

1 State Board of Education

2 Action to Adopt New Standards for Licensed Child Day Centers

3 Chapter 780

4 Standards for Licensed Child Day Centers (REPEALED)

5 Chapter 781

6 Standards for Licensed Child Day Centers

7 Part I

8 INTRODUCTION

9 **8VAC20-781-10. Definitions.**

10 The following words and terms when used in this chapter shall have the following meanings
11 unless the context clearly states otherwise:

12 "Abusive head trauma" means a traumatic injury that is inflicted on the brain of a child,
13 including Shaken Baby Syndrome.

14 "Age and stage appropriate" means the curriculum, environment, equipment, and adult-child
15 interactions are suitable for the ages and the individual needs of children in care.

16 "Attendance" means the actual presence of an enrolled child.

17 "Balanced mixed-age grouping" means a program using a curriculum designed to meet the
18 needs and interests of children in the group and is planned for children who enter the program
19 at three through five years of age. The enrollment in the balanced mixed-age grouping
20 comprises a relatively even allocation of children in each of the ages (three to six years) and is
21 designed for children and staff to remain together with turnover planned only for the
22 replacement of existing students with children of ages that maintain the class balance.

23 "Child" means an individual under 18 years of age.

24 "Child day center" or "center" means a child day program offered to (i) two or more children
25 younger than 13 years of age in a facility that is not the residence of the provider or of any of the
26 children in care or (ii) 13 or more children at any location.

27 "Child day program" means a regularly operating service arrangement for children where,
28 during the absence of a parent or guardian, a person or organization has agreed to assume
29 responsibility for the supervision, protection, and well-being of a child younger than 13 years of
30 age for less than a 24-hour period.

31 "Child with special needs" means a child with developmental disabilities, intellectual
32 disabilities, an emotional disability, sensory or motor impairment, or significant chronic illness
33 who requires special health surveillance or specialized programs, interventions, technologies, or
34 facilities.

35 "Cleaned" means to scrub and wash with (i) soap and water or (ii) detergent solution.

36 "Cooperative preschool center" means a center that is organized, administered, and
37 maintained by parents of children in care, parent volunteers, or other persons who participate or
38 volunteer on behalf of a child attending the center.

39 "Date of employment" means the date that an employee begins to perform services for the
40 child day program, which includes orientation training.

41 "Department" means the Virginia Department of Education.

42 "Director" means the individual responsible for supervising the day-to-day operations and
43 staff of the center.

44 "Enrolled" means that a regular service arrangement has been entered into between a
45 parent and center, where the center has agreed to assume responsibility for the supervision,
46 protection, and well-being of a child under the age of 13 for less than a 24- hour period during
47 the absence of a parent or guardian.

48 "Evening care" means care provided between 7 p.m. and midnight.

49 "Experience in a supervisory capacity" means experience in an administrative position that
50 includes supervising, orienting, training, and scheduling.

51 "Fall height" means the vertical distance between the highest elevated play surface on play
52 equipment designed for standing, walking, crawling, sitting, or climbing and the protective
53 surface beneath it.

54 "Field trip" means an activity away from the premises of the center during which children are
55 under the supervision of the center.

56 "Group" means the group of children under the supervision of one staff member or team of
57 staff members.

58 "Group size" means the number of children assigned to a staff member or team of staff
59 members occupying an individual room or area.

60 "Child experiencing homelessness" means a child who is homeless as defined in section
61 725 of Subtitle VII- B of the McKinney-Vento Act ([42 U.S.C. 11434a](#)).

62 "Individual service, recreation, education or treatment plan" means a plan identifying the
63 child's strengths, needs, general functioning, and plan for providing services to the child to
64 include specific goals and objectives for services, accommodations, and intervention strategies.
65 The individual service, recreation, education or treatment plan clearly shows documentation and
66 reassessment or evaluation strategies.

67 "Infant" means a child from birth up to 16 months.

68 "Lead Teacher" means the individual designated to be responsible for the direct supervision
69 of children and for the implementation of the activities and services for a group of children. The
70 term lead teacher is used to interpret the term "program leader" in Chapter 14.1 of Title 22.1 of
71 the Code of Virginia.

72 "Licensee" means a person to whom a conditional license, a license, or a provisional license
73 has been issued and who is legally responsible for compliance with the licensing standards
74 related to the operation or maintenance of the center.

75 "Overnight care" means care provided after 7 p.m. and past midnight.

76 "Parent" means a parent, guardian, legal custodian, or other person that has control or
77 charge of a child.

78 "Physician's designee" means an advanced practice registered nurse, licensed physician
79 assistant, licensed nurse (R.N. or L.P.N.), or health assistant acting under the supervision of a
80 physician.

81 "Play yard" means a framed enclosure that includes a floor and is primarily intended to
82 provide an area for a child to play.

83 "Preschool age" means a child who is at least three years of age but has not reached five
84 years by September 30 of the school year.

85 "Primitive camp" means a camp where places of abode, water supply system, or permanent
86 toilet and cooking facilities are not usually provided.

87 "Programmatic experience" means the supervision of children in a structured setting.
88 Experience shall be calculated based on full-time work (30 hours per week or more) or its part-
89 time equivalent. Experience settings may include a child day program, family day home, child
90 day center, boys and girls club, continuing education, field placement, elementary school, or a
91 religious institution.

92 "Protective surfacing" means impact absorbing materials for indoor and outdoor use, under
93 and around playground equipment.

94 "Sanitized" means treated to remove germs, bacteria, and viruses from inanimate surfaces.
95 Sanitizing is accomplished in two steps following cleaning; first by using a sanitizing agent or
96 physical agent (e.g., heat), and second, by allowing the sanitizing agent to air dry on the surface
97 for a minimum of two minutes or according to the manufacturer's instructions.

98 "Sanitizing agent" means a solution or wipe approved by the US Environmental Protection
99 Agency for sanitizing or disinfecting or a bleach solution made daily.

100 "School-age" means a child who will have reached his fifth birthday on or before September
101 30 of the school year. Four or five-year-old children may be considered school-age during the
102 summer months if the children will be entering kindergarten that year.

