated to reduce microorganism contamination after an object has been cleaned. Disinfection must be done by rinsing or wiping with a solution of one-fourth cup chlorine bleach plus water to equal one gallon, or an equivalent product or process approved by the Board of Health as defined in Minnesota Statutes, section 145A.02, or its designee.
- Subp. 12. Facility. "Facility" means the indoor and outdoor space in which the child care program is provided.
- Subp. 13. Fire marshal. "Fire marshal" means the person designated by Minnesota Statutes, section 299F.011, to administer and enforce the Minnesota Uniform Fire Code. The term includes the fire marshal's authorized representative.
- Subp. 14. Health consultant. "Health consultant" means a physician licensed to practice medicine under Minnesota Statutes, chapter 147; a public health nurse or registered nurse licensed under Minnesota Statutes, section 148.171; or the Board of Health as defined in Minnesota Statutes, section 145A.02, or its designee.
- Subp. 15. License. "License" means a certificate issued by the commissioner authorizing the license holder to operate a child care program in a center for a specified period of time in accordance with the terms of the license, rules of the commissioner, and provisions of Minnesota Statutes, chapter 245A, and section 252.28, subdivision 2.
- Subp. 16. License holder. "License holder" means the individual, corporation, partnership, voluntary association, or other organization legally responsible for the operation of the child care program in a center that has been granted a license by the commissioner under Minnesota Statutes, chapter 245A; section 252.28, subdivision 2; and parts 9503.0005 to 9503.0170.
- Subp. 17. Licensed capacity. "Licensed capacity" means the maximum number of children for which the license holder is licensed to operate a child care program in a center at any one time.
- Subp. 18. Medicine. "Medicine" means a substance used to treat disease or injuries, maintain health, heal, or relieve pain. The term applies to prescription and nonprescription substances taken internally or applied externally.
- Subp. 19. Minnesota Uniform Fire Code. "Minnesota Uniform Fire Code" means those codes and regulations adopted by the state fire marshal according to Minnesota Statutes, section 299F.011.
- Subp. 20. Parent. "Parent" means the person or persons with legal custody of the child.
- Subp. 21. **Program staff person.** "Program staff person" means a teacher, assistant teacher, or aide, whether paid or unpaid, who carries out the child care program plan in the center and has direct contact with children.
- Subp. 22. Sick child. "Sick child" means a child with a condition or illness as specified in part 9503.0080.

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- Subp. 23. Staff person. "Staff person" means a person, whether paid or unpaid, who works in the center.
- Subp. 24. State building code. "State building code" means those codes and regulations adopted by the commissioner of the Department of Administration according to Minnesota Statutes, section 16B.59, and contained in chapter 1300.
- Subp. 25. Supervision. "Supervision" occurs when a program staff person is within sight and hearing of a child at all times so that the program staff person can intervene to protect the health and safety of the child.
- Subp. 26. Variance. "Variance" means time limited written permission by the commissioner for an applicant or license holder to depart from the provisions of parts 9503.0005 to 9503.0170 if equivalent alternative measures are taken to ensure the health, safety, and rights of the children in care.

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2 **History:** 13 SR 173

9503,0010 APPLICABILITY.

Parts 9503.0005 to 9503.0170 govern the licensure of the applicants for and license holders operating a child care program in a center.

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2 **History:** 13 SR 173

9503.0015 OPTIONS FOR CHILD CARE PROGRAMS.

A license holder must provide one or more of the following child care programs:

- A. A "day program" means a child care program operated during normal waking hours (approximately 6 a.m. to 6 p.m.). The program:
- (1) operates for more than 30 days in any 12 month period and is not excluded by Minnesota Statutes, section 245A.03, subdivision 2; and
- (2) provides care to any child for more than 30 days in any 12 month period and 45 hours in any calendar month.
- B. A "drop in program" means a child care program that operates for more than 30 days in any 12 month period and is not excluded by Minnesota Statutes, section 245A.03, subdivision 2. The program is not a day program and does not provide care to any child for more than a cumulative total of 45 hours in any calendar month.
- C. A "night care program" means a child care program operated during normal sleeping hours (approximately 6 p.m. to 6 a.m.).
- D. A "sick care program" means a child care program that provides care to a sick child.

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2 **History:** 13 SR 173

9503.0025 APPLICANT BACKGROUND STUDY.

- Subpart 1. Applicant background study. An applicant background study of the applicant and all staff persons who will have direct contact with or access to persons served by the child care program must be made under Minnesota Statutes, section 245A.04, subdivision 3, using forms and in a manner prescribed by the commissioner.
- Subp. 2. Information on organizations. If the applicant is an authorized representative of a partnership, corporation, voluntary association, or other organization legally responsible for the operation of the child care program, the applicant must make available and maintain the names and addresses of the owners and board members, the articles of incorporation, and an organizational chart in the center administrative record specified in part 9503.0115.

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2

History: 13 SR 173

9503.0030 QUALIFICATIONS OF APPLICANT AND STAFF.

Subpart 1. **Definitions.** In parts 9503.0030 to 9503.0034:

- A. "Accredited course" means a course that is offered for credit by or through an accredited postsecondary institution.
- B. "Education" means accredited course work from an accredited post-secondary institution in child development; children with special needs; early childhood education methods or theory; curriculum planning; child study techniques; family studies; child psychology; parent involvement; behavior guidance; child nutrition; child health and safety; early childhood special education methods or theory; child abuse and neglect prevention; recreational sports, arts, and crafts methods or theory; or coordination of community and school activities. "Education," as specified on the charts in parts 9503.0032 and 9503.0033, is in addition to the credential specified in column A unless the course work has been completed as part of the credential.
- C. "Experience" means paid or unpaid employment serving children as a teacher, assistant teacher, or aide, in a licensed child care center; or work as a student intern in a licensed center, a school operated by the commissioner of education or by a legally constituted local school board, or a private school approved under rules administered by the commissioner of education.
- D. "Student intern" means a student of a postsecondary institution assigned by that institution for a supervised experience with children. The experience must be in a licensed center, an elementary school operated by the commissioner of education or a legally constituted local school board, or a private school approved under rules administered by the commissioner of education. The term includes a person who is practice teaching, student teaching, or carrying out a practicum or internship.
- E. "Staff supervision" means responsibility to hire, train, assign duties, and direct staff in day to day activities and evaluate staff performance. A "supervisor" is a person with staff supervision responsibility.
- Subp. 2. General staff qualifications. Staff persons who have direct contact with or access to children, and volunteers who have direct contact with or access to children and are not under the direct supervision of a staff person, must meet the qualifications in this subpart:
- A. Persons who supervise staff persons or volunteers must be at least 18 years old and meet the qualifications for director, teacher, or assistant teacher.
- B. Staff persons and contract consultants with qualifications that require licensure, certification, or registration by the state of Minnesota must have the current licensure, certification, or registration in their field on file within their personnel record specified in part 9503.0120.
- C. Staff persons must be physically able to care for children and must not present a risk of transmission of reportable communicable disease as named in parts 4605.7000 to 4605.7800 within a center.
- Subp. 3. Disqualification factors. A staff person with direct contact with or access to children in care must disclose the arrest, conviction, and applicant background information specified in Minnesota Statutes, section 245A.04, subdivision 3. A license holder must not be an individual or employ an individual who:
- A. has a conviction of, has admitted to, has been charged and is awaiting trial for, or there is substantial evidence indicating that the person has committed:
- (1) an act of physical abuse or sexual abuse as those terms are defined in Minnesota Statutes, section 626.556, even if the act occurred before the effective date of that statute;

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- (2) an act of abuse as that term is defined in Minnesota Statutes, section 626.557, subdivision 2, paragraph (d), clauses (1), (2), and (3), even if the act occurred before the effective date of that statute;
- (3) murder or manslaughter as those terms are defined in Minnesota Statutes, sections 609.185 to 609.205;
- (4) the solicitation of children to engage in sexual conduct as that term is defined in Minnesota Statutes, section 609.352; or
- (5) the same or similar acts or crimes as those in this item listed in the laws of another state or of the United States or of another country;
- B. has a conviction of, has admitted to, has an adjudication of delinquency for, has been charged and is awaiting trial for, or a preponderance of the evidence indicates the person has committed:
- (1) neglect as defined in Minnesota Statutes, section 626.556, subdivision 2, paragraph (c);
 - (2) a felony under Minnesota Statutes, chapter 152;
- (3) any crime listed in Minnesota Statutes, sections 609.21 to 609.294; 609.321 to 609.345; 609.365; 609.377; 609.378; 609.582, subdivision 1; 609.561 to 609.563; 609.66 to 609.67; 609.687; 609.71; 609.713; or 617.23 that is other than those listed in item A: or
- (4) the same or similar crimes as those in this item listed in the laws of another state or of the United States or of another country;
- C. has had parental rights terminated under Minnesota Statutes, section 260.221, paragraph (b);
- D. has mental illness as defined in Minnesota Statutes, section 245.462, subdivision 20, and the behavior has or may have a negative effect on the ability of the person to provide child care or is apparent during the hours children are in care; or
- E. abuses prescription drugs or uses controlled substances as named in Minnesota Statutes, chapter 152, or alcohol to the extent that the use or abuse impairs or may impair the person's ability to provide child care or is apparent during the hours children are in care.
- Subp. 4. Reevaluation of disqualification. An applicant or license holder that is disqualified from licensure or an employee, volunteer, or contractor of an applicant or license holder who is not permitted to work based on the disqualification factors in subpart 3 may request that the commissioner reevaluate the disqualification decision and remove the disqualification. The request for reevaluation must be made in writing and sent to the commissioner by certified mail.
- A. A request for reevaluation of a disqualification based on subpart 3, item A, C, D, or E must be accompanied by information establishing that the evidence relied upon by the commissioner is erroneous. The commissioner shall not disregard the evidence establishing that an act described in subpart 3, item A, C, D, or E occurred based on the factors in items B and C.
- B. A request for reevaluation of a disqualification based on subpart 3, item B, must be accompanied by:
- (1) copies of information held by a person, organization, or agency specified in Minnesota Statutes, section 245A.03, subdivision 3, pertaining to the evidence or circumstances surrounding the incident;
 - (2) the period of time elapsed since the incident;
- (3) evidence of training or rehabilitation of the applicant or license holder, or an employee, volunteer, or contractor of an applicant or license holder that has occurred since the incident; and
- (4) any other information that the applicant or license holder, or an employee, volunteer, or contractor of an applicant or license holder believes the commissioner should consider in reevaluating the disqualification decision.

- C. In determining whether or not to remove the disqualification, the commissioner shall consider the consequences of the incident that led to the finding; the vulnerability of the victim of the incident; the time elapsed without a repeat of the same or similar incident; and documentation of successful completion of training or rehabilitation pertinent to the incident.
- D. The commissioner's disposition is the final administrative agency action.
- Subp. 5. Evaluation for cause. The commissioner may require, before licensure or at any time during the licensed term, a physical, mental health, chemical dependency, or criminal history evaluation of any person with direct contact with children, if the commissioner has reasonable cause to believe any of the qualifications or requirements have not been met or that the person cannot care for children. Evaluations must be conducted by a professional qualified by license, certification, education, or training to perform the specific evaluation. Evaluation refusal may result in employment disqualification.

