

DPHHS Policy Manual: Child Care Licensing  
Licensing Key Indicator System for Child Care Facilities

**I. Legal Authority**

Legal authority for licensure and inspection of child care facilities is granted by the MCA 52-2-733.

**II. Policy**

Pursuant to MCA 52-2-733, the Montana Department of Public Health and Human Services (Department or DPHHS) may investigate and inspect the conditions and qualifications of any child care center, group child care home or family child care home seeking or holding a license or registration certificate issued by the Montana DPHHS. Further, the Department must visit and inspect 100% of all licensed and registered child care facilities prior to issuing a new license or registration and annually thereafter. Through the use of the Licensing Indicator System, child care facilities that meet criteria for eligibility will receive an annual inspection using a licensing indicator system survey instrument that measures compliance based on a statistically significant subset of regulations. Eligibility will be determined by the Department and is not subject to demand or appeal.

**III. Purpose**

The purpose of this policy is to provide a uniform and consistent procedure for implementation of the Licensing Indicator System.

The purpose of the Licensing Indicator System is to increase the efficiency and effectiveness of the licensing program and aid with high Child Care Licensing Worker caseloads by refocusing the emphasis of the licensing process. Through the use of the licensing indicator system, less time is spent conducting annual survey visits in child care facilities with a history of high regulatory compliance and more time is spent conducting more in-depth surveys and providing technical assistance to child care facilities with a history of low regulatory compliance.

The licensing indicator system complements, but does not replace, the current licensing program.

**IV. Background**

The licensing indicator system is a shortened version of a comprehensive licensing inspection process. The licensing indicator system uses a tool designed to measure compliance with a small number of regulations that predicts compliance with all the regulations. The indicator regulations are selected based upon a statistical methodology, designed for this specific purpose. If a child care facility is in complete compliance with all the regulations selected and measured in the licensing indicator tool, high compliance with all the regulations is statistically predicted.

The regulations selected by the statistical methodology may not be the most common violations; rather, they likely are those regulatory violations found most often in facilities with low compliance but are not violations found in facilities with high compliance levels. In other words, the regulations that are found most often out of compliance in low compliance child care facilities and in compliance in high compliance child care facilities are typically the indicator or predictor regulations.

The basis for the design and development of the Licensing Indicator System is a methodology published by the National Association for Regulatory Administration (NARA) and developed in conjunction with the U.S. Department of Health and Human Services and Pennsylvania State University

## V. Development and Implementation

Licensing data from January 2013 through December 2015 was taken from the Montana Department of Public Health and Human Services data base of violations cited at regular inspections from all licensed child care homes, group child care homes and child care centers to determine the indicator regulations.

Based on the regulatory violations found in the sample, and using a well-tested statistical methodology, a list of key indicator regulations were identified for each facility type. These indicator regulations are the regulations that are found most often out of compliance in low compliance child care homes/centers and in compliance in high compliance child care homes/centers.

In order to assure that full compliance with all regulations is maintained, additional regulations are selected by the Program Manager to be measured during each indicator survey. Three additional regulations will be selected at random and a number of other regulations will be added to ensure compliance with federal regulations. The additional rules will change periodically as determined by the Program Manager.

## VI. Criteria for Use of the Indicator System

- A. In making a determination whether a child care facility is eligible for an indicator survey, the Child Care Licensor will confirm the following:
- The provider has undergone at least one license renewal with no gap in license effective dates to date;
  - The provider has not had a change in ownership within the past year;
  - The provider has not been removed from the R&R Referral list for any actions enumerated in CCL-009;
  - The provider has not had a validated complaint in the last year with a deficiency that **significantly** affects or threatens the health or safety of a child in care. Examples may include, but are not limited to: incidents of elopement, injury of a child in care that resulted in a deficiency, repeat or ongoing deficiencies, and use of inappropriate discipline.

- There has been no negative licensing action against the licensee within the last two years
- All previous violations have been corrected and support plans have been completed.

CCL should also take into consideration if orientation training is complete and teaching staff are current on the MT ECP Practitioner Registry.

CCL should also confirm renewal application was received timely and is complete if applicable.