103 "Short-term program" means a child day center that operates less than 12 weeks a year.

104 "Special needs child day program" means a program exclusively serving children with
105 special needs.

106 "Specialty camps" means those centers that have an educational or recreational focus on
107 one subject such as dance, drama, music, or sports.

108 "Staff" or "staff member" means an individual who is at least 16 years of age and (i) works
109 with children at the facility, or (ii) is involved in the day-to-day operation of the center.

110 "Superintendent" means the Superintendent of Public Instruction at the Department of
111 Education and, except when prohibited by law, includes the superintendent's
112 representatives.

113 "Therapeutic child day program" means a specialized program, including therapeutic
114 recreation programs, exclusively serving children with special needs when an individual service,
115 recreation, education, or treatment plan is developed and implemented with the goal of
116 improving the functional abilities of the children in care.

117 "Toddler" means a child from 16 months of age up to 24 months of age.

118 "Twos" means a child from 24 months of age up to 36 months of age.

119 "Use zone" means the surface under and around a piece of equipment onto which a child
120 falling or exiting from the equipment would be expected to land. Use zone areas are also
121 designated for unrestricted circulation around the equipment.

122 "Volunteer" means an individual who is at least 13 years of age; works at a center without
123 compensation; is not counted in the staff-to-child ratios; and is at all times within sight and
124 sound supervision of a staff member when with a child. An unpaid individual not meeting this
125 definition is considered "staff" and shall meet staff requirements.

126 "Wading" means a waterplay activity in which children stand, walk, or sit in water less than
127 two feet deep.

128 **8VAC20-781-20. Purpose and applicability.**

129 A. The purpose of these standards is to protect children under the supervision of licensed
130 child day centers by ensuring that the activities, services, and facilities of centers are conducive
131 to the well-being of children.

132 B. This chapter applies to child day centers that are required to be licensed by Chapter 14.1
133 of Title 22.1 of the Code of Virginia.

134 Part II

135 ADMINISTRATION

136 **8VAC20-781-30. Operational responsibilities.**

137 A. The licensee shall ensure compliance with federal, state, or local laws and regulations.

138 B. The licensee shall maintain public liability insurance for bodily injury for each center
139 premises with a minimum limit of at least \$500,000 for each occurrence and with a minimum
140 limit of \$500,000 aggregate. A public sponsor may have equivalent self-insurance that is in
141 compliance with the Code of Virginia.

142 C. The center shall maintain a written list, for each group of children, of important health
143 conditions and dietary restrictions. The center shall inform staff about the list. The list shall only
144 be accessible to staff and shall have the most recent date of revision clearly stated. This up-to-
145 date list shall be in each room or area where children are present and kept confidential unless
146 written permission is received from the parent to post, display, or share.

147 D. A hospital-operated center may temporarily exceed their license capacity during a natural
148 disaster or emergency situation according to its emergency preparedness and response plan.

149 E. When children 13 years or older are in care of the program and receive supervision in the
150 licensed program, they shall be counted in the number of children receiving care and the center
151 shall comply with this chapter in providing their care.

152 F. When children of staff are present at the facility and engaged in activities or under the
153 supervision of staff, including the parent, who are supervising other children enrolled in the
154 program, the children shall be considered enrolled for purposes of this chapter.

155 G. The center shall implement policies for the possession and administration of
156 undesigned or stock epinephrine pursuant to § 22.1-289.059 of the Code of Virginia that
157 ensure:

158 1. Undesigned or stock epinephrine is only administered by a nurse at the center, an
159 employee of a local health department who is authorized by a prescriber and trained in
160 the administration of epinephrine, or staff at the center authorized by a prescriber and
161 trained in the administration of epinephrine pursuant to 8VAC20-781-170 C to a child
162 believed to be having an anaphylactic reaction;

163 2. At least one nurse at the center or an employee of a local health department who is
164 authorized by a prescriber and trained in the administration of epinephrine, or staff at the
165 center authorized by a prescriber and trained in the administration of epinephrine
166 pursuant to 8VAC20-781-170 C has the means to access at all times during regular
167 facility hours appropriate weight-based dosages of undesigned or stock epinephrine
168 based on the children in care at the center; and

169 3. Undesigned or stock epinephrine is stored in a locked or inaccessible container or
170 area in the center.

171 **8VAC20-781-40. Recordkeeping.**

172 A. Staff and children's records shall be treated confidentially. A child's record required by
173 this chapter shall be made available to the child's parent in accordance with [§ 20-124.6](#) of the
174 Code of Virginia. Information in the child's record shall not be made public without the written
175 consent of the parent.

176 B. Records and reports on children and staff required by this chapter shall be maintained
177 and made accessible for two years after termination of services or separation from employment
178 unless specified otherwise in this chapter.

179 C. The licensee shall keep all records required by 8VAC20-781-50 through 8VAC20-781-80
180 in locked files or a secure electronic file, except for those required to be accessible pursuant to
181 8VAC20-781-590; and access to the files should be restricted according to a principle of least
182 privilege. Records shall remain accessible during power outages and emergencies.

183 D. Records required by this chapter shall be kept current and accurate.

184 **8VAC20-781-50. Children's records.**

185 A. Each center shall maintain and keep on the premises a separate record for each child
186 enrolled.

187 B. Each enrolled child's record shall contain the following information before the first day of
188 attendance, unless otherwise stated:

189 1. Name, preferred name (if any), sex, birth date of the child, and address;

190 2. Name, home address, and phone number of each parent who has custody;

191 3. Name and phone number of two designated people to call in an emergency if a parent
192 cannot be reached;

193 4. Names of persons to whom the child may be released, including agencies the parent
194 has a contract in place with to provide a specialized service to the child. Appropriate
195 legal paperwork shall be on file when a custodial parent requests the center not to
196 release the child to the other parent;

197 5. A list of health issues, including allergies; intolerances to medication or other
198 substances; chronic physical or medical conditions; special needs; dietary restrictions;
199 dietary preferences; pertinent behavioral or developmental information and special
200 accommodations needed;