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2

History: 13 SR 173

9503.0031 DIRECTORS.

Subpart 1. General requirements for a director. A director must:

- A. be at least 18 years old;
- B. be a graduate of a high school or hold an equivalent diploma attained through successful completion of the general education development (GED) test;
- C. have at least 1,040 hours of paid or unpaid staff supervision experience; and
- D. have at least nine quarter credits or 90 hours earned in any combination of accredited courses in staff supervision, human relations, and child development.
- Subp. 2. Additional requirements. If a director functions as a teacher or develops or revises the child care program plan, the director must meet the qualifications of a teacher specified in part 9503.0032.

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2

History: 13 SR 173

9503.0032 TEACHERS.

A teacher must be at least 18 years old and meet the qualifications in item E with the following exceptions:

- A. A person employed as a teacher as of the effective date of parts 9503.0005 to 9503.0170 who met the qualifications in part 9545.0600, subpart 1, item B, is considered to meet the qualifications of a teacher, but must meet the qualifications in this part within three years of the effective date of parts 9503.0005 to 9503.0170.
- B. Any new employee hired as a teacher during the first three years after the effective date of parts 9503.0005 to 9503.0170 must meet the qualifications in this part or the license holder must document that the person hired at least meets the qualifications in part 9545.0600, subpart 1, item B, and that the person will meet the qualifications in this part within three years of the effective date of parts 9503.0005 to 9503.0170.
- C. A registered nurse or licensed practical nurse is qualified as a teacher for infants only.
- D. A registered nurse may be used to meet the staff to child ratios for a teacher for sick care in a center licensed to operate a sick care program.
- E. A teacher with the credential listed in column A must have the education and experience listed in column B.

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Column A	Column B
(1) A high school or General Education Development (GED) diploma	Experience: 4,160 hours as assistant teacher
	Education: 24 quarter credits
(2) Diploma from Association Montessori Internationale; preprimary credential, primary diploma, or provisional certificate from the American Montessori Society, without a baccalaureate degree	Experience: 2,080 hours as assistant teacher, aide, or student intern Education: 12 quarter credits
(3) Preprimary credential, primary diploma, or provisional certificate from the American Montessori Society; or diploma from the Association Montessori Internationale with a baccalaureate degree	Experience: 1,040 hours as assistant teacher, aide, or student intern Education: no additional required
(4) Minnesota technical institute certificate as a Child Development Assistant	Experience: 2,080 hours as an assistant teacher Education: six quarter credits
(5) Child Development Associate credential (center based or family day care) for preschool or for infants and toddlers from the Council for Early Childhood Professional Recognition	Experience: 1,560 hours as assistant teacher, aide, or student intern Education: no additional required
(6) License from the Minnesota Department of Education for Prekindergarten Associate; or a certificate or credential for a two year program from an accredited community college or technical college in child development or early childhood education	Experience: 1,040 hours as assistant teacher, aide, or student intern Education: six quarter credits

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(7) Baccalaureate degree from an accredited college or university in any field Experience: 1,040 hours as assistant teacher, aide, or student intern

Education: 18 quarter

credits

(8) License from the Minnesota Department of Education for elementary education without kindergarten endorsement Experience: 520 hours as assistant teacher, aide, or student intern if teaching children under school age

Education: six quarter credits within one year of initial employment if teaching children under school age

(9) License from the Minnesota Department of Education for prekindergarten/nursery, or a license from the Minnesota Department of Education for elementary education with a kindergarten endorsement Experience: no additional required

Education: no additional required

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252,28 subd 2

History: 13 SR 173

NOTE: See part 9503 0175 for effective dates of this part

9503.0033 ASSISTANT TEACHERS.

An assistant teacher must work under the supervision of a teacher. An assistant teacher must be at least 18 years old and meet the qualifications in item E with the following exceptions:

- A. A person employed as an assistant teacher on the effective date of parts 9503.0005 to 9503.0170 who met the qualifications in part 9545.0600, subpart 1, item C, is considered to meet the qualifications of an assistant teacher, but must meet the qualifications in this part within three years of the effective date of parts 9503.0005 to 9503.0170.
- B. Any new employee hired as an assistant teacher during the first three years after the effective date of parts 9503.0005 to 9503.0170 must meet the qualifications in this part or the license holder must document that the person hired at least meets the qualifications in part 9545.0600, subpart 1, item C, and that the person will meet the qualifications within three years of the effective date of parts 9503.0005 to 9503.0170.
- C. A registered nurse or licensed practical nurse is qualified as an assistant teacher for infants only.
- D. A registered nurse may be used to meet the staff to child ratios for an assistant teacher for sick care in a center licensed to operate a sick care program.
- E. An assistant teacher with the credential listed in column A must have the education and experience listed in column B.

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Column A	Column B
(1) High school diploma or General Education Development (GED) equivalency	Experience: 2,080 hours as an aide or student intern
	Education: 12 quarter credits
(2) Minnesota license as a family day care or group family day care provider	Experience: 2,080 hours as a licensed family day care or group family day care provider
	Education: 12 quarter credits
(3) Diploma from Association Montessori Internationale or preprimary credential, primary diploma, or provisional certificate from the American Montessori Society	Experience: 520 hours as an aide or student intern
	Education: three quarter credits
(4) Minnesota technical institute certificate as a Child Development Assistant	Experience: 520 hours as an aide or student intern
	Education: no additional required
(5) Two years full-time postsecondary education from a college or university	Experience: 1,040 hours as an aide or student intern
	Education: nine quarter credits
(6) Child Development Associate credential, center based or for family day care, from the Council for Early Childhood Professional Recognition	Experience: no additional required
	Education: no additional required
(7) Baccalaureate degree in any field from an accredited college or university	Experience: no additional required
	Education: nine quarter credits

(8) Certificate or credential for a two year program in child development or early childhood education at a Minnesota community college or technical college Experience: no additional required

Education: no additional required

(9) License from the Minnesota Department of Education for Prekindergarten Associate Experience: no additional required

Education: no additional required

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2

History: 13 SR 173

NOTE See part 9503 0175 for effective dates of this part

9503.0034 AIDES, VOLUNTEERS, SUBSTITUTES.

Subpart 1. Aide qualifications. In this part, "aide" means a staff person who carries out child care program activities under the supervision of a teacher or assistant teacher. An aide who is under 18 years old must be directly supervised by a teacher or assistant teacher at all times except when the aide is assisting with the supervision of sleeping children or assisting children with washing, toileting, and diapering. An aide must be at least 16 years old.

A person employed as an aide or child care assistant on the effective date of parts 9503.0005 to 9503.0170 who met the qualifications in part 9545.0600, subpart 1, item E, is considered to meet the qualifications of an aide, but must meet the qualifications in this part within one year of the effective date of parts 9503.0005 to 9503.0170.

Any new employee hired as an aide during the first year after the effective date of parts 9503.0005 to 9503.0170 must meet the qualifications in this part or the license holder must document that the person will meet the qualifications within one year of the effective date of parts 9503.0005 to 9503.0170.

- Subp. 2. Volunteers used as staff. A volunteer who is included in the staff to child ratio must meet the requirements for the assigned staff position as specified in parts 9503.0030 to 9503.0034.
- Subp. 3. Substitute staff. A person designated as a substitute must meet the qualifications for the assigned staff position as specified in parts 9503.0030 to 9503.0034, except that the license holder may use substitutes who do not meet the qualifications for teacher in part 9503.0032, item E, or assistant teacher in part 9503.0033, item E, only if:
- A. the amount of unqualified substitute hours per center per calendar year does not exceed 40 hours multiplied by the number of the center's full-time teacher and assistant teacher positions;
- B. unqualified substitutes are not used as teachers or assistant teachers for more than ten consecutive working days for the same group of children per calendar year; and
- C. there is always a person qualified as a teacher present within the center except as qualified in part 9503.0040, subpart 2, item B.

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2

History: 13 SR 173

NOTE: See part 9503 0175 for effective dates of this part

9503,0035 ORIENTATION, FIRST AID, AND IN SERVICE TRAINING.

- Subpart 1. Orientation training. The license holder must ensure that every staff person, and volunteers who will have direct contact with or access to children and are not under the direct supervision of a staff person, are given orientation training and successfully completes the training before starting assigned duties. Completion of the orientation must be documented in the individual's personnel record. The orientation training must include information about:
- A. the center's philosophy, child care program, and procedures for maintaining health and safety, and handling emergencies and accidents;
 - B. specific job responsibilities;
 - C. the behavior guidance standards specified in part 9503.0055; and
- D. the reporting responsibilities specified in Minnesota Statutes, section 626.556, and part 9503.0130.
- Subp. 2. First aid training. All teachers and assistant teachers and at least one staff person present in a vehicle transporting children in care must satisfactorily complete, within 90 days of the start of work, eight hours of first aid training unless this has been satisfactorily completed within the previous three years. The first aid training must be:
 - A. repeated at least every three years;
- B. documented in the person's personnel record and indicated on the center's staffing chart; and
- C. provided by a licensed physician, a registered nurse or a licensed practical nurse trained to provide instruction in first aid, or an individual currently certified by the American Red Cross as a first aid instructor.

On the date of initial licensure, at least one staff person with first aid training must be present in the center when children are in care and at least one person with first aid training must accompany children on field trips.

- Subp. 3. Cardiopulmonary resuscitation (CPR) training. At least one staff person trained in CPR and in the treatment of obstructed airways must be present in the center at all times when children are in care and at least one person with CPR training must accompany children on field trips.
- A. The individual must have completed four to six hours of CPR training which covers the use of CPR techniques with children within one year before initial employment at the center or within one year of the effective date of parts 9503.0005 to 9503.0170. Current certification in CPR by the American Red Cross or American Heart Association may be substituted for this CPR training.
- B. If the individual is not certified in CPR but has taken the CPR training specified in item A, the individual must also complete a four hour refresher course in CPR which includes the use of CPR techniques with children within one year after the CPR training specified in item A, and every two years thereafter.
- C. CPR training must be provided or approved by the American Red Cross, American Heart Association, a licensed physician, a registered nurse, or a licensed practical nurse trained to provide CPR instruction.
- D. Documentation of the completed CPR training must be in the staff person's personnel record, and the staff person with training must be named on the center's staffing chart.
- Subp. 4. In service training. A license holder must ensure that an annual in service training plan is developed and carried out and that it meets the requirements in the following items.
 - A. The in service training plan must:
 - (1) be consistent with the center's child care program plan;

- (2) meet the training needs of individual staff persons as specified in each staff person's annual evaluation report; and
- (3) provide training, at least one-fourth of which is by a resource not affiliated with the license holder.
- B. The director and all program staff persons must annually complete a number of hours of in service training equal to at least two percent of the hours for which the director or program staff person is annually paid.
- C. The annual requirement must be completed within the year for which it was required.
- D. Training on the provisions of parts 9503.0005 to 9503.0170 relevant to the staff person's position must occur within two weeks of initial employment.
- E. One-half of the in service training completed by a staff person each year of employment must pertain to the age of children for which the person is providing care.
- F. No more than four hours of the annual in service training requirement for a teacher, assistant teacher, or aide may relate to administration, finances, and records.
- G. The remainder of the in service training requirement must be met by participation in early childhood development training. In this part, "early childhood development training" means training in child development; children with special needs; early childhood education methods or theory; curriculum planning; child study techniques; family studies; parent involvement; behavior guidance; child nutrition; child health and safety; recreation, sports, arts, and crafts methods or theory; early childhood special education methods or theory; or child abuse and neglect prevention.
- H. The license holder must ensure that, when a staff person completes in service training, a record of the fact is made in the staff person's personnel record. The record must include the date training was completed, the goal of the training and topics covered, trainer's name and organizational affiliation, trainer's signed statement that training was successfully completed, and the director's approval of the training.
 - I. First aid and CPR training may be counted as in service training.