- B. If the provider meets the criteria as indicated in A, then the provider may be eligible for a key indicator survey.
- C. A full renewal inspection must be conducted every third year, prior to expiration of the license.
- D. All surveys are unannounced. In addition, use of the key indicator survey is not revealed at the beginning of the licensing visit. The Provider is informed that a Key Indicator survey was conducted at the exit conference.
- E. Indicators will be reviewed every three years.
- F. A provider may not request that a key indicator inspection be performed; nor may the determination that they are ineligible be subject to review or appeal.

## **VII. Survey Procedure**

### **A. Selection of Eligible Providers and Scheduling**

1. Prior to the anniversary date of the license, the Child Care Licensors will review the facility record as well as information in the Child Care Under the Big Sky (CCUBS) data base and apply the eligibility criteria outlined in Section VI. A to determine if the licensee is eligible for a key indicator survey.
2. If the licensee meets each of criteria outlined in VI. A. then the licensee is eligible for a key indicator survey.
3. If the Child Care Licensors are unclear whether a facility is eligible for a key indicator survey, he/she should consult the Lead Worker or Program Manager.
4. The Child Care Licensors select the appropriate licensing tool for the key indicator survey or full survey, as applicable.

**B. Conducting the Licensing Indicator Survey**

1. Upon arriving at the facility, a complete walk through of the entire facility is to be conducted.
2. During the walk through, if the Child Care Licensor observes gross non-compliance or identifies a deficiency which significantly affects or threatens the health or safety of a child in care, then the key indicator survey is abandoned and a full inspection will be conducted.
3. The Child Care Licensor must focus on reviewing and assessing compliance with the licensing indicator regulations. It is critical to stay within the scope of the indicator survey and assess compliance with the licensing indicator regulations and not drift into completing a full survey.
4. The Child Care Licensor must observe child care practices and ask questions in order to determine compliance. As necessary the Child Care Licensor will refer to interpretive guidelines to assist with measuring compliance with each regulation on the indicator survey tool.
5. During the indicator survey, if more than five violations of indicator regulations are found, the indicator survey is ended and a regular annual survey is conducted. Each deficiency is counted as one violation regardless of how many instances of that deficiency exist.
6. During the indicator survey, if a deficiency which significantly affects or threatens the health or safety of a child in care is observed, the Child Care Licensor should go into a full survey. Examples include incidents of elopement, injury of a child in care that resulted in a deficiency, and use of inappropriate discipline.
7. If during the assessment of the indicator regulations, additional noncompliance is observed not on the indicator survey tool it should not be cited.
8. During and after the survey, the Child Care Licensor will provide consultation and technical assistance as needed on regulations and whatever issues are relevant to the provider.
9. The Child Care Licensor documents his/her findings that resulted in the inspection being moved to a full survey. The Licensor may consult with the Program Manager or Lead Worker for additional guidance. The documentation should be put in SansWrite notes on the inspection tool.
10. Document findings of noncompliance and issue the Statement of Deficiency in accordance with DPHHS Policy Section CCL-017.

