This is a summary of changes to the regulations that took effect on March 19, 2021. As a licensed provider, you are responsible for compliance with all of the regulations to ensure the safety, health and development of the children in your care. A full copy of the regulations may be obtained by visiting the Office of Early Childhood (OEC) website at https://www.ctoec.org/licensing/statutes-and-regulations.

Section 19a-87b-2. Definitions

- Expands the definitions of "child" and "school age" to include persons under twenty one with special needs
- Clarifies that customary business hours means those hours reported to the Office and includes scheduled and unscheduled days off regardless if children are in care
- Makes changes consistent with the transition of licensing from the Department of Public Health to the Office of Early Childhood
- Changes "family day care home" to "family child care home"
- Specifies that "night care" means family child care services provided for one or more hours between the hours of 10:00 pm and 5:00 am
- Eliminates the term "registration" and replaces it with "license" and "registration" with "licensure"
- Adds and modifies several definitions

Section 19a-87b-3. Application for a license to operate

• Adds great grandparents and foster parents to the list of relatives that are not required to be licensed

Section 19a-87b-5. Terms of the license

- Specifies that records pertaining to an applicant's or provider's compliance with the child care center or group child care home licensing regulations may be considered when determining an applicant's or provider's suitability for family child care home licensure
- Specifies that a provider may not use an approved substitute for more than one hour per day on a regularly, recurring basis
- Specifies what a licensed provider must do to change the residence to which the license is issued and indicates that if a licensed provider operates a family child care home at a new residence prior to OEC approval, fails to submit an application, arrange or complete an inspection or obtain approval by the OEC, they may be subject to penalties for operation without a license
- Allows for the continued enrollment of three additional school age children in the summer provided an approved staff member is present
- Reduces the restriction of infants and toddlers to children under the age of eighteen months vs. two years
- Clarifies that the approved assistant must be assisting the provider in order for the provider to care for more than two children under the age of eighteen months at one time
- The provision for a separate variance has been eliminated
- Clarifies that the records that must be made accessible to the OEC staff during visits are those records required by the regulations and that a provider, substitute and assistant shall, upon request, show photo identification
- Specifies that an applicant and provider shall respond to OEC's request for information or documentation regarding compliance with the licensing regulations and failure to do so shall constitute grounds for denial or discipline of the license
- Specifically identifies that the installation of a pool, a change in customary hours, criminal convictions or DCF investigation of the provider, staff or household members are circumstances that shall be reported to the OEC in writing within five working days

Section 19a-87b-6. Qualifications of the applicant and provider

- Eliminates the requirement for the provider to submit to the OEC a medical statement every two years but rather requires the provider to maintain on file at the family child care home a medical statement that has been completed within the past three years
- Eliminates the requirement for a tuberculosis test to be part of the medical statement
- The OEC will no longer approve first aid courses. All first aid courses by the ARC, AHA, National Safety Council, American Safety and Health Institute, Medic First Aid International, Inc. and approved by the OEC as of March 17, 2018 will be acceptable.
- Current certification in cardiopulmonary resuscitation (CPR) is added to the training required for a family child care home provider
- Clarifies that current first aid and CPR certification shall be based on a hands-on demonstration and verification of such certifications shall be kept on file at the family child care home
- Requires references to be current
- Specifies the records that may be considered when evaluating the suitability of an individual to operate a family child care home
- Specifies that the applicant or provider shall not knowingly furnish any false documents or make any false or misleading statements to the OEC

Section 19a-87b-7. Members of the household

• The requirement for a tuberculosis test for adults has been eliminated

Section 19a-87b-8. Qualifications of staff

- Specifies that the an assistant must not only be present but must also be assisting the provider in order for more than two children under the age of eighteen months to be present
- Changes the time in which the emergency caregiver has to be able to arrive to the family child care home from ten minutes to fifteen
- Clarifies the requirements that must be met by substitutes and assistants; substitutes must maintain current CPR certification