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2

History: 13 SR 173

NOTE: See part 9503 0175 for effective dates of this part

9503.0040 STAFF RATIOS AND GROUP SIZE.

Subpart 1. Staff to child ratios and maximum group size. Except as provided in subpart 2, the minimally acceptable staff to child ratios and the maximum group size within each age category are:

Age CategoryMinimum Staff: Child RatioMaximum Group SizeInfant1:48Toddler1:714Preschooler1:1020School age child1:1530

- Subp. 2. Staff distribution. The license holder must ensure that the following requirements for staff distribution are met and a written staff distribution record is kept in the administrative record.
- A. Only a staff person who is qualified as a teacher, assistant teacher, or aide and who works directly with children can be counted in meeting the staff to child ratios.
- B. An assistant teacher may be substituted for a teacher during morning arrival and afternoon departure times if the total arrival and departure time does not exceed 25 percent of the center's daily hours of operation.

- C. The maximum group size applies at all times except during meals, outdoor activities, field trips, naps and rest, and special activities such as films, guest speakers, and holiday programs.
- D. Except as provided in item B, staff distribution within each age category must follow the pattern in subitems (1) to (4).
- (1) The first staff member needed to meet the required staff to child ratio must be a teacher.
- (2) The second staff member must have at least the qualifications of a child care aide.
- (3) The third staff member must have at least the qualifications of an assistant teacher.
- (4) The fourth staff member must have at least the qualifications of a child care aide.

The pattern in subitems (1) to (4) must be repeated until the number of staff needed to meet the staff to child ratio for each age category has been achieved.

- Subp. 3. Age category grouping. Children in different age categories may be grouped as follows:
- A. During morning arrival and afternoon departure times, children in different age categories may be grouped together if:
- (1) the total arrival and departure time does not exceed 25 percent of the daily hours of operation;
- (2) the staff to child ratio, group size, and staff distribution applied are for the age category of the youngest child present; and
- (3) the group is divided when the number of children present reaches the maximum group size of the youngest child present.
- B. During the center's regular hours of operation, children in different age categories may be mixed within a group if:
 - (1) infants are not grouped with children of other age categories;
- (2) there is no more than a 36-month range in age among children in a group;
- (3) the staff to child ratios, group size, and staff distribution applied are for the youngest child present; and
- (4) program staff are qualified to teach the ages of all children present within the group.

The restriction in item B, subitem (2) may be waived if all children in the group are school age.

- Subp. 4. Age designation. A child must be designated as a member of the age category that is consistent with the child's date of birth with the following exceptions:
- A. A child may be designated as an "infant" up to the age of 18 months for purposes of staff ratios, group size, and child care programming, if the parent, teacher, and center director determine that such a designation is in the best interests of the child. A child may be designated as a "toddler" up to the age of 35 months, or as a "preschooler" at the age of 31 months for purposes of staff ratios, group size, and child care programming, if the parent, teacher, and center director determine that the designation is in the best interests of the child. The child's age category, either "infant," "toddler," or "preschooler" must be noted in the child's record.
- B. Attendance of a child in the first day of kindergarten must be documented in the child's record, and the child must then be designated a school age child.

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2

History: 13 SR 173

9503.0045 CHILD CARE PROGRAM PLAN.

Subpart 1. General requirement. The applicant must develop a written child care program plan, and the license holder must see that it is carried out. The child care program plan must:

- A. mandate that children have supervision at all times;
- B. describe the age categories and number of children to be served by the program;
 - C. describe the days and hours of operation of the program;
- D. describe the general educational methods to be used by the program and the religious, political, or philosophical basis, if any:
- E. be developed and evaluated in writing annually by a staff person qualified as a teacher under part 9503.0032;
- F. have stated goals and objectives to promote the physical, intellectual, social, and emotional development of the children in each age category in part 9503.0005, subpart 3, for which care is provided;
- G. specify activities designed to promote the intellectual, physical, social, and emotional development of a child in a manner consistent with the child's cultural background;
- H. specify that the intellectual, physical, social, and emotional progress of each child be documented in the child's record and conveyed to the parent during the conferences specified in part 9503.0090, subpart 2;
 - I. provide a daily schedule for both indoor and outdoor activities:
- J. provide for activities that are both quiet and active, teacher directed and child initiated:
- K. provide for a variety of activities that require the use of varied equipment and materials; and
 - L. be available to parents for review on request.
- Subp. 2. Interest areas. A child care program that operates for more than three hours a day must provide daily access to interest areas of the center that are supplied with the equipment and materials needed to carry out the activities specified in items A to H, except that a child care program serving only school age children and operating for less than 90 consecutive calendar days or any program operating for less than three hours a day must provide each child with daily access to indoor or outdoor large muscle activities specified in item G and at least five of the following interest areas:
 - A. creative arts and crafts:
 - B. construction:
 - C. dramatic or practical life activities:
 - D. science:
 - E. music:
 - F. fine motor activities;
 - G. large muscle activities; or
 - H. sensory stimulation activities.

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2

History: 13 SR 173

9503.0050 NAPS AND REST.

- Subpart 1. Naps and rest policy. The applicant must develop a policy for naps and rest that is consistent with the developmental level of the children enrolled in the center. The license holder must see that the policy is carried out.
- Subp. 2. Parent consultation. The parent of each child must be informed at the time the child is enrolled of the center's policy on naps and rest. After

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consultation with the child's parent, any deviation from the policy on naps and rest that is designed to meet the individual needs of a child must be noted in the child's record.

- Subp. 3. Confinement limitation. A child who has completed a nap or rested quietly for 30 minutes must not be required to remain on a cot or mat or in a crib or bed.
- Subp. 4. Placement of equipment. Naps and rest must be provided in a quiet area that is physically separated from children who are engaged in activity that will disrupt a napping or resting child. Cribs, cots, beds, and mats must be placed so there are clear aisles and unimpeded access for both adults and children on at least one side of each piece of napping and resting equipment. Cribs, cots, beds, and mats must be placed directly on the floor and must not be stacked when in
- Subp. 5. Crib standard. A crib or portable crib must be provided for each infant for which the center is licensed to provide care. The equipment must be of safe and sturdy construction that conforms to Code of Federal Regulations, title 16, sections 1508 to 1508.7 and 1509 to 1509.9, as amended through October 27, 1982, or have a bar, mesh, or rail pattern such that a 2-3/8 inch diameter sphere cannot pass through.
- Subp. 6. **Bedding.** Separate bedding must be provided for each child in care. Bedding must be washed weekly and when soiled or wet. Blankets must be washed or dry cleaned weekly and when soiled or wet.

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2 **History:** 13 SR 173

9503.0055 BEHAVIOR GUIDANCE.

- Subpart 1. General requirements. The applicant must develop written behavior guidance policies and procedures, and the license holder must see that the policies and procedures are carried out. The policies and procedures must:
- A. ensure that each child is provided with a positive model of acceptable behavior:
- B. be tailored to the developmental level of the children the center is licensed to serve;
- C. redirect children and groups away from problems toward constructive activity in order to reduce conflict:
- **D**, teach children how to use acceptable alternatives to problem behavior in order to reduce conflict:
 - E. protect the safety of children and staff persons; and
- F. provide immediate and directly related consequences for a child's unacceptable behavior.
- Subp. 2. Persistent unacceptable behavior. The license holder must have written procedures for dealing with persistent unacceptable behavior that requires an increased amount of staff guidance and time. The procedures must specify that staff:
- A. observe and record the behavior of the child and staff response to the behavior; and
- B. develop a plan to address the behavior documented in item A in consultation with the child's parent and with other staff persons and professionals when appropriate.
- Subp. 3. **Prohibited actions.** The license holder must have and enforce a policy that prohibits the following actions by or at the direction of a staff person:
- A. Subjection of a child to corporal punishment. Corporal punishment includes, but is not limited to, rough handling, shoving, hair pulling, ear pulling, shaking, slapping, kicking, biting, pinching, hitting, and spanking.

- B. Subjection of a child to emotional abuse. Emotional abuse includes, but is not limited to, name calling, ostracism, shaming, making derogatory remarks about the child or the child's family, and using language that threatens, humiliates, or frightens the child.
- C. Separation of a child from the group except as provided in subpart 4.
 - D. Punishment for lapses in toilet habits.
- E. Withholding food, light, warmth, clothing, or medical care as a punishment for unacceptable behavior.
- F. The use of physical restraint other than to physically hold a child when containment is necessary to protect a child or others from harm.
 - G. The use of mechanical restraints, such as tying.

For children with mental retardation or a related condition as defined in parts 9525.0015 to 9525.0165, physical and mechanical restraints may be permitted if they are implemented in accordance with the aversive and deprivation procedures governed by parts 9525.2700 to 9525.2810.

- Subp. 4. Separation from the group. No child may be separated from the group unless the license holder has tried less intrusive methods of guiding the child's behavior which have been ineffective and the child's behavior threatens the well being of the child or other children in the center. A child who requires separation from the group must remain within an unenclosed part of the classroom where the child can be continuously seen and heard by a program staff person. When separation from the group is used as a behavior guidance technique, the child's return to the group must be contingent on the child's stopping or bringing under control the behavior that precipitated the separation, and the child must be returned to the group as soon as the behavior that precipitated the separation abates or stops. A child between the ages of six weeks and 16 months must not be separated from the group as a means of behavior guidance.
- Subp. 5. Separation report. All separations from the group must be noted on a daily log. The license holder must ensure that notation in the log includes the child's name, staff person's name, time, date, and information indicating what less intrusive methods were used to guide the child's behavior and how the child's behavior continued to threaten the well being of the child or other children in care. If a child is separated from the group three times or more in one day, the child's parent shall be notified and notation of the parent notification shall be indicated on the daily log. If a child is separated five times or more in one week or eight times or more in two weeks, the procedure in subpart 2 must be followed.
- Subp. 6. Children with mental retardation or related conditions. For children with mental retardation or related conditions as specified in parts 9525.0015 to 9525.0165, the standards governing the use of aversive and deprivation procedures in parts 9525.2700 to 9525.2810 apply.