## Appendix A

### Key Indicators for Family and Group Facilities

| <b>Family and Group Child Care Facilities Regulation</b>  |
|---|
| <p>37.95.115(1)*</p> <p>(1) The following written information shall be made available to all parents:</p> <ul style="list-style-type: none"> <li>(a) a typical daily schedule of activities;</li> <li>(b) admission requirements, enrollment procedures, hours of operation;</li> <li>(c) frequency and type of meals and snacks served;</li> <li>(d) fees and payment plan;</li> <li>(e) regulations concerning sick children;</li> <li>(f) transportation and trip arrangements;</li> <li>(g) discipline policies; and</li> <li>(h) department day care licensing requirements.</li> </ul>  |
| <p>37.95.141(2)</p> <p>(2) The facility shall have a master list of the name, address, and phone number of all children in their care and their parents.</p>  |
| <p>37.95.128(1)a-d*</p> <p>(1) A day care facility must have on file a health record form, provided by the department, concerning any special health risks that would affect other children. This must be obtained and kept on file by the provider prior to residence or enrollment of any child under age two at the day care facility. The health record form must be signed by:</p> <ul style="list-style-type: none"> <li>(a) a physician licensed to practice medicine in Montana pursuant to Title 37, chapter 3, MCA; or</li> <li>(b) a physician assistant-certified licensed to practice in Montana and practicing under a utilization plan approved by the board of medical examiners; or</li> <li>(c) a person licensed in Montana as a professional nurse and recognized by the board of nursing as a nurse practitioner or clinical nurse specialist; or</li> <li>(d) a naturopathic physician licensed under Title 37, chapter 26, MCA.</li> </ul> |
| <p>37.95.708(3)</p> <p>(3) Telephone numbers of the parents, the hospital, police department, fire department, ambulance, and the Emergency Poison Control Center (1 (800) 222-1222) must be posted by each telephone.</p>  |
| <p>37.95.183(2)a-g*</p> <p>(2) A first aid kit must be kept on site at all times and must at a minimum contain:</p> <ul style="list-style-type: none"> <li>(a) unexpired syrup of ipecac (one ounce bottle) which may be administered only upon directive from the Emergency Montana Poison Control Center or upon directive of the local emergency service program (i.e., 911 operator, local hospital, or physician) ;</li> <li>(b) sterile, absorbent bandages;</li> <li>(c) a cold pack;</li> <li>(d) tape and a variety of band-aids;</li> <li>(e) tweezers and scissors;</li> <li>(f) the toll free number for the Emergency Montana Poison Control Center, 1 (800) 222-1222;</li> <li>(g) disposable single use gloves.</li> </ul>   |
| <p>37.95.140(1)-(4)*</p> <p>(1) Before a child under the age of five may attend a Montana day care facility, that facility must be provided with the documentation required by (4) that the child has been immunized as required for the child's age group against measles, rubella, mumps, poliomyelitis, diphtheria, pertussis (whooping cough) , tetanus, and Haemophilus influenza type B, unless the child qualifies for conditional attendance in accordance with (9) : [chart]</p>   |

- (2) If the child is at least 12 months old but not less than 60 months of age and has not received any Hib vaccine, the child must receive a dose prior to entry.
- (3) DT vaccine administered to a child less than seven years of age is acceptable for purposes of this rule only if accompanied by a medical exemption meeting the requirements of ARM 37.114.715 that exempts the child from pertussis vaccination.
- (4) Before a child between the ages of five and 12 may attend a day care facility providing care to school aged children, that facility must be provided with documentation required by (5) that the child has been immunized as required for the child's age group against measles, rubella, mumps, poliomyelitis, diphtheria, pertussis (whooping cough) , tetanus, and Haemophiles influenza type B, unless the child qualifies for conditional attendance in accordance with (9). [chart]

## 37.95.705(5)

- (5) All rooms used for napping by children must have at least two means of escape, at least which shall be a door or a stairway providing a means of unobstructed travel to the outside of the building at street or ground level to the public way. The second means of one of escape may be a window which meets the egress requirements of (2) .

## 37.95.705(9)

- (9) Every bathroom door must be designed to permit the opening of the locked door from the outside in an emergency and the opening device must be readily accessible to the provider.

## 37.95.706(2)

- (2) A fire extinguisher must be easily accessible on each floor level. The minimum level of extinguisher classification is 2A10BC. Fire extinguishers shall be mounted near outside exit doors.

## 37.95.121(3)

- (3) Any pet or animal, present at the facility, indoors or outdoors, must be in good health, show no evidence of carrying disease, and be a friendly companion of the children. The provider is responsible for maintaining the animal's vaccinations and vaccination records. These records must be made available to the department upon request. The provider must make reasonable efforts to keep stray animals off the premises.

## 37.95.141(5)a-d\*

- (5) Prior to a child being enrolled or entered into a day care facility, the following information must be on file:
  - (a) written information on each child explaining any special needs of the child, including allergies;
  - (b) a release or authorization of persons allowed to pick up the child;
  - (c) necessary medical forms, including all medication authorization and administration logs, signed and updated immunization records, and the names of emergency contact persons;
  - (d) an emergency consent form. This form must accompany staff when children are away from the day care site for activities.

## 37.95.121(5)

- (5) The indoor and outdoor play areas must be clean, reasonably neat, and free from accumulation of dirt, rubbish, or other health hazards.

## 37.95.121(6)

- (6) Any outdoor play area must be maintained free from hazards such as wells, machinery, and animal waste. If any part of the play area is adjacent to a busy roadway, drainage or irrigation ditch, stream, large holes, or other hazardous areas, the play area must be enclosed with a fence in good repair that is at least four feet high without any holes or spaces greater than four inches in diameter or natural barriers to restrict children from these areas.