201 6. For items in subdivision 5 of this section that are reasonably likely to result in a
202 medical emergency, an emergency care plan that has been developed in consultation
203 with a physician or physician's designee;

204 7. Written agreements as required by 8VAC20-781-410;

205 8. Previous child day care and schools attended by the child, as well as any child day
206 care or school concurrently attended by the child;

207 9. Documentation of viewing proof of the child's identity and age as outlined in [§ 22.1-](#)
208 [289.049](#) of the Code of Virginia;

209 10. Documentation of health information as required by 8VAC20-781-80. When a center
210 assumes responsibility for the child directly from a school or the center transfers
211 responsibility of the child directly to the school, the center is not required to maintain
212 documentation required by subsections A and B of 8VAC20- 781-80 of the school's
213 records for that child;

214 11. Documentation of the enrollment of a child experiencing homelessness enrolled
215 under the provision of subsection C of 8VAC20-781-80; and

216 12. The date of initial attendance and the last day of attendance.

217 C. The center shall document annually that the parent has confirmed that information in the
218 child's record is accurate.

219 **8VAC20-781-60. Staff records.**

220 The following records shall be kept for each staff member:

221 1. Name, address, verification of age requirement, current job title, and dates of employment
222 or volunteering;

223 2. Background check information shall be maintained in accordance with the requirements in
224 8VAC20-770;

225 3. Documentation that the individual meets the appropriate qualifications and training in Part
226 III of this chapter. The documentation of training shall include (i) the name of the staff member;
227 (ii) the date of the training; (iii) the training topic; (iv) evidence that the training has been
228 completed; (v) the person providing the training; and (vi) the number of training hours or credit
229 hours received;

230 4. Health information as required by 8VAC20-781-80; and

231 5. Information, to be kept on the premises, about health problems that may interfere with
232 fulfilling the job responsibilities.

233 **8VAC20-781-70. Attendance records; reporting.**

234 A. The center shall maintain a record of daily attendance that documents the arrival and
235 departure times of each child as it occurs.

236 B. The licensee shall ensure that staff in each group of children maintains a list of children
237 that accurately reflects the children in their care.

238 C. The center shall inform the superintendent as soon as practicable, but not to exceed one
239 business day of the circumstances surrounding the following incidents:

240 1. Death of a child while under the center's supervision;

241 2. Missing child when local authorities have been contacted for help;

242 3. The suspension or termination of all child care services for more than 24 hours as a
243 result of an emergency situation and plans to resume child care; or

244 4. A situation in which a child's whereabouts was unknown, including a child left
245 unattended or unsupervised; a lost or missing child; or a child who wandered away
246 unattended from the facility.

247 D. The center shall inform the superintendent as soon as practicable but not to exceed two
248 business days after learning about an injury while a child is under the supervision of the center
249 that required professional medical attention outside of basic first aid.

250 E. If the center or a person employed by the center has reason to suspect that a child is an
251 abused or neglected child, such person shall report the matter immediately in accordance with §
252 [63.2-1509](#) of the Code of Virginia.

253 F. A center shall immediately report an outbreak of disease as defined by the Virginia Board
254 of Health to the local health department, as required by § [32.1-37](#) of the Code of Virginia.

255 **8VAC20-781-80. Health provisions.**

256 A. Immunizations. The center shall comply with the health provisions of § [22.1-271.2](#) of the
257 Code of Virginia.

258 B. Physical examinations.

259 1. The center shall obtain documentation of a report from a qualified licensed physician,
260 or an advanced practice registered nurse or licensed physician assistant acting under
261 the supervision of a licensed physician, of a comprehensive physical examination
262 performed within (i) the 12 months before the date a child first attends the center, or (ii)
263 30 days after the first day of attendance.

264 2. A physical examination shall not be required of a child whose parent objects on
265 religious grounds and who shows no visual evidence of sickness, provided that the

266 parent shall state in writing that, to the best of his knowledge, the child is in good health
267 and free from a communicable or contagious disease.

268 C. If a child is experiencing homelessness and does not have documentation of the required
269 immunizations and physical examination, the center shall allow the child to attend during a
270 grace period of no more than 90 days to allow the parent time to obtain documentation of the
271 required documents.

272 D. Tuberculosis.

273 1. Before a staff member's date of employment, the results of a screening assessment
274 documenting the absence of tuberculosis in a communicable form shall be submitted to
275 the center. The documentation shall contain the elements of the current tuberculosis
276 screening form published by the Virginia Department of Health and shall have been
277 completed within 90 calendar days before coming in contact with children at the center.

278 2. A staff member or volunteer who develops symptoms compatible with active
279 tuberculosis disease, regardless of the date of the last tuberculosis screening or
280 assessment, shall immediately obtain and submit a new tuberculosis screening form
281 required in subdivision 1 of this subsection.

282 3. A staff member or volunteer who comes into contact with a known case of infectious
283 tuberculosis shall immediately obtain and submit to the center a new tuberculosis
284 screening form required in subdivision 1 of this subsection. Until a new screening form is
285 issued that documents the absence of tuberculosis in a communicable form, the staff
286 member shall not have contact with children.

287 Part III

288 STAFF QUALIFICATIONS AND TRAINING

289 8VAC20-781-90. Director qualifications.

290 A. Directors shall be at least 21 years of age and shall have a high school diploma or the
291 equivalent.

292 B. The director shall meet one of the following education and experience qualification
293 options, as well as three months experience in a supervisory capacity:

294 1. A bachelor's or graduate degree in a child-related field such as child development,
295 early childhood education, elementary education, recreation, or nursing; and three
296 months programmatic experience.

297 2. Forty-eight college credits with 12 college credits in child related courses and six
298 months of programmatic experience;

299 3. The requirement for a lead teacher in subdivision 1 of 8VAC20-781-110 B and one
300 year of programmatic experience; or

301 4. The requirement for a lead teacher in subdivision 2 of 8VAC20-781-110 B and two
302 years of programmatic experience.

303 C. Directors without experience in a supervisory capacity shall complete, within ten business
304 days of employment or promotion, ten hours of management training that includes information
305 on supervising, orienting, training, and scheduling.