Section 19a-87b-8a. Comprehensive Background Check

- Specifies that the applicant, provider, prospective employees (e.g. assistants and substitutes) and each household member must comply with the requirements pertaining to comprehensive background checks and such persons shall not have a record that deems them ineligible
- Requires the provider to maintain at the family child care home evidence of compliance with background check requirements
- Information regarding background checks for the applicant, provider, staff and household members shall be provided to the OEC upon request and failure to do so shall constitute grounds for denial or discipline against the license
- Specifies the components of the comprehensive background check

Section 19a-87b-9. Requirements for the physical environment

- Examples of potentially harmful substances and materials that must be made inaccessible have been included
- Examples of bio contaminants are provided and it is specified that they shall be disposed of in a safe manner according to manufacturer's instructions
- Specifies that electrical cords and appliances shall be secured and electrical cords shall not hang within reach of children
- It is clarified that approved safety outlets are acceptable and electrical receptacles shall protected in all areas accessible to children

- The exact measurements and location that a window must have to be an acceptable second means of escape are now specified
- Stairs shall not have fall through zones
- Other structures, in addition to gates, are now acceptable to protect children from falls. Only protection at the entry of stairs is required
- An allowance for the absence of the placement of gates is now specified when only school age children are in care
- The content of the emergency plan is now specified
- A carbon monoxide detector on each occupied level of the home is now required
- A fire extinguisher that is more than five pounds is now acceptable and the regulations specifically state that the provider shall be able to manage its use
- It has been clarified that fire extinguishers must be installed according to the manufactures instructions which may not include the use of hangers or brackets, and they may be installed out of view provided they are immediately accessible
- Specifies that all heating systems and devices shall not pose a hazard to children
- Ammunition shall be locked
- The storage of guns and weapons in the home shall be known to the provider
- In addition to key and combination locks, other similar locking mechanisms that prevent access for guns and weapons are accepted
- When outdoor play space does not exist, the conditions for an alternate outdoor play space are specified
- The acceptable methods by which bodies of water must be protected are clearly specified
- No children shall be permitted in a hot tub, spa or sauna and such facilities shall be kept locked and inaccessible to children
- When the temperature exceeds eighty degrees, the operator must provide more fluids and increase ventilation. The minimum temperature that the facility must maintain has been lowered from 68 degrees to 65 degrees and the location at which the temperature shall be measured is specified.
- Measures to prevent children from falling from accessible windows above the ground floor shall be implemented
- The temperature of the water maintained at the tap must be between 60 and 120 degrees Fahrenheit
- A mechanism for individual hand drying shall be made accessible
- All family child care home applicants shall submit lead water tests, and those with wells need additional testing. The site for water testing and method for testing water are specified. The analysis of water samples shall be conducted by a registered environmental laboratory
- Milk not pasteurized is no longer permitted
- Emergency numbers may be posted out of view but shall be readily accessible in an area of the home used for child care and known to the provider and staff
- Specifically indicate that providers shall comply with all motor vehicle laws when transporting children
- The contents of the required first aid kit is now specified
- Required first aid supplies for field trips is now specified
- Specifies that animal waste shall be kept inaccessible to children and if the pet is known to be dangerous or aggressive, the provider shall implement a written plan to keep the animal inaccessible to children
- The provider, household member, staff member or other person shall not smoke or use an electronic nicotine delivery system or vapor product when enrolled children are present

Section 19a-87b-10. Responsibilities of the provider and substitute

- Enrollment forms shall include the parent(s) place and telephone number of employment and emergency contact numbers
- Specifically indicates that the school age child's physical examination and health assessment form that is accepted for school purposes is acceptable