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2

History: 13 SR 173

9503.0060 FURNISHINGS, EQUIPMENT, MATERIALS, AND SUPPLIES.

Subpart 1. General requirements. Each child care program must have the quantity and type of equipment specified in subparts 3 to 6 for the age categories of children served. Equipment must be appropriate to the age categories and any special needs of the children served. A center must have enough equipment for the number of children for which the center is licensed unless the use of equipment is rotated among groups of children. If the equipment is rotated among groups of children, the center must have enough for the maximum group size of the age category scheduled to use the equipment at times shown on the child care program plan. When the term "group" is used in this part it means the maximum group size for the age category specified in part 9503.0040, subpart 1. The

minimum equipment specified for an age category in subparts 3 to 6 must be accessible every day to the children of that age category and arranged as specified in the child care program plan. Centers operating for less than three hours a day do not have to provide the outdoor equipment required in subpart 4, item B, subitem (9); subpart 5, item B, subitem (9); and subpart 6, item B, subitem (7).

- Subp. 2. **Definitions.** For the purpose of this part, the following terms have the meanings given them.
- A. "Cognitive development equipment and materials" means equipment and materials designed to enhance components of intellectual development, such as problem solving abilities, observation skills, group skills, and symbol recognition.
- B. "Dramatic play equipment" or "practical life activity equipment" means equipment, such as dress up clothes, large or miniature play sets, figures, and small and large building blocks that can be used to design a setting or space that stimulates the child's imagination and encourages role playing and the learning of practical life skills.
- C. "Large muscle equipment" means equipment that is designed to enhance large muscle development and coordination, such as playground equipment, large boxes and pillows, large wheel toys, pull toys, balls, jump ropes, climbers, and rocking boats.
- D. "Manipulative equipment" means equipment that is designed to enhance fine motor development and coordination, such as pegs and peg boards, puzzles, beads and strings, interlocking plastic forms, and carpentry materials.
- E. "Sensory stimulation materials" means equipment, other than pictures, that has different shapes, colors, and textures that stimulate the child's visual and tactile senses. Examples of sensory stimulation materials include mobiles, crib attached activity boxes, sand and water activity materials, swatches of different textures of cloth, and wooden or plastic items of different shapes and colors.
- Subp. 3. Equipment and materials for infants. The minimum equipment and materials required for a center serving infants are as follows:

A. Furnishings:

- (1) one area rug or carpet per group;
- (2) a variety of nonfolding child size chairs including infant seats and high chairs, one per child, or a minimum of four per group;
- (3) one changing table for every group of 12 infants and succeeding group of 12 or fewer infants;
 - (4) one foot operated, covered diaper container per changing table;
 - (5) one crib or portacrib and waterproof mattress per child; and
 - (6) one linear foot of low, open shelving per child.
 - B. Program equipment and materials:
 - (1) one book per child;
 - (2) two large, soft building blocks per child;
- (3) two pieces of infant mobility equipment, such as strollers and wagons per group;
- (4) two pieces of manipulative equipment per child such as shape toys and clutch balls;
- (5) one mirror at least 12 inches by 36 inches in size made of Plexiglas or a similar plastic or of safety glass per group;
- (6) one music source such as a tape player or record player per group and music selections appropriate for the music source;
 - (7) one noise or music making toy per child;
- (8) visual and tactile sensory stimulation materials as needed to provide visual and tactile stimulation; and

- (9) one soft washable toy per child.
- C. Supplies:
 - (1) two sets of blankets and sheets for each crib;
 - (2) an adequate amount of disposable paper for the changing table;
 - (3) an adequate amount of diapers;
 - (4) an adequate amount of facial tissue;
 - (5) an adequate amount of single service towels; and
 - (6) an adequate amount of liquid hand soap.
- Subp. 4. Equipment and materials for toddlers. The minimum equipment required for a center serving toddlers is as follows:

A. Furnishings:

- (1) one area rug or carpet per group;
- (2) one nonfolding child size chair, including high chairs, per child;
- (3) one changing table for every group of 14 toddlers and succeeding group of 14 or fewer toddlers;
 - (4) one foot operated, covered diaper container per changing table;
- (5) one cot per child (mats are acceptable for programs operating during the day for less than five hours);
- (6) one partially enclosed space equipped for quiet activity per group;
 - (7) one linear foot of low open shelving per child; and
 - (8) 20 linear inches of child size table edge per child.
 - B. Program equipment and materials:
- (1) arts and crafts supplies, such as clay or playdough, tempera or finger paints, colored and white paper, paste, collage materials, paint brushes, washable felt type markers, crayons, blunt scissors, and smocks;
 - (2) one book per child;
 - (3) 24 large building blocks per group;
 - (4) 100 small building blocks per group;
- (5) three pieces of dramatic play equipment or sets of Montessori Practical Life equipment per group;
- (6) materials and accessories required for subitem (5) as needed to carry out the theme of the activity, or six Montessori Practical Life exercises;
 - (7) one double easel per group;
- (8) three pieces of durable, indoor, large muscle equipment per group;
- (9) three pieces of durable, outdoor, large muscle equipment per group;
- (10) one mirror, at least 12 inches by 36 inches, made of Plexiglas or a similar plastic or safety glass, per group;
- (11) one music source such as a tape recorder or record player per group and music selections appropriate for the source;
- (12) one set of cognitive developmental equipment and materials, such as puzzles and matching games, per child;
- (13) two sets of manipulative equipment, such as interlocking plastic forms or beads and string, per child;
 - (14) one music making toy per child;
 - (15) one soft washable toy per child; and
- (16) sensory stimulation materials as needed to provide visual and tactile stimulation.

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C. Supplies:

- (1) an adequate amount of disposable paper for the changing table;
- (2) an adequate amount of diapers;
- (3) an adequate amount of facial tissue;
- (4) an adequate amount of single service towels; and
- (5) an adequate amount of liquid hand soap.
- Subp. 5. Equipment and materials for preschoolers. The minimum equipment required for a center serving preschoolers is as follows:

A. Furnishings:

- (1) one area rug or carpet per group;
- (2) one nonfolding child size chair per child;
- (3) one cot or bed and waterproof mattress per child (mats are acceptable for programs operating during the day for less than five hours). This subitem is not required for preschoolers in programs operating for less than five hours per day if rest is not indicated as part of the center's child care program;
- (4) two square feet of wall or bulletin board display space per child one-half at child's eye level);
- (5) one partially enclosed space equipped for quiet activity per group;
 - (6) one linear foot of open shelving per child; and
 - (7) 20 linear inches of child size table edge per child.
 - B. Program equipment and materials:
- (1) arts and crafts supplies, such as clay or playdough, tempera or fingerpaints, white or colored paper, paste, collage materials, paint brushes, washable felt type markers, crayons, scissors, and smocks;
 - (2) two books per child;
 - (3) 48 large building blocks per group;
 - (4) 200 small building blocks per group;
- (5) five pieces of dramatic play equipment or sets of Montessori Practical Life equipment per group;
- (6) materials and accessories required for subitem (5) to carry out the theme of the activity;
 - (7) one double easel per group;
- (8) three pieces of durable, indoor, large muscle equipment per group;
- (9) three pieces of durable, outdoor, large muscle equipment per group;
- (10) one mirror, at least 12 inches by 36 inches, made of Plexiglas or a similar plastic or safety glass, per group;
- (11) one music source such as a tape recorder or record player per group and music selections appropriate for the source;
- (12) one set of cognitive developmental equipment and materials, such as puzzles and number and letter games, per child;
- (13) two sets of manipulative equipment, such as interlocking plastic forms, per child;
- (14) pictures at child's eye level, mobiles, and other items as needed to create a pleasant environment and provide sensory stimulation; and
 - (15) one rhythm instrument per child.

C. Supplies:

- (1) an adequate amount of facial tissue;
- (2) an adequate amount of single service towels; and

group;

- (3) an adequate amount of liquid hand soap.
- Subp. 6. Equipment and materials for school age children. The minimum equipment and materials required for a program serving school age children are as follows:

A. Furnishings:

- (1) one area rug or carpet per group;
- (2) two square feet of wall or bulletin board display space per child;
- (3) one nonfolding child size chair per child;
- (4) one partially enclosed space equipped for quiet activity per
 - (5) one linear foot of open shelving per child; and
 - (6) 20 linear inches of table edge space per child.
- B. Program equipment and materials:
- (1) arts and crafts supplies, such as clay or playdough, tempera or fingerpaints, white or colored paper, paste, collage materials, paint brushes, felt type markers, crayons, and scissors;
 - (2) two books per child;
- (3) three sets of dramatic play equipment or Montessori Practical Life area equipment per group;
- (4) materials and accessories for subitem (3) as required to carry out the theme of the activity;
- (5) one music source such as a tape recorder or record player per group and music selections appropriate for the source;
 - (6) five musical or rhythm instruments per group;
- (7) three pieces of durable, outdoor, large muscle equipment per group;
- (8) pictures at child's level, mobiles, and other items as needed to create a pleasant environment and provide sensory stimulation;
- (9) one set of cognitive developmental equipment and materials, such as puzzles and games, per child;
- (10) five sets of manipulative equipment, such as interlocking plastic forms, per group; and
- (11) ten pieces of sports or recreational equipment, such as bats, balls, hoops, and jump ropes, per group.

C. Supplies:

- (1) an adequate amount of facial tissue;
- (2) an adequate amount of single service towels; and
- (3) an adequate amount of liquid hand soap.

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2 **History:** 13 SR 173

9503.0065 CHILD CARE FOR CHILDREN WITH SPECIAL NEEDS.

Subpart 1. **Definition.** "Child with special needs" for purposes of this part means a child at least six weeks old but younger than 13 years old who:

A. has mental retardation or a related condition as defined in parts 9525.0015 to 9525.0165 and has an individual service plan specifying child care to be provided by the center;

B. has been identified by the local school district as a handicapped child as specified in Minnesota Statutes, section 120.03, subdivision 1, and has an individual education plan specifying child care to be provided by the center according to Minnesota Statutes, section 120.17, subdivision 2; or

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- C. has been determined by a licensed physician, psychiatrist, licensed psychologist, or licensed consulting psychologist as having a special need relating to physical, social, or emotional development.
- Subp. 2. Report to parent. The license holder must inform the parent of any diagnosed or identified special need of a child that was not reported by the parent at the time of admission.
- Subp. 3. Individual child care program plan. When a license holder admits a child with special needs, the license holder must ensure that an individual child care program plan is developed to meet the child's individual needs. The individual child care program plan must be in writing and specify methods of implementation and be reviewed and followed by all staff who interact with the child.

If the child has mental retardation or a related condition as specified in subpart 1, item A, then the individual child care plan must be coordinated with the child's individual service plan developed under parts 9525.0015 to 9525.0165.

If the child has a handicap as specified in subpart 1, item B, then the individual child care plan must be coordinated with the child's individual education plan developed under Minnesota Statutes, section 120.17.

If the child has a special need determined under subpart 1, item C, the individual child care plan must be coordinated with reports from the licensed physician, licensed psychologist, or licensed consulting psychologist. The individual child care plan must be evaluated at least annually by the licensed physician, licensed psychologist, or licensed consulting psychologist and with the child's parent to determine if the needs of the child are being met.

- Subp. 4. Service contracts. The license holder must have copies of all service contracts with the center for care or services provided under parts 9525.0015 to 9525.0165 and Minnesota Statutes, section 120.17, when the care or service is provided to a child while at the center.
- Subp. 5. Additional staff, staff qualifications, or training. The license holder must ensure that any additional staff, staff qualifications, or training required by the child's individual child care plan in subpart 3 are provided.