306 D. Notwithstanding subsection A of this section, an individual who is at least 19 years of age
307 may serve as a director at a short-term program.

308 E. A director employed before [effective date of regulation] who met the education and
309 experience qualifications in effect immediately before [effective date of regulation], and who has
310 been continuously employed as a child day center director, is considered to have met the
311 requirements of this section.

312 **8VAC20-781-100. Director responsibilities.**

313 A. The licensee shall ensure that the director or one or more staff designated to assume the
314 director's responsibilities who meets the requirements of 8VAC20-781-90 and who has received
315 orientation and training on operation in the director's absence is on the premises at least 50% of
316 the center's hours of operation each week.

317 B. When the director or designee is not on the premises, the licensee shall designate a staff
318 member at least 18 years of age to be on the premises of the center to oversee the
319 administration of the center during the center's hours of operation.

320 **8VAC20-781-110. Lead teacher qualifications.**

321 A. Lead teachers shall be at least 18 years of age and shall have a high school diploma or
322 the equivalent.

323 B. Lead teachers shall meet a director qualification stated in 8VAC20-781-90 or one of the
324 following education and experience requirements:

325 1. Three months of programmatic experience and one of the following:

326 a. A one-year community college certificate in a child-related field with a minimum of
327 30 total college credits;

328 b. A career studies certificate in a child-related field with a minimum of 12 total
329 college credits;

330 c. A teaching diploma from an internationally or nationally recognized Montessori
331 organization; or

332 d. A credential in a child-related field by an organization listed in [§ 22.1-289.048](#) of
333 the Code of Virginia or an equivalent credential recognized by the department.

334 2. Six months of programmatic experience and:

335 a. A Virginia endorsement in a child-related field approved by the department; or

336 b. 24 hours of training in the following topics: child development, behavior guidance,
337 playground safety, and health and safety issues. This training shall be completed
338 before being promoted or beginning work or within 60 days after being promoted or
339 beginning work. Orientation training required by subsections B and C of 8VAC20-
340 781-130 shall not be used to meet this qualification.

341 C. Lead teachers at short-term programs shall have a minimum of 200 hours of
342 programmatic experience of which up to 24 hours can be formal training.

343 D. A lead teacher employed before [effective date of regulation], who met the education and
344 experience qualifications in effect immediately before [effective date of regulation], and who has
345 been continuously employed as a child day center lead teacher, is considered to have met the
346 requirements of this section.

347 **8VAC20-781-120. Driver qualifications and requirements.**

348 A. An individual who drives a vehicle to transport children for the center shall (i) be at least
349 18 years of age; (ii) possess a valid driver's license that authorizes the driver to operate the
350 vehicle being driven; and (iii) provide, before transporting children, a driving record obtained
351 from the state department of motor vehicles that issued the current license.

352 B. Centers that have obtained insurance for all individuals who transport children shall not
353 be required to provide a driving record as required in subsection A of this section.

354 **8VAC20-781-130. Orientation training.**

355 A. The licensee shall ensure that all staff who will work with children complete the preservice
356 training sponsored by the department within 90 calendar days of their date of employment. A

357 staff member who has documentation of completing the preservice training shall not be required
358 to retake the course.

359 B. The center shall provide orientation training to all staff who will work with children. The
360 orientation training shall be completed by staff before working alone with a child and within
361 seven days of the staff member's date of employment. The orientation training shall include all
362 the following facility specific topics relevant to the staff member's job responsibilities:

363 1. Recognizing child abuse and neglect and the legal requirements for reporting
364 suspected child abuse and neglect as required by § 63.2-1509 of the Code of Virginia;

365 2. Introduction and orientation to each child assigned to staff, including health issues
366 documented according to 8VAC20-781-50 B 5;

367 3. Child development;

368 4. Classroom management;

369 5. Abusive head trauma prevention and, if serving infants or toddlers, prevention of
370 shaken baby syndrome, coping with crying babies and distraught children;

371 6. Safe sleeping practices and sudden infant death syndrome awareness;

372 7. Playground safety to include (i) how staff will engage in the active supervision of
373 children and (ii) maintenance of equipment and protective surfacing;

374 8. The supervision of children and all the requirements of Part V of this chapter to
375 include (i) methods of active supervision of children; (ii) how the center will ensure that
376 each group of children receives care by consistent staff or team of staff members; (iii)
377 how the center will identify where children are at all times, including during group
378 transitions and field trips; (iv) actions to take when a child arrives after scheduled
379 activities have begun, including field trips or when the group is offsite or not in the
380 assigned room when the child arrives; and (v) maintaining staff-to-child ratios;

381 9. Assuming and releasing care of children to include (i) the method of confirming the
382 absence of a child when the child is scheduled to arrive from another program or from an
383 agency responsible for transporting the child to the center; (ii) the method for verifying
384 that children are released only to individuals authorized by the parents; and (iii) child
385 pickup after normal hours, during emergencies, and when a child's class is offsite or not
386 in the assigned area;

387 10. Actions to take in case of a lost or missing child, ill or injured child, or when a child
388 has a medical or other emergency;

389 11. Confidentiality, including how records will be kept confidential and secure; and the
390 privacy of children maintained; including expectations for communications, use of
391 technology, and social media;

392 12. Food service, storage, safety and preparation, and nutrition, according to the
393 requirements of 8VAC20-781-610 and 8VAC20-781-620.

394 13. Emergency procedures and written safety rules according to requirements of
395 8VAC20-781-450 and 8VAC20-781-460.

396 14. Emergency preparedness and response according to the requirements of Part IX of
397 this chapter.

398 15. The center's transportation policies according to the requirements of 8VAC20-781-
399 630 and 8VAC20-781-640, including accounting for children before leaving for a field
400 trip, upon arriving at a field trip site, before leaving a field trip site, upon returning to the
401 center, and any stops on the field trip.

402 16. The center's policies and procedures for medication according to the requirements of
403 Part VIII of this chapter.

404 17. Behavior guidance according to the requirements of 8VAC20-781-370 and 8VAC20-
405 781-380.