- Provisions for temporary waivers of the physical examination requirement are provided when a child is homeless or is a foster child
- The content of the written parent permission is more clearly specified. Written parent permission for any activity away from the family child care home and for transitioning children to and from school are required.
- The requirements related to the maintenance of the incident log are more clearly spelled out
- Indoor and outdoor equipment shall be available for the children's use. All manufacturer guidelines shall be followed for equipment, furniture and toys that are accessible to children and shall be repaired or removed if identified as unsafe or subject to recall by the United States Consumer Product Safety Commission
- Drinking water shall be made available and offered to children throughout the day
- The provider, staff and children shall wash their hands with soap and water before eating, handling food and after toileting
- Requires the provider to develop a written schedule and now specifies that such plan include outdoor play
- Specifies that the provision for napping or resting shall be age appropriate and shall be utilized
- The regulations now clearly specify that cribs must meet the CPSC requirements and documentation demonstrating compliance must be maintained on site at the program; the specific documentation is specified
- Identifies when an individual plan of care for a child with a disability or special health care need is needed and that such plan shall include appropriate care of the child in the event of an emergency and be signed by the provider, staff and the parent(s)
- Safe sleep practices for infants are clearly specified, shall be posted in the family child care home and discussed with parent(s)
- Swaddling is prohibited unless there is documented instructions and timeframe from a physician, PA or APRN
- The frequency and purpose of physically observing sleeping infants is specified
- Specifies that the hands of the provider and child shall be washed with soap and water after each diaper change, that the diapering surface shall be non-porous and disinfected after each use
- Requires the provider share with parent(s) of enrolled children the dates and times that staff will be used as part of the family child care home
- Requires the provider post a document regarding developmental milestones created by the OEC
- Requires the provider furnish to parents notice of toxic level(s) of lead identified on defective surfaces at the family child care home
- Specifies that the provider shall be either indoors or outdoors with all the day care children unless an approved staff is present to supervise
- Specifies that a monitoring device shall not replace supervision by the provider
- Adds excessive use of telephones, computers or television to the list of activities prohibited while providing child care services
- Specifically lists spanking, slapping, pinching, shaking and striking children as prohibited practices
- Adds diagnosed fractures, diagnosed second or third degree burns and diagnosed concussions to the list of conditions that must be reported to the OEC and changes the time period by which the provider must report from twenty four hours to the next business day
- Allows an enrolled child to continue to attend the family child care home for thirty days past the due date for immunization records
- The qualifications of persons who may acknowledge a written statement that immunization is contrary to religious beliefs are specified
- Allows for a temporary waiver of the immunization requirement when a child is homeless or is a foster child

Section 19a-87b-12. Night care

- The exact hours for which additional night care requirements apply is specified as for one or more hours between the hours of 10pm to 5am
- Clarifies that a cot is not considered to be a bed
- Allows siblings to share a room when sleeping with written parent permission

Section 19a-87b-13. Office access, inspections and investigations

- Clarifies that the provider, assistant, emergency caregiver and substitute must grant the OEC staff access to the family child care home to perform an inspection and such access shall be immediate during customary business hours
- Specifies that the photo identification of the OEC staff member shall be provided upon request
- Specifies that a provider's failure to respond to OEC requests to schedule an inspection may be grounds for license suspension or revocation

Section 19a-87b-17. Administration of medications

- Nonprescription topical medications shall only be administered in accordance with written parental permission
- The maintenance of a medication administration record for nonprescription topical medications is no longer required
- The regulations now specify that the notification of medication errors to the parent(s) shall occur immediately and written notification shall occur no more than 72 hours after the medication error occurred and the error shall be documented
- A Connecticut licensed pharmacist has been added to the list of acceptable medication administration trainers
- Medication administration training required is now specific to the type of medication being administered. The need to submit a request to the OEC for the administration of rectal medication and medications other than by a premeasured commercially prepared auto-injector is no longer required; specified training is required
- Recognizes current certification by the State of Connecticut Department of Developmental Services or the State of Connecticut Department of Children and Families to administer medications
- Significant medication errors shall be reported to the OEC by telephone and in writing no later than the next business day
- Permits emergency equipment and medications to be stored unlocked to allow for quick access provided it is inaccessible to children
- The regulations now require that the written record of any medications destroyed shall be maintained at the facility for three years
- Specifies conditions when the parent(s) shall provide and maintain emergency equipment
- Allows for children to self-administer medication with documented permission from the parent(s) and authorized prescriber
- Eliminates the language pertaining to the disciplinary actions that the OEC may take against a license as these provisions are already specified in statute and regulation.

Section 19a-87b-18. The monitoring of diabetes in family child care homes

• Allows for the daily parental notice of blood glucose test results and action taken to be in a form other than in writing