## 37.95.121(1)

- (1) Cleaning materials, flammable liquids, detergents, aerosol cans, and other poisonous and toxic materials must be kept in their original containers and in a place inaccessible to children. They must be used in such a way that will not contaminate play surfaces, food, food preparation areas, or constitute a hazard to the children. Bio-contaminants including blood, bodily fluids, and other infectious materials must be properly disposed of.

## 37.95.708(1)

- (1) Each home must have hot and cold running water with at least one toilet provided with toilet paper and one sink provided with soap and paper towels.

## 37.95.160(1)a-d\*

- (1) The provider shall maintain records regarding each care-giver which include:
  - (a) a record of training and verifiable experience;
  - (b) results of a criminal and protective services background check;
  - (c) personal statement of health and verification of CPR and first aid; and
  - (d) immunization records that establish compliance with ARM 37.95.140.

## 37.95.705(10)

- (10) Protective receptacle covers must be installed on electrical outlets in all areas occupied by children under five years of age.

## 37.95.183(1)\*

- (1) Each provider shall adopt and follow written policies for first aid consistent with recommendations from the American Red Cross. These policies must include but are not limited to:
  - (a) procedures for handling medical emergencies, including calling the Emergency Montana Poison Control center at 1 (800) 222-1222 when a child is suspected of having ingested any poisonous or toxic substance; and
  - (b) directions for calling parents or someone else designated as responsible for the child when a child is sick or injured.

## 37.95.1003(1)

- (1) An individualized diet and feeding schedule shall be provided according to a written plan submitted by the parents or by the infant's physician with the knowledge and consent of the parents, guardian, or placement agency. A change of diet and schedule shall be noted on each infant's daily diet and feeding schedule.

## 37.95.141(1)

- (1) The facility shall keep a daily attendance record of the children for whom care is provided.

## 37.95.706(3)

- (3) All day care facilities must have operating UL smoke detecting devices on each floor of the facility, installed in accordance with the manufacturer's specifications. Smoke detectors must be installed in front of the doors to stairways and in corridors of all floors occupied by the day care. Smoke detectors must be installed in any room in which children sleep.

## 37.95.1001(3)

- (3) Diaper-changing surfaces shall be cleaned after each use by washing or by changing a pad or disposable sheeting and sanitized or covered for reuse.

## 37.95.1005(11)

- (11) Providers must develop a written policy that describes the practices to be used to promote a safe sleep environment when children under age two are napping or sleeping.

## 37.95.1005(12)

- (12) All caregivers shall sign an acknowledgement indicating that they have read and understood the provider's policy outlined in (11).

## 37.95.182(3)\*

- (3) All medications, refrigerated or unrefrigerated, shall:
- (a) have child-protective caps;
  - (b) be kept in an orderly fashion;
  - (c) be stored away from food at the proper temperatures; and
  - (d) kept in a location inaccessible to children or kept in a locked box.

## 37.95.115(2)

- (2) Day care facility shall post a copy of the facility registration or license and the phone number of state and local quality assurance division offices in a conspicuous place. Parents should be encouraged to contact the division if they have questions regarding the license or the day care regulations.

## 37.95.181(4)b

- (4) If the provider/facility elects to administer medication to children, the provider/facility must maintain the following documentation on site:
- (b) A written medication administration policy which includes at a minimum:
    - (i) types of medication which may be administered; and
    - (ii) medication administration procedures to be followed, including the route of medication administration, the amount of medication given, and the times when medication is to be administered.

## 37.95.139(1)

- (1) The parents of each child admitted to the day care facility shall provide the name of the physician or health care facility the parent wishes to have called in case of an emergency.

## 37.95.140(5)

- (5) Documentation of immunization status for purposes of this rule consists of a completed Montana certificate of immunization form (HPS-101) , including the date of birth, the name of each vaccine provided, and the month, day and year of each vaccination.

## 37.95.141(5)d

- (5) Prior to a child being enrolled or entered into a day care facility, the following information must be on file:
- (d) an emergency consent form. This form must accompany staff when children are away from the day care site for activities.

## 37.95.141(6)

- (6) The information supplied in (5) (a) through (d) must be maintained on forms provided by the department and must be signed by the parent or guardian.