406 18. Parent engagement, communication, notification, and agreements according to the
407 requirements of 8VAC20-781-390, 8VAC20-781-400, and 8VAC20-781-410.

408 19. Preventing the spread of disease and infection control according to the requirements
409 of Part VII of this chapter; and

410 20. Prevention of and response to emergencies due to food and other allergies
411 including:

412 a. Recognizing the symptoms of an allergic reaction;

413 b. Responding to allergic reactions;

414 c. Preventing exposure to the specific foods and other substances to which a child is
415 allergic; and

416 d. Preventing cross contamination.

417 C. The licensee shall ensure that all staff who work with children, within 30 days of the staff
418 member's date of employment, complete an overview of first aid and cardiopulmonary
419 resuscitation (CPR) skills.

420 D. The licensee shall ensure that the director completes the prelicensure orientation
421 sponsored by the department within 60 days of the director's date of employment or promotion.
422 A director who has documentation of completing the prelicensure orientation shall not be
423 required to retake the program.

424 E. Volunteers who regularly work with children more than eight hours per week shall receive
425 training on the center's emergency procedures within the first week of volunteering. The center
426 shall document and maintain a record that the volunteer received the training.

427 F. Parents or other persons who participate in a cooperative preschool center on behalf of a
428 child attending such cooperative preschool center, including such parents and persons who are
429 counted for the purpose of determining staff-to-child ratios, shall be exempt from orientation and
430 training requirements applicable to staff of child day programs by this section. This orientation
431 and training exemption shall not apply to a parent or other person who participates in a
432 cooperative preschool center that has entered into a contract to provide child care services
433 funded by the Child Care and Development Block Grant.

434 **8VAC20-781-140. Ongoing training.**

435 A. The licensee shall ensure that all staff complete annual training on emergency
436 preparedness and response; child abuse and neglect; and mandated reporter requirements.

437 B. The licensee shall ensure that all staff who work with children complete at least 16 hours
438 of ongoing training each year. Of these 16 hours, three hours shall include the department's
439 health and safety update course. The ongoing training shall not include the training required by
440 8VAC20-781-130 B or C. The ongoing training shall be relevant to the staff member's job
441 responsibilities and appropriate to the age of children in care.

442 C. Notwithstanding the requirements of 8VAC20-781-140 B, a center that runs a short-term
443 program shall ensure that all staff who work with children complete at least 10 hours of ongoing
444 training each year.

445 D. Volunteers who regularly work with children more than eight hours per week shall be
446 required to complete annual training on the center's emergency procedures. The center shall
447 document and maintain a record that the volunteer received the training.

448 E. Parents or other persons who participate in a cooperative preschool center on behalf of a
449 child attending such cooperative preschool center, including such parents and persons who are
450 counted for the purpose of determining staff-to-child ratios, shall only be required to complete

451 four hours of ongoing training each year. A parent or other person who participates in a
452 cooperative preschool center that has entered into a contract to provide child care services
453 funded by the Child Care and Development Block Grant shall complete the training
454 requirements applicable to all centers by this section.

455 **8VAC20-781-150. First aid training and cardiopulmonary resuscitation (CPR).**

456 A. The licensee shall ensure that at least two staff members who have the following
457 certifications are present on the premises whenever a child is in care:

458 1. Current certification in cardiopulmonary resuscitation (CPR) as appropriate to the age
459 of the children in care from an individual or organization holding instructor certification.

460 The training shall include an in-person competency demonstration; and

461 2. Current certification in first aid from an individual or organization holding instructor
462 certification.

463 B. The licensee shall ensure that at least one staff in each classroom, area, or in each group
464 of children on field trips where children are present meets the qualifications in subsection A of
465 this section.

466 C. A primitive camp shall have one staff member on the premises who has a current
467 certification in emergency medical responder training whenever the primitive camp has
468 assumed responsibility for supervising a child.

469 D. Medical professionals with a current license or certification shall not be required to obtain
470 first aid certification.

471 **8VAC20-781-160. Daily health observation training.**

472 The licensee shall ensure that there is at least one staff member on the premises who has
473 obtained instruction within the last three years in performing daily health observations of
474 children whenever the center has assumed responsibility for supervision of a child.

475 B. Daily health observation training shall include the following:

476 1. Components of daily health check for children;

477 2. Inclusion and exclusion of the child from the class when the child is exhibiting physical
478 symptoms that show possible illness;

479 3. Descriptions of how diseases are spread and the procedures or methods for reducing
480 the spread of disease;

481 4. Information concerning the Virginia Department of Health Notification of Reportable
482 Diseases pursuant to 12VAC5-90-80 and 12VAC5-90-90, also available from the local
483 health department and the website of the Virginia Department of Health; and

484 5. Staff occupational health and safety practices in accordance with Occupational Safety
485 and Health Administration's bloodborne pathogens regulation ([29 CFR 1910.1030](#)).

486 C. The licensee shall ensure that a trained staff member conducts a daily health observation
487 of each child as close to arrival as possible and whenever staff responsible for the care of a
488 child notes a change in behavior or appearance.

489 **8VAC20-781-170. Medication administration training.**

490 A. The licensee shall ensure that the administration of prescription medication is performed
491 by a staff member who (i) is licensed by the Commonwealth of Virginia to administer such
492 medications or (ii) is qualified under [§ 54.1-3408 O](#) of the Code of Virginia to administer
493 medication to a child in a child day program and has satisfactorily completed a training program
494 approved by the Board of Nursing and taught by a registered nurse, licensed practical nurse, an
495 advanced practice registered nurse, physician assistant, doctor of medicine or osteopathic
496 medicine, or pharmacist.

497 B. To safely perform medication administration practices listed in 8VAC20-781-530,
498 whenever the center has agreed to administer over-the-counter medications other than topical
499 skin gel, cream, or ointment, the administration shall be performed by a staff member who has
500 satisfactorily completed a training course developed or approved by the department in
501 consultation with the Department of Health and the Board of Nursing and taught by a registered
502 nurse, licensed practical nurse, an advance practice registered nurse , physician assistant,
503 doctor of medicine or osteopathic medicine, or pharmacist; or administration shall be performed
504 by a staff member who is licensed by the Commonwealth of Virginia to administer medications.