Statutory Authority: MS s 245A 02 subd 10; 245A.09 subd 1; 252.28 subd 2

History: 13 SR 173

9503.0070 NIGHT CARE PROGRAM.

- Subpart 1. Applicability. A license holder operating a night care program must comply with this part as well as with all other requirements of parts 9503.0005 to 9503.0170.
- Subp. 2. Furnishings. Each child enrolled in a night care program must be provided with a crib, a bed, or a cot with a mattress. A crib and two sets of clean linens must be provided for each infant and meet the standards specified in part 9503.0050. A bed or a cot with a mattress, two sets of sheets, a blanket or quilt, and personal towels and washcloths must be provided for each child in all other age categories.
- Subp. 3. Garments for sleeping. The license holder must ensure that all children are put to bed in garments for sleeping as designated by the child's parent.
- Subp. 4. **Personal effects.** The license holder must ensure that all children have the personal effects needed to clean up and prepare for sleep. The effects must include an individual wash cloth, towel, toothbrush, toothpaste, and liquid hand soap.
- Subp. 5. Meals and snacks. The license holder must ensure that a child who will be present in the center between 6:00 p.m. and 7:00 p.m. has had or will be provided with an evening meal. A bedtime snack must be available for all

children in attendance. Eating times and schedules for the individual child must be consistent with patterns established in consultation with the child's parents.

- Subp. 6. Staffing. At least two staff persons, one of whom must qualify as a teacher under part 9503.0032, must be present in the center at all times during the hours the night program is in operation. When more than 80 percent of the children present are asleep, the remaining staff persons needed to meet the required staff to child ratio must have at least the qualifications of a child care aide. Program staff must be awake and dressed and provide supervision to children who are sleeping.
- Subp. 7. Wash up assistance. The license holder must ensure that children have the opportunity to wash up and cleanse their teeth before bedtime and be assisted by program staff when necessary.
- Subp. 8. Privacy. To ensure privacy, school age boys and girls must be separated during bedtime washing and changing activities.
- Subp. 9. Infants. Infants must have a sleep area separate from the center's play and activity areas.
- Subp. 10. **Bedtime.** A child's bedtime must be scheduled in consultation with the child's parent.
- Subp. 11. Light. In rooms used for sleep during children's bedtime, light must be reduced to no less than one footcandle.
- Subp. 12. **Program emphasis.** A license holder operating a night care program must comply with the child care program standards in part 9503.0045. However, the child care program plan must emphasize quiet activities.
- Subp. 13. Exceptions. The outdoor activity area, outdoor activities, and outdoor equipment required by part 9503.0060 for children enrolled in a night care program need not be provided.

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2 **History:** 13 SR 173

9503.0075 DROP IN PROGRAM.

A license holder operating a drop in program must comply with parts 9503.0005 to 9503.0170 with the following exceptions:

- A. Drop in programs do not have to provide parent conferences as specified in part 9503.0090, subpart 2, item B.
- B. An immunization record as specified in part 9503.0140, subpart 5, must be obtained by the license holder by the first visit to the program. However, the health information specified in part 9503.0140, subpart 3, need not be provided until the child's second visit to the program.
- C. The outdoor activity area, outdoor activities, and outdoor equipment required in part 9503.0060 need not be provided. Indoor space for vigorous large muscle activity must be accessible to children on a daily basis.
- D. The intellectual, physical, social, and emotional progress of each child as specified in part 9503.0045, item H, need not be provided.
- E. Fifty percent of the cots and mats specified in part 9503.0060, subpart 4, item A, subitem (5) for toddlers and subpart 5, item A, subitem (3) for preschoolers are required.

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2 **History:** 13 SR 173

9503.0080 EXCLUSION OF SICK CHILDREN.

A child with any of the following conditions or behaviors is a sick child and must be excluded from a center not licensed to operate a sick care program. If the child becomes sick while at the center, the child must be isolated from other

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children in care and the parent called immediately. A sick child must be supervised at all times. The license holder must exclude a child:

- A. with a reportable illness or condition as specified in part 4605.7040 that the commissioner of health determines to be contagious and a physician determines has not had sufficient treatment to reduce the health risk to others;
- B. with chicken pox until the child is no longer infectious or until the lesions are crusted over;
 - C. who has vomited two or more times since admission that day;
- D. who has had three or more abnormally loose stools since admission that day;
 - E. who has contagious conjunctivitis or pus draining from the eye;
- F. who has a bacterial infection such as streptococcal pharyngitis or impetigo and has not completed 24 hours of antimicrobial therapy;
 - G. who has unexplained lethargy;
- H. who has lice, ringworm, or scabies that is untreated and contagious to others;
- I. who has a 100 degree Fahrenheit axillary or higher temperature of undiagnosed origin before fever reducing medication is given;
- J. who has an undiagnosed rash or a rash attributable to a contagious illness or condition;
 - K. who has significant respiratory distress;
- L. who is not able to participate in child care program activities with reasonable comfort; or
- M. who requires more care than the program staff can provide without compromising the health and safety of other children in care.

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2 **History:** 13 SR 173

9503.0085 SICK CARE PROGRAM.

Subpart 1. Licensure of sick care programs. If a license holder chooses to care for a sick child, then the license holder must operate a sick care program that complies with the standards specified by this part and with all other applicable provisions of parts 9503.0005 to 9503.0170, and any standards of the commissioner of health governing the group care of children. A sick care program may be operated within a center licensed to operate a day program, a drop in program, or a night program or may operate to provide child care exclusively to sick children.

Subp. 2. Review of admission and health policies and practices. At the time of initial license application, after the first six months of initial operation, and annually after that time, a sick care program's admission policies must be reviewed and approved by a licensed physician with a specialization in pediatric care. The physician's review must include consultation with the licensed registered nurse or physician responsible for admissions. A report of the physician's findings must be sent to the commissioner with the initial application for licensure, and subsequent reports must be placed in the center's administrative record.

The license holder operating a sick care program must ensure that the program's health policies and practices are reviewed quarterly by a health consultant and that the health consultant's findings are sent to the commissioner after each review.

Subp. 3. Evaluation of a sick child. A license holder who operates a sick care program must provide for the evaluation of the condition of a sick child before admitting the child to the center. The evaluation must be based on the physical

symptoms of the child each day of admission, the probable contagion and risk to the health of others present, and the ability of the program to provide the care the child requires. A physician or registered nurse affiliated with the center must perform the evaluations specified in items A to C.

- A. A preliminary evaluation must be made before the parent brings the child to the center. The preliminary evaluation must consist of the parent's reporting the child's symptoms to the center's physician or registered nurse by phone. The physician or registered nurse must tell the parent whether the parent may bring the child to the center for further evaluation. Children with a communicable reportable illness or condition as specified in part 4605.7040 must be evaluated by a physician prior to admission to the center.
- B. The physician or registered nurse must do a physical assessment of the child and obtain a health history from the parent when the child is brought to the center.
- C. The decision of the physician or registered nurse not to admit the child for care is final.
- Subp. 3a. Illness separation. Children recovering from a noncontagious condition must be cared for in a room separate from children with contagious conditions.
- Subp. 4. Chicken pox. Children with chicken pox must be excluded from any child care program, including a sick care program, unless care is provided in a room that is separate from other parts of the facility and has its own air circulation system and street entrance.
- Subp. 5. Gastrointestinal illness. Children with gastrointestinal illness must be at least two years old to be in a sick care program and must be cared for in a separate room used exclusively for the care of gastrointestinal illness.
- Subp. 6. Information to parents. A summary of the sick care program's health care policies and practices and the center's procedures for notification of parents in the event of an emergency must be given to the parent at the time a child is admitted.
- Subp. 7. Parent conference exception. Centers licensed to provide child care exclusively to sick children need not provide parent conferences as specified in part 9503.0090, subpart 2, item B.
- Subp. 8. Child care program emphasis. A sick care program must meet the child care program plan standards in part 9503.0045. However, the child care program plan for the care of sick children must emphasize quiet activities.
- Subp. 9. Group size and age category grouping exceptions. The maximum group sizes specified in part 9503.0040, subpart 1, and the age category grouping restrictions in part 9503.0040, subpart 3, are not required except that there must be no more than 16 children in care in a room at the same time and the provisions in subparts 5 and 14 apply.
- Subp. 10. Additional staff to child ratios and staff distribution requirements. A one to four staff to child ratio must be maintained at all times in a room used to care for sick children. At least two staff persons must be present in a center operating a sick care program whenever sick children are in care. The first staff person must be a nurse registered by the Board of Nursing to practice professional nursing who also meets the qualifications in part 9503.0030, subpart 2. The second staff person must meet the qualifications for a teacher in part 9503.0032. The remaining staff persons must at least meet the qualifications and follow the staff distribution pattern specified in part 9503.0040.
- Subp. 11. Limitation on staff assignment. Staff must not care for well children or prepare food for well children on the same day they care for sick children. Staff caring for sick children must not enter the kitchen used to prepare food for well children.
 - Subp. 12. Food preparation. Food provided by the license holder and pre-

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pared at the center must be prepared in a room separate from rooms where sick care is provided and must be delivered to each sick care room in individual servings and in covered containers. Procedures for preparing, handling, and serving food and washing food, utensils, and equipment must comply with the requirements in parts 4625.2400 to 4625.5000.

- Subp. 13. Menus. Menus for sick children must be modified to meet the individual needs of the child.
- Subp. 14. Additional facility requirements. A license holder operating a sick care program must provide:
- A. a room or rooms that are exclusively used to care for sick children and that are not used at any time for any other child care purpose; and
- B. toilets and hand sinks that are within or immediately adjacent to the room or rooms used for sick care and are not used by well children in care.
- Subp. 15. Outdoor activity area, activities and equipment exception. A license holder operating a sick care program that provides care exclusively to sick children need not provide the outdoor activity area required in part 9503.0115, subpart 7; outdoor activities as specified in part 9503.0045, subpart 1, item I; and the outdoor equipment required in part 9503.0060, subpart 4, item B, subitem (9); subpart 5, item B, subitem (9); and subpart 6, item B, subitems (7) and (11).
- Subp. 16. **Disinfection.** Walls and floors in rooms where sick care is provided and all linens, furnishings, objects, and equipment used by sick children must be cleaned and disinfected at least daily and as needed.
- Subp. 17. Linens and changes of clothing. All linens used by a sick child must be washed after each use, and each child must be in clean clothing at all times.
- Subp. 18. Additional equipment. Each sick child must be provided with a crib, bed, or cot, two sheets, a pillow, a pillowcase, and a blanket or quilt.