## 37.95.183(4)

- (4) A portable first aid kit containing at least the items listed in (2) must accompany staff and children on trips away from the facility.

## 37.95.1001(8)

- (8) Diapering and toileting areas shall contain a wash basin that is separate from that used for food preparation.

## 37.95.708(5)

- (5) When a municipal water supply system is not available, a private system may be developed and used as approved by the state or local health department. Testing must be conducted at least annually by a certified lab to ensure that the water supply remains safe and the licensee or registrant shall provide laboratory results to the department during the licensing or relicensing process. Sanitary drinking facilities shall be provided by means of disposable single-use cups, fountains of approved design, or separate, labeled or colored glasses for each child.

### Additional Health and Safety Rules for Family and Group Facilities

| Rule          | Ratios and Numbers  |
|---------------|---|
| 37.95.106(6)  | (6) A day care facility may not provide care for more than the number of children permitted at any one time by its day care license or registration certificate.  |
| 37.95.702(2)  | (2) There shall be no more than six children under the age of two in a group day care home or three children under the age of two in a family day care home at any time, unless care is provided exclusively for children under the age of two.   |
| 37.95.702(5)  | (5) Except for approved overlap care, the provider may not provide care for a child if caring for that child would cause the provider to exceed the number of children the provider is registered to care for on the registration certificate.  |
| Safe Sleep    |   |
| 37.95.1005(1) | (1) There must be adequate opportunities for sleep during the day suited to the infant's and toddler's individual needs.  |
| 37.95.1005(2) | (2) Unless the parent has provided medical documentation from health care provider ordering otherwise, children under age two shall be placed on their back and on a firm surface to reduce the risk of sudden infant death syndrome (SIDS).  |
| 37.95.1005(3) | (3) Each infant must be provided with a crib or play pen for sleeping. At the discretion of the parent and provider, a cot or mat may be used once a child turns one year of age as long as a safe sleep environment is provided. Children one year of age through 18 months who are placed on a mat must have a signed permission statement in the file indicating that the parent has given permission for their child to be placed on a mat. When cots and mats are used, an early childhood teacher must remain with the child while they are sleeping. <ul style="list-style-type: none"> <li>(a) Infants and toddlers must not be allowed to sleep in a car seat, infant swing, or other infant apparatus.</li> <li>(b) Cot or mat surfaces may be of plastic or canvas or other material which can be cleaned with detergent solution and allowed to air dry.</li> </ul> |
| 37.95.1005(4) | (4) Cribs must be made of durable, cleanable, nontoxic material, and have secure latching devices. Cribs must have no more than 2 and 3/8 inches of space between the vertical slats. No later than December 28, 2012, all cribs must meet the requirements for full-size baby cribs and non-full-size baby cribs as specified by the Consumer Product Safety Commission at 16 CFR Part 1219 (2011) and 16 CFR Part 1220 (2011), incorporated by these references. A copy of the requirements for full-size baby cribs and non-full-size baby cribs is available at: <a href="https://www.cps.gov/SafeSleep">https://www.cps.gov/SafeSleep</a> , or by contacting the Montana Child Care Licensing Program at P.O. Box 202953, Helena, Montana 59620; Phone: (406) 444-2012.  |
| 37.95.1005(5) | (5) Mattresses must fit snugly to prevent the infant from being caught between the mattress and crib siderail. Crib mattresses must be waterproof and easily sanitized. Cribs, cots, or mats must be thoroughly cleansed before assignment to another infant or toddler.  |
| 37.95.1005(6) | (6) Cribs, cots, or mats must be spaced to allow for easy access to each infant and toddler, adequate ventilation, and easy exit. Aisles between cribs or cots must be kept free of obstructions while cribs or cots are occupied. The use of stackable cribs for infants is permitted until the infants reach one year of age or weigh 26 pounds, whichever comes first.   |
| 37.95.1005(7) | (7) All pillows quilts, comforters, heavy blankets, sheepskins, bumper pads, stuffed toys, and other soft products shall be removed from the crib and play pen. <ul style="list-style-type: none"> <li>(a) If a lightweight blanket is used, the child's feet must be placed at the foot of the crib or play pen and the blanket must be tucked along the sides and foot of the mattress. The blanket should not come up higher than the child's chest.</li> </ul>  |