505 C. The administration of undesignated or stock epinephrine shall be performed by (i) a nurse
506 at the center or employee of a local health department authorized by a prescriber and trained in
507 the administration of epinephrine, (ii) staff at the center who is authorized by a prescriber and
508 meets the requirements of subsections A, B, and D of this section, (iii) staff who has
509 satisfactorily completed a training course developed or approved by the department in
510 consultation with the Department of Health, or (iv) staff who has satisfactorily completed a
511 course taught by a registered nurse, licensed practical nurse, an advance practice registered
512 nurse, physician assistant, doctor of medicine or osteopathic medicine, or pharmacist that
513 includes the following:

- 514 1. Recognizing signs and symptoms of anaphylaxis.
- 515 2. Emergency procedures for responding to anaphylaxis; and
- 516 3. Instructions and procedures for administering epinephrine.

517 D. Staff required to have medication administration training and training in the administration
518 of undesignated or stock epinephrine shall be retrained at three-year intervals.

519 **8VAC20-781-180. Driver training requirements.**

520 The licensee shall ensure that an individual who drives a vehicle to transport children has
521 received the following training before transporting children under the supervision of the center:

- 522 1. Proper use of child safety restraints in accordance with Virginia state law;
- 523 2. Proper loading, unloading, and tracking of children per center policies;
- 524 3. Issues that may arise in transporting children with behavioral issues;
- 525 4. The location of first aid supplies;
- 526 5. The emergency procedures for the vehicle, including actions to be taken if an accident
527 occurs, vehicle malfunction and medical emergencies; and
- 528 6. The center's transportation policies according to the requirements of 8VAC20-781-630
529 and 8VAC20-781-640, including accounting for children before leaving for a field trip,
530 upon arriving at a field trip site, before leaving a field trip site, upon returning to the
531 center, and any stops on the field trip.

532 Part IV

533 PHYSICAL PLANT

534 **8VAC20-781-190. Initial approval from other agencies; requirements before initial** 535 **licensure.**

536 A. Before issuance of an initial license, the center shall submit to the superintendent written
537 documentation of the following:

- 538 1. Inspection by the authority that has jurisdiction that each building is in compliance with
539 applicable building and fire codes or that the authority has approved a plan of correction
540 for areas of noncompliance; and

541 2. Inspection from the local health department that each building is in compliance with
542 applicable health codes with regard to water supply; sewage disposal system; and food
543 service, if applicable; or a plan of correction approved by the local health department for
544 areas of noncompliance.

545 B. A building that is currently approved for school occupancy and houses a public or private
546 school during the school year shall be considered to have met the requirements of subdivision
547 A1 of this section when housing a center only serving children two and a half years of age or
548 older.

549 C. Asbestos.

550 1. For buildings built before 1978, the center shall submit the following before the initial
551 license is issued:

552 a. A written statement from a person licensed in Virginia as an asbestos inspector
553 and management planner as required by [§ 22.1-289.052](#) of the Code of Virginia and
554 the requirements of the Asbestos Hazard Emergency Response Act (15 USC § 2641
555 et seq.); and

556 b. A written statement that the response actions to abate risks to human health have
557 been or will be initiated in accordance with a specific schedule and plan as
558 recommended by the asbestos management planner in accordance with [§ 22.1-](#)
559 [289.052](#) of the Code of Virginia.

560 2. If the asbestos inspector determines that there is asbestos on the premises, the
561 center shall post a notice that (i) identifies the presence and location of asbestos
562 containing materials and (ii) advises that the asbestos inspection report and
563 management plan are available for review.

564 D. Lead.

565 1. For buildings built before 1978, the center shall submit the following before the initial
566 license is issued:

567 a. A written statement from a person licensed in Virginia as a lead risk assessor who
568 meets the requirements of [§ 54.1-500](#) of the Code of Virginia; and

569 b. A written lead risk assessment shall state that either (i) no lead was detected; (ii)
570 lead was detected and response actions to abate risks to human health have been
571 completed; or (iii) lead was detected and response actions to abate risks to human
572 health have been recommended in accordance with a specified schedule.

573 2. A notice regarding the presence and location of lead containing materials advising
574 that the lead inspection report and management plan are available for review shall be
575 posted.

576 3. The provisions of this subsection do not apply to centers licensed before [the effective
577 date of this chapter].

578 E. The provisions of subsections C and D of this section do not apply to centers located in
579 buildings required to be inspected according to Article 5 (§ 2.2-1162 et seq.) of Chapter 11 of
580 Title 2.2 of the Code of Virginia.

581 F. Before the first license is issued, primitive camps shall (i) notify the responsible fire
582 department and emergency medical service of the primitive camp location and hours of
583 operation, and (ii) maintain documentation of the notifications.

584 **8VAC20-781-200. Annual and renewal approval from other agencies; requirements after**
585 **initial licensure.**

586 A. Before use of newly constructed, renovated, remodeled, or altered buildings or sections
587 of buildings, the center shall submit to the superintendent written documentation of the
588 following:

589 1. Inspection by the authority that has jurisdiction that each building is in compliance with
590 applicable building and fire codes or that the authority has approved a plan of correction
591 for areas of noncompliance; and

592 2. Inspection from the local health department that each building is in compliance with
593 applicable health codes with regard to water supply; sewage disposal system; and food
594 service, if applicable; or a plan of correction approved by the local health department for
595 areas of noncompliance.

596 B. A building that is currently approved for school occupancy and houses a public or private
597 school during the school year shall be considered to have met the requirements of subdivision 1
598 of subsection A of this section when housing a center only serving children two and a half years
599 of age or older.

600 C. The center shall provide to the superintendent an annual fire inspection report from the
601 appropriate fire official that has jurisdiction.

602 D. If a center is located in a building currently housing a public or private school, the center
603 shall provide the school's annual fire inspection report.