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2 **History:** 13 SR 173

9503.0090 INFORMATION FOR PARENTS.

- Subpart 1. Policies given to parents. At the time of a child's enrollment, the parent must be provided with written notification of the:
 - A. ages and numbers of children the center is licensed to serve;
 - B. hours and days of operation;
- C. child care program options the center is licensed to operate, including a description of the program's educational methods and religious, political, or philosophical basis, if any, and how parents may review the center's child care program plan;
- **D.** center's policy on parent conferences and notification to a parent of a child's intellectual, physical, social, and emotional development;
- E. type and level of liability insurance coverage held by the license holder for the center and for all vehicles owned and operated by the license holder for the transportation of children;
- F. center's policy requiring a health care summary and immunization record of a child;
- G. policies and procedures for the care of children who become sick at the center and parent notification practices for the onset of or exposure to a contagious illness or condition or when there is an emergency or injury requiring medical attention:
- H. center's policies and procedures for administering first aid and sources of care to be used in case of emergencies;
- I. center's policies on the administration of medicine and permission requirement for the administration of ipecac syrup;

- J. procedures for obtaining written parental permission for field trips;
- K. procedures for obtaining written parental permission before each occasion of research, experimental procedure, or public relations activity involving a child;
 - L. center's policies on the provision of meals and snacks;
 - M. center's behavior guidance policies and procedures;
 - N. presence of pets:
- O. center's policy that parents of enrolled children may visit the center any time during the hours of operation; and
- P. telephone number of the Department of Human Services, Division of Licensing.
- Subp. 2. Parent conferences and daily reports. The license holder must ensure that the parent of a child is informed of the child's progress. The license holder must ensure that:
- A. a preenrollment conference is held between the parent and a program staff person;
- B. individual parent conferences are planned and offered by program staff at least twice a year;
- C. documentation is made in the child's record that individual parent conferences were planned and offered;
- D. the status of the child's intellectual, physical, social, and emotional development is reported to the parent during the conference; and
- E. daily written reports are made to the parent of an infant or toddler about the child's food intake, elimination, sleeping patterns, and general behavior.

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 súbd 2

History: 13 SR 173

9503.0095 PARENT VISITATION.

Parents of enrolled children may visit the center any time during the hours of operation.

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2

History: 13 SR 173

9503.0100 PARTICIPATION IN FIELD TRIPS.

The license holder must ensure that written permission is obtained from each child's parent before taking a child on a field trip. A written permission form must be obtained before each field trip or on a form that annually summarizes all field trips that will be taken. The parent's written permission must state that the parent has been informed of the purpose and destination of the field trip.

On field trips, staff must take emergency phone numbers for the child's parent and the persons to be called if a parent cannot be reached, the phone number of the child's physician, and a first aid kit.

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2

History: 13 SR 173

9503.0105 RESEARCH AND PUBLIC RELATIONS PERMISSION.

The license holder must ensure that written permission is obtained from a parent before a child is involved in experimental research or public relations activity involving a child while at the center. A separate written permission form must be obtained before each occasion of experimental research or public relations activity or on a form that annually summarizes all research and public relations activities that will be undertaken. The permission form must be maintained in the child's record.

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Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2 **History:** 13 SR 173

9503.0110 EMERGENCY AND ACCIDENT POLICIES AND RECORDS.

- Subpart 1. Policies and records. The applicant must develop written policies governing emergencies, accidents, and injuries. The license holder must ensure that written records are kept about incidents, emergencies, accidents, and injuries that have occurred.
- Subp. 2. Instruction record. The license holder must keep a record of instruction to all staff persons and, when appropriate, to children and parents, about how to carry out the policies.
 - Subp. 3. Policy content. The policies must contain:
 - A. Procedures for administering first aid.
- B. Safety rules to follow in avoiding injuries, burns, poisoning, choking, suffocation, and traffic and pedestrian accidents.
 - C. Procedures for the daily inspection of potential hazards.
- D. Procedures for fire prevention and procedures to follow in the event of a fire. Fire procedures must:
 - (1) mandate monthly fire drills and a log of drill times and dates;
- (2) identify primary and secondary exits, building evacuation routes, the phone number of the fire department, persons responsible for the evacuation of children, and areas for which they are responsible;
- (3) contain instruction on how to use a fire extinguisher and how to close off the fire area; and
- (4) provide for the training of staff persons to carry out the fire procedures.
- E. Procedures to follow in the event of a blizzard, tornado, or other natural disaster that include the location of emergency shelter, procedures for monthly tornado drills from April to September, and a log of times and dates showing that the drills were held.
 - F. Procedures to follow when a child is missing.
- G. Procedures to follow if an unauthorized person or a person who is incapacitated or suspected of abuse attempts to pick up a child or if no one comes to pick up a child.
 - H. Sources of emergency medical care.
- I. Procedures for recording accidents, injuries, and incidents involving a child enrolled in the center, a staff person, or a visitor. The written record must contain the name and age of the persons involved; date and place of the accident, injury, or incident; type of injury; action taken by staff; and to whom the accident, injury, or incident was reported.
- J. Procedures mandating a semiannual analysis of the record in item I and any modification of the center's policies based on the analysis.
- Subp. 4. Records. The following records must be maintained in the center's administrative record:
 - A. the procedures specified in subpart 3;
 - B. a log of fire and tornado drills; and
 - C. a written record of accidents, injuries, emergencies, and incidents.

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2 **History:** 13 SR 173

9503.0115 CENTER ADMINISTRATIVE RECORDS.

The records required by this part must be maintained within the center and be available for inspection at the request of the commissioner. The license holder must ensure that the following are maintained:

- A, a record of the information given to parents specified in part 9503.0090;
- B. the personnel records specified in part 9503.0120;
- C. the children's records specified in part 9503.0125;
- D. the child care program plan specified in part 9503.0045;
- E. the accident, injury, emergency, and incident records specified in part 9503.0110;
 - F, the staff distribution schedule specified in part 9503.0040;
 - G. a list of reportable, communicable diseases as defined in part 4605.7040;
 - H. the separation reports mandated in part 9503.0055:
 - I. the report by the health consultant mandated in part 9503.0140; and
- J. a record for each consultant whose services the center purchases either by contracting directly with the individual or by contracting for the person's services with another organization. The record must contain a copy of a signed contract or letter of appointment specifying conditions and terms of employment and documentation that the person under contract meets any licensure, registration, or certification requirements required to perform the services specified in the contract.

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2

History: 13 SR 173

9503.0120 PERSONNEL RECORDS.

The license holder must ensure that a personnel record for each staff person is maintained at the center. The personnel record for each staff person must contain:

- A. the staff person's name, home address, home telephone number, and date of birth;
 - B. the telephone number of a person to be notified in an emergency;
 - C. the staff person's job description;
- D. documentation that the staff person has completed the applicant background study required in part 9503.0025;
- E. the staff person's application, resume, and documentation indicating that the staff person meets the requirements of the staff person's job description and the education and experience requirements specified in parts 9503.0031 to 9503.0034:
- F. documentation that the staff person has completed the orientation to the center required in part 9503.0035, subpart 1;
- G. documentation, when applicable, that the staff person has completed the first aid and CPR training required in part 9503.0035, subparts 2 and 3;
- H. documentation of completion of the in service training required by part 9503.0035, subpart 4, showing the training topic, source of training, number of hours completed, and method used to document mastery of the subject;
- I. documentation of procedures for and completion of an annual evaluation of the staff person's work and specification of in service training needs; and
 - J. documentation of any disciplinary action including termination.

The license holder shall not disclose a staff person's personnel record to any person other than the staff person, the staff person's legal representative, the staff person's supervisor, or employees of the license holder designated by the license holder to maintain personnel records, and the commissioner, unless the staff person has given written consent or as otherwise required by law.

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2

History: 13 SR 173

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9503.0125 CHILDREN'S RECORDS.

At the time of enrollment in the center, the license holder must ensure that a record is maintained on each child. The record must contain:

- A. the child's full name, birthdate, and current home address:
- B. the name, address, and telephone number of the child's parent:
- C. instructions on how the parent can be reached when the child is attending the center;
- D. the names and telephone numbers of any persons authorized to take the child from the center;
- E. the names, addresses, and telephone numbers of the child's source of regular medical and dental care and the source of medical and dental care to be used in case of an emergency;
- F. the names, addresses, and telephone numbers of two persons to be contacted if a parent cannot be reached in an emergency or when there is an injury requiring medical attention:
- G. the health form and immunization information required by part 9503.0140;
- H. written authorization for the license holder to act in an emergency, or when a parent cannot be reached or is delayed;
- I. written authorization, if granted, for the license holder to administer ipecae syrup according to part 9503.0140;
 - J. the hours and days of the week the child will attend the center;
- K. for children age six weeks to 36 months, a description of the child's eating, sleeping, toileting, and communication habits, and effective methods for comforting the child;
 - L. documentation of any dietary or medical needs of the child:
- M. documentation of any individual child care program needs for the child; and
- N. the date of parent conferences and a summary of the information provided to the parent at the conference.

The license holder shall not disclose a child's record to any person other than the child, the child's parent or guardian, the child's legal representative, employees of the license holder, and the commissioner unless the child's parent or guardian has given written consent or as otherwise required by law.

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2 **History:** 13 SR 173

9503.0130 REPORTING.

Subpart 1. Abuse; neglect. The license holder must comply with the reporting requirements for abuse and neglect specified in Minnesota Statutes, section 626.556.

- Subp. 2. Other reporting. The license holder must inform the commissioner within:
 - A. 24 hours of the death of a child in care in the center:
- B. 24 hours of any injury to a child in care in the center that required treatment by a physician;
- C. 48 hours of the occurrence of a fire during the hours of operation that requires the service of a fire department; and
- D. 24 hours of the use of any emergency medical service by a child while in care.
- Subp. 3. Animal bites. The license holder must immediately inform the commissioner of health according to part 4605.7600, and the child's parent,

whenever a child is bitten by an animal specified in that part while in the care of the license holder.

Subp. 4. **Reportable disease.** The license holder must report to the commissioner of health suspected cases of reportable disease according to parts 4605.7000 to 4605.7800.

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2

History: 13 SR 173

9503.0140 HEALTH.

Subpart 1. Health policies. The license holder must develop written health policies approved by the commissioner and must ensure that they are carried out.

Subp. 2. Health consultation. The center must have a health consultant who must review the center's health policies and practices specified in items A to C and certify that they are adequate to protect the health of children in care.

The review must be done before initial licensure, submitted with the application for initial licensure and repeated every year after the date of initial licensure. For programs serving infants, this review must be done initially and monthly thereafter. Additionally, the license holder must request a review by the health consultant of the center's health policies and practices if there is a proposed change in the center's health policies or practices or an outbreak of contagious reportable illness as specified in part 4605.7040. A copy of the consultant's findings must be placed in the center's administrative record.

The consultant must review:

- A. The first aid and safety policies and procedures required by part 9503.0110, subpart 3, items A, B, and C.
 - B. The diapering procedures and practices specified in subpart 12.
- C. The sanitation procedures and practices for food not prepared by or provided by the license holder as specified in part 9503.0145, subpart 3, and for infants as specified in part 9503.0145, subpart 7.
- Subp. 3. Health information at admission. Before a child is admitted to a center or within 30 days of admission, the license holder must obtain a report on a current physical examination of the child signed by the child's source of medical care.
- Subp. 4. Reexamination. For children already admitted to the center, the license holder shall obtain an updated report of physical examination signed by the child's source of medical care at least annually for children under 24 months of age, and whenever a child 24 months or older advances to an older age category.
- Subp. 5. Immunizations. When a child is enrolled in the center, the license holder must obtain documentation of current immunization according to Minnesota Statutes, section 123.70, a signed notarized statement of parental objection to the immunization, or a medical exemption.
- Subp. 6. Notice about a sick child. Notices about the illness or condition of a child must be given as required in items A to D:
- A. The license holder must ensure that a parent is notified immediately when the parent's child becomes sick at the center.
- B. The license holder must require a parent to inform the center within 24 hours, exclusive of weekends and holidays, when a child is diagnosed by a child's source of medical or dental care as having a contagious reportable disease specified in part 4605.7040, or lice, scabies, impetigo, ringworm, or chicken pox.
- C. The license holder must post or give a notice to the parents of exposed children the same day a parent notifies the center of a child's illness or condition listed in item B.
 - D. The license holder must ensure that the health authority is notified

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of any suspected case of reportable disease as specified in part 4605.7040 within 24 hours of receiving the parent's report.