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|----------------|--|
|                | <p>(b) Sleep sacks and similar safe sleep clothing may be used if the item does not restrict the infant's arms.</p> <p>(c) Infants under 3 months of age may only be swaddled if medical documentation from a health care provider is on file at the facility.</p> <p>(d) Infants over 3 months of age must not be swaddled.</p> |
| 37.95.1005(8)  | (8) Toddlers must be provided a clean washable blanket or other suitable covering for their use while sleeping. Each child's bedding shall be stored separate from bedding used by other children.   |
| 37.95.1005(9)  | (9) All cries of infants and toddlers shall be investigated.   |
| 37.95.1005(10) | (10) The facility must develop a written policy that describes the practices to be used to promote a safe sleep environment when children under age two are napping or sleeping  |
| 37.95.1005(11) | (11) All early childhood teachers must sign an acknowledgement indicating that they have read and understood the facility's policy outlined in (10).   |

### Random Rules for Family and Group Facilities

| Rule            |   |
|-----------------|---|
| 37.95.720(4)    | (4) Each child, except school-age children who do not take naps, shall have clean, age-appropriate rest equipment, such as a crib, cot, bed or mat. Seasonably appropriate top and bottom covering, such as sheets or blankets, must be provided. Crib mattresses and other rest equipment shall be waterproof and regularly sanitized.                 |
| 37.95.121(6)(a) | (a) Outdoor play areas shall be designed so that all parts are always visible and easily supervised by staff.   |
| 37.95.715(1)    | (1) A written plan of daily activities and routines, in addition to free play, must be established. The plan must be flexible to accommodate the ages and needs of individual children and the group as a whole. It must be designed with intervals of stimulation and relaxation, and a balance between periods of active play and quiet play or rest. |

## Appendix B

### Key Indicators for Child Care Centers

| Child Care Centers Regulation   |
|---|
| <p>37.95.141(5)a-d*</p> <p>(5) Prior to a child being enrolled or entered into a day care facility, the following information must be on file:</p> <ul style="list-style-type: none"> <li>(a) written information on each child explaining any special needs of the child, including allergies;</li> <li>(b) a release or authorization of persons allowed to pick up the child;</li> <li>(c) necessary medical forms, including all medication authorization and administration logs, signed and updated immunization records, and the names of emergency contact persons;</li> <li>(d) an emergency consent form. This form must accompany staff when children are away from the day care site for activities.</li> </ul>   |
| <p>37.95.128(1)a-d*</p> <p>(1) A day care facility must have on file a health record form, provided by the department, concerning any special health risks that would affect other children. This must be obtained and kept on file by the provider prior to residence or enrollment of any child under age two at the day care facility. The health record form must be signed by:</p> <ul style="list-style-type: none"> <li>(a) a physician licensed to practice medicine in Montana pursuant to Title 37, chapter 3, MCA; or</li> <li>(b) a physician assistant-certified licensed to practice in Montana and practicing under a utilization plan approved by the board of medical examiners; or</li> <li>(c) a person licensed in Montana as a professional nurse and recognized by the board of nursing as a nurse practitioner or clinical nurse specialist; or</li> <li>(d) a naturopathic physician licensed under Title 37, chapter 26, MCA.</li> </ul> |
| <p>37.95.139(1)</p> <p>(1) The parents of each child admitted to the day care facility shall provide the name of the physician or health care facility the parent wishes to have called in case of an emergency.</p>  |
| <p>37.95.115(1)*</p> <p>(1) The following written information shall be made available to all parents:</p> <ul style="list-style-type: none"> <li>(a) a typical daily schedule of activities;</li> <li>(b) admission requirements, enrollment procedures, hours of operation;</li> <li>(c) frequency and type of meals and snacks served;</li> <li>(d) fees and payment plan;</li> <li>(e) regulations concerning sick children;</li> <li>(f) transportation and trip arrangements;</li> <li>(g) discipline policies; and</li> <li>(h) department day care licensing requirements.</li> </ul>  |
| <p>37.95.141(2)</p> <p>(2) The facility shall have a master list of the name, address, and phone number of all children in their care and their parents.</p>  |
| <p>37.95.1005(12)</p> <p>(12) All caregivers shall sign an acknowledgement indicating that they have read and understood the provider's policy outlined in (11).</p>  |
| <p>37.95.1003(1)</p> <p>(1) An individualized diet and feeding schedule shall be provided according to a written plan submitted by the parents or by the infant's physician with the knowledge and consent of the parents, guardian, or placement agency. A change of diet and schedule shall be noted on each infant's daily diet and feeding schedule.</p>  |
| <p>37.95.141(6)</p> <p>(6) The information supplied in (5) (a) through (d) must be maintained on forms provided by the department and must be signed by the parent or guardian.</p>   |