604 E. The center shall provide to the superintendent an annual inspection from the local health
605 department that each building is in compliance with applicable health codes with regard to water
606 supply; sewage disposal system; and food service, if applicable; or a plan of correction
607 approved by the local health department for areas of noncompliance.

608 F. If a center is using a building where asbestos containing materials were detected and not
609 removed, the center shall follow the recommendations of the management plan and ensure the
610 following:

611 1. A signed, written statement that the center is following the recommendations of the
612 management plan shall be submitted to the superintendent before a license is issued;
613 and

614 2. The notice regarding the presence and location of asbestos containing materials and
615 advising that the asbestos inspection report and management plan are available for
616 review shall continue to be posted.

617 3. The provisions of this subsection do not apply to child day centers located in buildings
618 required to be inspected according to [Article 5 \(§ 2.2-1162 et seq.\) of Chapter 11 of Title](#)
619 [2.2 of the Code of Virginia.](#)

620 G. Primitive camps shall (i) notify the responsible fire department and the responsible
621 emergency medical service of changes in the primitive camp location and hours of operation,
622 and (ii) maintain documentation of the notifications.

623 H. For those buildings built before 1978 where lead is detected and not removed:

624 1. A signed, written statement that the center is following the recommendations of the
625 management plan shall be submitted to the department before a license is issued.

626 2. A notice regarding the presence and location of lead advising that the lead inspection
627 report and management plan are available for review shall continue to be posted.

628 3. The provisions of this subsection do not apply to child day centers located in buildings
629 required to be inspected according to [Article 5 \(§ 2.2-1162 et seq.\) of Chapter 11 of Title](#)
630 [2.2 of the Code of Virginia.](#)

631 4. The provisions of this subsection do not apply to centers licensed before the effective
632 date of this chapter.

633 **8VAC20-781-210. Building maintenance.**

634 The center shall maintain the areas and equipment of the center, inside and outside, in a
635 clean, safe, and operable condition. Unsafe conditions include splintered, cracked, or otherwise
636 deteriorating wood; peeling paint; visible cracks, bending, warping, rusting, or breakage of
637 equipment; loose or unsecured cords within reach of children; unstable heavy equipment,
638 furniture, or other items that a child could pull down.

639 B. The licensee shall ensure the following:

640 1. Hot water accessible to children does not exceed 120°F.

641 2. The heating system shall (i) be installed to prevent accessibility of children to the
642 system and (ii) have appropriate barriers to prevent children from being burned,
643 shocked, or injured from heating equipment. In addition, proper supervision shall be
644 available to prevent injury.

645 3. Portable heaters shall only be used to provide or supplement heat if a power failure or
646 similar emergency occurs. The licensee shall ensure that portable heaters are
647 inaccessible to children and have the seal of approval of a nationally recognized testing
648 laboratory or are approved by the state or local fire official. Portable heaters shall not be
649 used within three feet of combustible materials and shall be used in accordance with the
650 manufacturer's instructions.

651 4. Portable camping equipment for heating or cooking that is not required to be approved
652 by the building official shall bear the label of a nationally recognized inspection agency
653 and be used in accordance with the manufacturer's specifications, except for charcoal
654 and wood burning cooking equipment.

655 5. Unvented fuel burning heaters are not used when children are in care.

656 6. Electrical outlets and surge protectors accessible to children who are preschool age
657 and younger are tamper resistant or have protective covers.

658 7. Electrical cords are not spliced, deteriorated, or damaged, and unsecured electrical
659 cords are inaccessible to children preschool age and younger.

660 8. Extension cords have the seal of a nationally recognized testing laboratory; shall not
661 be overloaded, and shall not be placed through doorways, under carpeting, or across
662 water source areas.

663 9. When in use, fans shall be out of reach of children and cords shall be secured.

664 10. In inside areas occupied by children, the temperature shall be maintained no lower
665 than 68°F.

666 11. When the temperature of indoor areas occupied by children exceeds 80°F, fans or
667 other cooling systems are used.

668 12. Safe drinking water is available to children at all times.

669 13. Equipment shall include (i) outside lighting provided at entrances and exits used by
670 children before sunrise or after sundown and (ii) an in-service telephone or cell phone
671 that is operable and accessible to staff on premises during the center's hours of
672 operation.

673 14. Hazardous mechanical or electrical equipment are inaccessible to children.

674 C. Pursuant to § 22.1-289.058 of the Code of Virginia, each building built before 2015 used
675 to operate a licensed child day center shall be equipped with one carbon monoxide detector.

676 D. Pursuant to § 22.1-289.057 of the Code of Virginia, the license shall (i) develop and
677 implement a plan to test potable water; (ii) remediate and retest if necessary and (iii) submit
678 results of initial testing and retesting to the superintendent and the Department of Health's
679 Office of Drinking Water or (iv) use for human consumption, as defined by § 32.1-167, bottled
680 water, water coolers, or other similar water source that meets the U.S. Food and Drug
681 Administration standards for bottled water. The licensee shall notify the superintendent,
682 Department of Health's Office of Drinking Water and the parent of each child enrolled in the
683 program if the water is not tested or if the program does not remediate when lead is present and
684 instead chooses to use another water source that meets the U.S. Food and Drug Administration
685 standards for bottled water.

686 **8VAC20-781-220. Hazardous substances and other harmful agents.**

687 A. The licensee shall ensure that hazardous substances and chemicals, including cleaning
688 products, sanitizing agents, pesticides, flammable and explosive materials, and substances
689 labeled as keep out of reach of children, toxic, danger, caution, warning, flammable, harmful if
690 swallowed, causes burns, harmful vapor, or poison are considered hazardous to children are
691 stored in the following manner:

692 1. Inaccessible to children in a location that is locked. If a key is used, the key shall be
693 inaccessible to children;

694 2. In the original container or a substitute container with the contents clearly labeled;

695 3. Stored in areas physically separate from food and items used for food preparation or
696 food service; and

697 4. Cleaning supplies to clean and sanitize the diapering area or toilet chairs do not need
698 to be kept locked during diapering or toilet training time if they are inaccessible to
699 children.