- Subp. 7. Administration of medicine. A license holder who chooses to administer medicine must ensure that the procedures in items A to E are followed.
- A. The license holder must get written permission from the child's parent before administering medicine, diapering products, sunscreen lotions, and insect repellents. Nonprescription medicines, diapering products, sunscreen lotions, and insect repellents must be administered according to the manufacturer's instructions unless there are written instructions for their use provided by a licensed physician or dentist.
- B. The license holder must get and follow written instructions from a licensed physician or dentist before administering each prescription medicine. Medicine with the child's name and current prescription information on the label constitutes instructions.
- C. All medicine must be kept in its original container and have a legible label stating the child's name. The medicine must be given only to the child whose name is on the label. The medicine must not be given after an expiration date on the label, and any unused portion must be returned to the child's parent or destroyed. The license holder must ensure that the administration of medicine is recorded and give the name of the child, name of the medication or prescription number, date, time, dosage, and the name and signature of the person who dispensed the medicine. The record must be available to the parent and maintained in the child's record.
- D. Sunscreen lotions and insect repellents supplied by the license holder may be used on more than one child. A product to control or prevent diaper rash, including premoistened commercial wipes that cannot be dispensed in a manner that prevents cross contamination of the product and container as determined by the health consultant, must be labeled with the child's name and used only for the individual child whose name is written on the label.
- E. Medicines, insect repellents, sunscreen lotions, and diaper rash control products must be stored according to directions on the original container and so that they are inaccessible to children.
- Subp. 8. Nonsmoking. A center must comply with the Minnesota Clean Indoor Air Act in Minnesota Statutes, sections 144.411 to 144.417, and Minnesota Rules, chapter 4620.
- Subp. 9. Cleanliness. The indoor and outdoor space and equipment of the center must be clean.
- Subp. 10. Toilet facilities. The toilet rooms of the center must be cleaned daily. Toilet training chairs must be emptied, washed with soap and water, and disinfected after each use. Toilets and seats must be washed with soap and water and disinfected when soiled or at least daily.
- Subp. 11. Diaper changing area. A diaper must be changed only in the diaper changing area. The diaper changing area must be separate from areas used for food storage, food preparation, and eating. The area must have a hand sink equipped with hot and cold running water within three feet of the diaper changing surface, a smooth nonabsorbent diaper changing surface and floor covering, and a container operated by a foot pedal for soiled and wet diapers.
- Subp. 12. Diaper changing procedures. The center must have and follow diaper changing procedures that have been developed in consultation with a health consultant. The license holder must post the diaper changing procedures in the diaper changing area.
- Subp. 13. Hand washing: child. A child's hands must be washed with soap and water after a diaper change, after use of a toilet or toilet training chair, and before eating a meal or snack. Staff must monitor hand washing and assist a child who needs help. The use of a common basin or a hand sink filled with standing water is prohibited.

- Subp. 14. Hand washing: staff person. A staff person must wash his or her hands with soap and water after changing a child's diaper, after using toilet facilities, and before handling food or eating.
- Subp. 15. Toilet articles. The license holder shall provide the following supplies and make them accessible to children: toilet paper, liquid hand soap, facial tissues, and single use paper towels or warm air hand dryers.
- Subp. 16. First aid kit. The license holder must ensure that a first aid kit is available within the center. The kit must contain sterile bandages and band-aids, sterile compresses, ipecac syrup, scissors, an ice bag or cold pack, an oral or surface thermometer, and adhesive tape. A current first aid manual must be included. The first aid kit and manual must be accessible to the staff in the center and taken on field trips. The ipecac syrup must be labeled with instructions to call and number for the local poison control center. The license holder must ensure that ipecac syrup is administered according to the instructions of the poison control center.
- Subp. 17. Hazardous objects. Sharp objects, medicines, plastic bags, and poisonous plants and chemicals, including household supplies, must be stored out of reach of children.
- Subp. 18. Emergency equipment. The center must have a battery operated flashlight and battery operated portable radio.
- Subp. 19. Condition of equipment and furniture. Equipment and furniture must be durable, in good repair, structurally sound and stable following assembly and installation. Equipment must be free of sharp edges, dangerous protrusions, points where a child's extremities could be pinched or crushed, and openings or angles that could trap part of a child's body. Tables, chairs, and other furniture must be appropriate to the age and size of children who use them. Toys and equipment that are likely to be mouthed by infants and toddlers must be made of a material that can be disinfected. These must be cleaned and disinfected when mouthed or soiled and at least daily.

Infant rattles must meet the United States consumer product safety standards contained in the Code of Federal Regulations, title 16, sections 1510.1 to 1510.4, as adopted on May 23, 1978. All toys and other articles intended for use by children under three years of age that present choking, aspiration, or ingestion hazards because of small parts must meet the size standards in Code of Federal Regulations, title 16, sections 1501.1 to 1501.5, as adopted on June 15, 1979.

- Subp. 20. Maintenance of areas used by children. The areas used by children must be free from debris, loose flaking, peeling, or chipped paint, loose wallpaper, or crumbling plaster, litter, and holes in the walls, floors, and ceilings. Rugs must have a nonskid backing or be firmly fastened to the floor and be free from tears, curled or frayed edges, and hazardous wrinkles.
- Subp. 21. Emergencies. The license holder must ensure that written procedures for emergencies and accidents are posted in a visible place. The procedures must:
 - A. identify persons responsible for each area;
 - B. identify primary and secondary exits;
 - C. identify a tornado shelter area;
 - D. identify building evacuation routes;
 - E. describe how to use a fire extinguisher and close off the fire area; and
- F. list the phone numbers and sources of emergency medical and dental care, poison control center, fire department, health authority, and licensing division of the Department of Human Services.
- Subp. 22. Pets. If pets are permitted at the center, parents must be informed at the time of admission that a pet is present. Pets must be properly housed, cared for, inoculated, and licensed in accordance with local health ordinances and codes.

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2

History: 13 SR 173

9503.0145 FOOD AND WATER.

Subpart 1. Food. The license holder must see that meals and supplemental snacks are available. Bag lunches provided by the parent are acceptable as specified in subpart 4.

- Subp. 2. Menus. When food is provided by the license holder, menus must be planned on a monthly basis and posted in a conspicuous place where they can be reviewed by parents. A sample menu must be provided to parents at the time of admission. Menus must comply with the nutritional requirements of the United States Department of Agriculture, Food and Nutrition Service, Code of Federal Regulations, title 7, section 226.20.
- Subp. 3. Sanitation. Procedures for preparing, handling, and serving food, and washing food, utensils, and equipment must comply with the requirements for food and beverage establishments in parts 4625.2400 to 4625.5000. If the food is prepared off site by another facility or if food service is provided according to a contract with a food service provider, the facility or license holder must ensure that food is prepared in compliance with parts 4625.2400 to 4625.5000. The license holder must provide refrigeration for dairy products and other perishable foods, whether supplied by the license holder or supplied by the parent. The refrigeration must have a temperature of 40 degrees Fahrenheit or less. Tables and highchair trays used for meals must be washed with soap and water before and after each use.
- Subp. 4. Meals and snacks. Each meal must provide one-third of the child's daily nutritional needs as specified by the United States Department of Agriculture, Food and Nutrition Service, in Code of Federal Regulations, title 7, section 226.20. The license holder must provide or ensure the availability of:
- A. a snack for a child in attendance for more than two hours, but fewer than five hours:
- B. one meal and two snacks or two meals and one snack for a child in attendance five to ten hours unless four or more of these hours are spent in sleep:
- C. a minimum of two meals and two snacks for a child in attendance more than ten hours unless four or more of these hours are spent in sleep; and
- D. program staff who are seated with the children during meal and snack times.
- Subp. 5. Prescribed diet needs. The license holder must provide for a child's dietary needs prescribed by the child's source of medical care or require the parent to provide the prescribed diet items that are not part of the menu plan approved in subpart 2. A license holder serving a child who has a prescribed diet must keep the diet order and its duration specified in the child's record. All staff designated to provide care to the child must be informed of the diet order.
- Subp. 6. Food allergy information. Information about food allergies of the children in the center must be available in the area where food is prepared or served to children with allergies. All staff providing care to the child must be informed of the allergy.
- Subp. 7. Infant diets. The diet of an infant must be determined by the infant's parent. The license holder must ensure that sanitary procedures and practices are used to prepare, handle, and store formula, milk, breast milk, solid foods, and supplements. Procedures must be reviewed and certified by a health consultant. A center serving infants must:
 - A. obtain written dietary instructions from the parent of the child;
- B. have the infant's feeding schedule available in the food preparation area;

- C. offer the child formula or milk and nutritionally adequate solid foods in prescribed quantities at specified time intervals; and
 - D. label each child's bottle.

Subp. 8. Water. The center must have a safe water supply. A center that uses water from a privately owned well that is not governed by chapter 4720 must be tested annually by a Minnesota Health Department certified laboratory for coliform bacteria and nitrate nitrogens to verify safety. The license holder must ensure that a record of the test results is in the center's administrative record. Any results indicating a level of coliform bacteria and nitrate nitrogen not within the coliform bacteria and nitrate nitrogen levels specified in chapter 4720, must be sent to the commissioner of health, the Board of Health as defined in Minnesota Statutes, section 145A.02, and the licensing division of the Department of Human Services. The commissioner of health may issue an advisory order for retesting and corrective measures.

Drinking water must be available to children throughout the hours of operation and offered at frequent intervals. Drinking water for children must be provided in single service drinking cups or from drinking fountains accessible to children.

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2 **History:** 13 SR 173

9503.0150 TRANSPORTATION.

A license holder who provides transportation for children or contracts to provide transportation must comply with the following transportation policies:

- A. The vehicle must be licensed according to Minnesota Statutes, chapter 168, and comply with the equipment standards in Minnesota Statutes, chapter 169.
- B. The vehicle must be driven by a person who holds a current Minnesota driver's license appropriate to the vehicle driven.
- C. Staff ratios must be maintained on all transportation provided on all field trips.
- D. When children are driven in a private car or van, a second adult must be present when more than four children under the age of five are being transported.
- E. When the license holder provides transportation to and from the center, a second adult must be present in the vehicle and children must not be transported more than one hour per one-way trip.
- F. When children are transported, they must be restrained in accordance with Minnesota Statutes, section 169.686, and a child under the age of four may be transported only if the child is properly fastened in a child passenger restraint system that meets the federal motor vehicle safety standards contained in Code of Federal Regulations, title 49, section 571.213.