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| <p>37.95.613(6)</p> <p>(6) Telephone numbers of the parents, the hospital, police department, fire department, ambulance, and the Emergency Montana Poison Control Center (1 (800) 222-1222) must be posted by each telephone.</p>  |
| <p>37.95.140(1)-(4)*</p> <p>(1) Before a child under the age of five may attend a Montana day care facility, that facility must be provided with the documentation required by (4) that the child has been immunized as required for the child's age group against measles, rubella, mumps, poliomyelitis, diphtheria, pertussis (whooping cough) , tetanus, and Haemophilus influenza type B, unless the child qualifies for conditional attendance in accordance with (9) : [chart]</p> <p>(2) If the child is at least 12 months old but not less than 60 months of age and has not received any Hib vaccine, the child must receive a dose prior to entry.</p> <p>(3) DT vaccine administered to a child less than seven years of age is acceptable for purposes of this rule only if accompanied by a medical exemption meeting the requirements of ARM 37.114.715 that exempts the child from pertussis vaccination.</p> <p>(4) Before a child between the ages of five and 12 may attend a day care facility providing care to school aged children, that facility must be provided with documentation required by (5) that the child has been immunized as required for the child's age group against measles, rubella, mumps, poliomyelitis, diphtheria, pertussis (whooping cough) , tetanus, and Haemophilus influenza type B, unless the child qualifies for conditional attendance in accordance with (9). [chart]</p> |
| <p>37.95.622(6)a-c*</p> <p>(6) An aide must be directly supervised by a primary care-giver and shall be at least 16 years of age and must:</p> <ul style="list-style-type: none"> <li>(a) have sufficient language skills to communicate with children and adults; and</li> <li>(b) have at least one day of on-the-job orientation; and</li> <li>(c) successfully complete a minimum of at least eight hours of verified education or training annually as required in ARM 37.95.162.</li> </ul>   |

### Additional Health and Safety Rules for Child Care Centers

| Rule             | Ratios and Numbers  |
|------------------|---|
| 37.95.106(6)     | (6) A day care facility may not provide care for more than the number of children permitted at any one time by its day care license or registration certificate.  |
| 37.95.141(1)     | (1) The facility shall keep a daily attendance record of the children for whom care is provided.  |
|                  | <b>Safe Sleep</b>   |
| 37.95.1005(2)    | (2) Unless the parent has provided medical documentation from health care provider ordering otherwise, children under age two shall be placed on their back and on a firm surface to reduce the risk of sudden infant death syndrome (SIDS).  |
| 37.95.1005(3)(a) | (a) Infants shall not be routinely allowed to sleep in a car seat, infant swing or other apparatus.   |
| 37.95.1005(7)    | (7) All pillows quilts, comforters, heavy blankets, sheepskins, bumper pads, stuffed toys, and other soft products shall be removed from the crib and play pen.<br>(a) If a lightweight blanket is used, the child's feet must be placed at the foot of the crib or play pen and the blanket must be tucked along the sides and foot of the mattress. The blanket should not come up higher than the child's chest. |

### Random Rules for Child Care Centers

| Rule            |  |
|-----------------|--|
| 37.95.613(4)    | (4) Each child, shall have clean, sanitized and age-appropriate rest equipment. Seasonably appropriate covering, such as sheets or blankets, for a crib, cot, bed or mat must be provided. Crib mattresses and other rest equipment shall be waterproof and regularly sanitized. |
| 37.95.121(6)(a) | (a) Outdoor play areas shall be designed so that all parts are always visible and easily supervised by staff.  |
| 37.95.121(7)    | (7) Toys, play equipment, and any other equipment used by the children must be of substantial construction and free from rough edges, sharp corners, splinters, unguarded ladders on slides, and must be kept in good repair and well maintained.                                |