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2 **History:** 13 SR 173

9503.0155 FACILITY.

Subpart 1. Occupancy designation. In areas of the state that have adopted the Minnesota State Building Code, the applicant must comply with the standards specified by the code if the application is an initial one. In those areas of the state that have not adopted the Minnesota State Building Code, an applicant for licensure must comply with any applicable local building ordinances if the application is an initial one. The commissioner must not grant an initial license until written verification of compliance with the state building code or local building ordinance, when applicable, has been received by the commissioner from the building official with jurisdiction.

9503.0155 CHILD CARE CENTERS

- Subp. 2. Fire inspection. The center must be inspected by a fire marshal within 12 months before initial licensure. The commissioner must not grant an initial license until the commissioner has received written approval of compliance with the Minnesota Uniform Fire Code from the fire marshal with jurisdiction.
- Subp. 3. Reinspection for cause. If the commissioner has reasonable cause to believe that a potential hazard exists, the commissioner may request another inspection and written report by a fire marshal, building official, or health authority to verify the absence of hazard. Any condition cited by a fire marshal, building official, or health authority as hazardous or creating an immediate danger of fire or threat to health and safety must be corrected before a license is issued or renewed.
- Subp. 4. Facility floor plan and designated areas. Indoor and outdoor space to be used for child care must be designated on a facility floor plan. This space must be exclusively used for child care by the center during the hours of operation. The initial application for licensure and the center's administrative record must contain a floor plan of the center. Precise scale drawings are not required. The plan must indicate the:
- A. dimensions and location of all areas of the center designated for the provision of child care;
 - B. planned use of each area; and
 - C. size and location of areas used for outdoor activity.
- Subp. 5. Child's personal storage space. A center must have storage space for each child's clothing and personal belongings. The space must be at a height appropriate to the age of the child.
- Subp. 6. Space for children who become sick. Space must be provided in the center for a child who becomes sick at a center not licensed to operate a sick care program under part 9503.0085. The space must be separate from activity areas used by other children. A cot and blanket must be provided. The space must be within sight and hearing of a staff person and supervised by a staff person when occupied by a sick child.
- Subp. 7. Outdoor activity area. An outdoor activity area that complies with the following items must be provided or available for all child care programs except those licensed to exclusively provide sick care as specified in part 9503.0085, drop in care as specified in part 9503.0075, and those operating for less than three hours a day.
- A. A center must have an outdoor activity area of at least 1,500 square feet, and there must be at least 75 square feet of space per child within the area at any given time during use.
- B. An outdoor activity area used daily by children under school age must be within 2,000 feet of the center or transportation must be provided by the license holder. In no case, however, shall the outdoor activity area be farther than one-half mile from the center.
- C. The area must be enclosed if it is located adjacent to a traffic, rail, water, machinery, or other environmental hazard, unless the area is a public park or playground.
- D. The area must be free of litter, rubbish, toxic materials, water hazard, machinery, animal waste, and sewage contaminants.
- E. The area must contain the outdoor large muscle equipment required by part 9503.0065.
- Subp. 8. Telephone; posted numbers. A telephone that is not coin operated must be located within the center. A list of emergency numbers must be posted next to the telephone. The 911 emergency number, when available, must be posted. If a 911 emergency number is not available, the numbers listed must be

those of the local fire department, police department, emergency transportation, and poison control center.

- Subp. 9. Indoor space. The licensed capacity of the center must be limited by the amount of indoor space. A minimum of 35 square feet of indoor space must be available for each child in attendance. Hallways, stairways, closets, utility rooms, lavatories, water closets, kitchens, and space occupied by cribs may not be counted as indoor space. Twenty-five percent of the space occupied by furniture or equipment used by staff or children may be counted as indoor space.
- Subp. 10. Shielding of hot surfaces. Radiators, fireplaces, hot pipes, and other hot surfaces in areas used by children must be shielded or insulated to prevent burns.
- Subp. 11. Electrical outlets. Except in a center that serves only school age children, electrical outlets must be tamper proof or shielded when not in use.
- Subp. 12. Water hazards. Bodies of water within or adjacent to the center must be inaccessible to children. When using a pool or beach, children must be supervised at all times. When children use a swimming pool, as defined in chapter 4717, or a beach, an attendant trained in first aid and resuscitation must be present. Any public swimming pool, as defined in chapter 4717, used by children must meet the requirements of chapter 4717.
- Subp. 13. Room temperature. A minimum temperature of 68 degrees Fahrenheit must be maintained in indoor areas used by children.
- Subp. 14. Sewage disposal. Centers must have sewage disposal systems that conform to chapter 7080 or a local sewage disposal system ordinance.
- Subp. 15. Hazardous areas. Kitchens, stairs, and other hazardous areas must be inaccessible to children except during periods of supervised use.
- Subp. 16. Fire extinguisher inspection. Fire extinguishers must be serviced annually by a qualified inspector. The name of the inspector and date of the inspection must be written on a tag attached to the extinguisher.
- Subp. 17. Screens. Outside doors and windows used for ventilation must be screened to provide protection from insects.
- Subp. 18. Toilets and hand sinks. Toilets and hand sinks must be provided as specified in items A to H:
- A. The center must have at least one hand sink and one toilet for each 15 children or portion of 15 children specified in the licensed capacity. One toilet training seat or training chair must be provided for every 15 toddlers specified in the licensed capacity. Any hand sink required for children, other than infants, must be in the toilet area.
- B. In newly constructed centers or those undergoing major remodeling to the plumbing system, foot or wrist operated sinks must be provided in the diaper changing area.
- C. Toilets and hand sinks designated for use by children under school age must be available either on the floor used by the children or on an adjacent floor no more than eight steps up or down from the floor used by the children.
- D. Hand sinks for children must not be used for custodial work or food preparation.
- E. The temperature of hot water in the hand sinks used by children must not exceed 120 degrees Fahrenheit.
- F. Single service towels or air dryers must be available to dry hands and designed for easy use by the children.
- G. Toilets, sinks, faucets, and hand drying devices in the toilet area used by children under school age other than infants must be placed at a height appropriate to the ages of the children.
- H. Portable steps may be used to meet the requirement in item G for toddlers and preschoolers, if the steps are sturdy and washable.

9503.0155 CHILD CARE CENTERS

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2

History: 13 SR 173

9503.0170 LICENSING PROCESS.

- Subpart 1. License required. A person, corporation, partnership, voluntary association, or other organization may not operate a child care program in a center unless licensed by the commissioner under parts 9503.0005 to 9503.0170.
- Subp. 2. Separate licenses. Applicants and license holders must have a separate license for each center where a child care program is provided.
- Subp. 3. Posting license. A license holder must post the license in a conspicuous place within the child care center.
- Subp. 4. Change in license terms. The license holder must apply to the commissioner and a new license must be issued before the license holder:
 - A. moves the center to another facility;
- B. changes, sells, or transfers ownership or responsibility for the operation of the center;
 - C. changes the licensed capacity of the center;
 - D. changes the ages of children served; or
- E. changes the child care program options provided by the license holder.
- Subp. 5. Commissioner's right of access. The commissioner must be given access to the center, including grounds, documents, persons served by the child care program, and staff persons in accordance with Minnesota Statutes, section 245A.04, subdivision 4.
- Subp. 6. Variances. An applicant or license holder may request a variance to parts 9503.0005 to 9503.0170 with the exception of those specified in item D if the request follows the procedures and standards specified in items A, B, and C.
- A. The request must be made in writing to the commissioner and must specify:
 - (1) the provision for which a variance is requested;
 - (2) the reasons the license holder cannot comply with the provision;
- (3) the period of time, not to exceed one year, for which the variance has been requested; and
- (4) the equivalent measures the applicant or license holder will take to ensure the health, safety, or rights of children in care.
- B. The commissioner may grant a variance if the commissioner determines that granting the variance would not adversely affect the health, safety, and rights of the children enrolled in the center.
- C. In determining whether a variance request may be granted, the determination of the commissioner is final and not subject to appeal.
- D. A variance will not be granted from any law or rule prohibiting the maltreatment of children including but not limited to illegal or unauthorized use of physical, mechanical, or chemical restraint; the illegal or unauthorized use of aversive or deprivation procedures; corporal punishment; and parts 9503.0005, subpart 25 (supervision); 9503.0030, subpart 3 (disqualification factors); 9503.0040 (staff ratios and group size); 9503.0050, subpart 3 (confinement limitation); 9503.0055 (prohibited actions); 9503.0070, subpart 6 (staffing); 9503.0080 (exclusion of sick children); 9503.0085 (sick care program); 9503.0130, subparts 1 and 2 (reporting); 9503.0140, subpart 17 (hazardous objects); 9503.0145, subpart 3 (sanitation); 9503.0150 (transportation); and 9503.0155, subparts 1 (occupancy designation), 2 (fire inspection), and 3 (reinspection for cause).
 - Subp. 7. Correction orders and fines. If the commissioner finds that the

license holder does not comply with parts 9503.0005 to 9503.0170, the commissioner may issue a correction order as set forth in Minnesota Statutes, section 245A.06, subdivisions 1 and 2. If the license holder has not corrected the violation within the time set for correction, the commissioner may impose a fine under Minnesota Statutes, section 245A.06, subdivisions 3 to 6. Fines must be assessed as follows:

- A. The license holder shall forfeit \$1,000 for each occurrence of violation of law or rule prohibiting the maltreatment of children, including but not limited to illegal or unauthorized use of physical, mechanical, or chemical restraint; illegal or unauthorized use of aversive or deprivation procedures; corporal punishment; and any violation of part 9503.0055, subpart 3.
- B. The license holder shall forfeit \$200 for each occurrence of a violation of law or rule governing matters of health, safety, or supervision, including but not limited to failure to comply with parts 9503.0005, subpart 25 (supervision); 9503.0030, subpart 3 (disqualification factors); 9503.0035, subpart 1 (orientation training); 9503.0040 (staff ratios and group size); 9503.0050, subpart 3 (confinement limitation); 9503.0070 (night care program), subpart 6 (staffing); 9503.0080 (exclusion of sick children); 9503.0085 (sick care program); 9503.0125, items A to I (children's records); 9503.0130, subparts 1 and 2 (reporting); 9503.0140 (health); 9503.0145 (food and water); 9503.0150 (transportation); 9503.0155 (facility); and 9503.0170, subparts 4 (change in license terms) and 5 (commissioner's right of access).
- C. The license holder shall forfeit \$100 for each occurrence of a violation of parts 9503.0005 to 9503.0170, except those specified in items A and B.

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2 **History:** 13 SR 173

9503.0175 EFFECTIVE DATES AND REPEALER.

Subpart 1. Effective date. Parts 9503.0005 to 9503.0170 are effective six months after their notice of adoption is published in the State Register (January 25, 1989), except as those parts apply to a person, corporation, partnership, voluntary association, or other organization who applies for licensure to operate a sick care program. In that case, parts 9503.0005 to 9503.0170 are effective five working days after their notice of adoption is published in the State Register (August 1, 1988).

Subp. 2. Repealer. Parts 9545.0510 to 9545.0670 are repealed six months after the notice of adoption of parts 9503.0005 to 9503.0170 is published in the State Register (January 25, 1989).

Statutory Authority: MS s 245A.02 subd 10; 245A.09 subd 1; 252.28 subd 2

History: 13 SR 173