700 B. Items such as cosmetics, personal care items, and air fresheners that are used
701 exclusively by staff or volunteers shall be inaccessible to children but are not required to be
702 locked.

703 C. The licensee shall ensure that smoking and the use of electronic smoking devices are
704 prohibited in the interior of a center while children are in care, in vehicles when children are
705 being transported, or outdoors in the presence of children.

706 D. Hazardous items.

707 1. Empty plastic bags large enough for a child's head to fit inside, disposable gloves, and
708 rubber or latex balloons shall be inaccessible to children under three years of age;

709 2. Items with a diameter of less than 1-1/4 inch and a length of less than 2-1/4 inches
710 shall be inaccessible to children under three years of age; and

711 3. Strings and cords long enough to encircle a child's neck, such as those found on
712 window blinds or drapery cords, shall be inaccessible to children under six years of age.

713 **8VAC20-781-230. Areas.**

714 A. Indoor space shall be measured inside wall-to-wall excluding spaces not routinely used
715 by children. Areas not routinely used for children's activities such as offices, hallways,
716 restrooms, kitchens, storage rooms, or closets, shall not be calculated as available space.

717 B. Centers shall have 35 square feet of indoor space available for each child.

718 C. Licensees that were licensed before [the effective date of this regulation] and subsequent
719 licensees that operate in buildings approved before June 1, 2008, shall have 25 square feet of
720 indoor space available for each child 16 months and older.

721 D. The center shall designate a separate space for children who are ill or injured.

722 E. The licensee shall ensure that space utilized for an outside play area has at least 75
723 square feet of space per child.

724 F. For centers licensed for the care of infants or toddlers, at least 25 square feet of the 75
725 square feet required in subsection E of this section shall be an unpaved surface.

726 G. Infants and toddlers shall have a separate outdoor play area or shall not occupy the
727 outdoor play area at the same time as preschool and school-age children.

728 **8VAC20-781-240. Toileting areas and furnishings.**

729 A. Centers shall have at least two toilets and two sinks.

730 B. The licensee shall ensure that each toileting area provided for children:

731 1. Is within a contained area, readily available and within the building used by the
732 children. Toilets used by children at primitive camps are not required to be located within
733 the building.

734 2. Has flushable toilets.

735 3. Has sinks located near the toilets that are supplied with running water.

736 4. Is equipped with a lined waste container, liquid soap, toilet paper, and disposable
737 towels or an air dryer within reach of children.

738 C. Centers shall have at least one toilet and one sink per 20 preschool children and at least
739 one standard size toilet and one sink per 30 school-age children. When sharing restroom areas
740 with other programs, the children in those programs shall be included in the toilet and sink ratio
741 calculations. The toilet and sink ratio appropriate to the younger age group shall apply. Urinals
742 shall not count for more than 50% of the number of toilets in the toileting area.

743 D. When child size toilets, urinals, and low sinks are not available in restrooms used by
744 children of preschool age and younger, one or more platforms or sets of steps shall be provided.
745 Platform steps shall be anchored or broad based to prevent toppling and have a non-slip
746 surface.

747 E. A toileting area used for school-age children shall have at least one toileting area
748 enclosed.

749 **8VAC20-781-250. Indoor and outdoor play areas and equipment.**

750 A. Outdoor play areas shall be located and designed to protect children from hazards
751 including bodies of water and vehicular traffic.

752 B. Indoor and outdoor playground and climbing equipment shall be age appropriate for the
753 children using it.

754 C. For child day centers licensed before [the effective date of this regulation], where
755 playground equipment is provided, protective surfacing shall comply with minimum safety
756 standards when tested in accordance with the procedures described in the American Society for
757 Testing and Materials standard F1292-99 as shown in Table 1 (Compressed Loose Fill
758 Synthetic Materials Depth Chart) and Table 2 (Use Zones for Equipment) below and shall be
759 under equipment with moving parts or climbing apparatus to create a use zone free of
760 hazardous obstacles. A use zone shall encompass sufficient area to include the child's
761 trajectory if a fall occurs while the equipment is in use. Where steps are used for accessibility,
762 protective surfacing is not required.

Table 1.

Compressed Loose Fill Synthetic Materials Depth Chart

<u>Loose-fill Material Type</u>	<u>Required Depth</u>	<u>Maximum Equipment Fall Height</u>
--	------------------------------	---

<u>Engineered wood fiber</u>	<u>6 inches</u>	<u>7 feet</u>
	<u>9 inches</u>	<u>8 feet</u>
<u>Pea gravel</u>	<u>6 inches</u>	<u>4 feet</u>
	<u>9 inches</u>	<u>5 feet</u>
<u>Recycles shredded rubber</u>	<u>6 inches</u>	<u>8 feet</u>
<u>Sand</u>	<u>6 inches</u>	<u>8 feet</u>
<u>Wood chips</u>	<u>6 inches</u>	<u>7 feet</u>
	<u>9 inches</u>	<u>8 feet</u>
<u>Wood mulch</u>	<u>6 inches</u>	<u>7 feet</u>
	<u>9 inches</u>	<u>10 feet</u>
<u>Wood mulch-double shredded</u>	<u>6 inches</u>	<u>6 feet</u>
	<u>9 inches</u>	<u>10 feet</u>

763 D. Depth requirements in this section are required unless the facility has received
764 documentation of third-party laboratory testing verifying that the type, depth of protective
765 surfacing, or installation process used at the facility complies with the most recent
766 recommendations by the U.S. Consumer Product Safety Commission's (CPSC) Public
767 Playground Safety Handbook.

Table 2.

Use Zones for Equipment

<u>Equipment</u>	<u>Use Zone</u>
<u>Stationary Equipment</u>	<u>Six feet on all sides of the equipment.</u>
<u>Slides</u>	<u>Six feet on all sides. The use zone in front of the exit shall be a minimum of 6 feet and at least as long as the slide is high up to a maximum of 8 feet.</u>
<u>Swings</u>	<u>Six feet on each side. Twice the height of the swing beam in the front and back of the swing.</u>

768 E. For child day centers licensed after [the effective date of this regulation] where
769 playground equipment is provided, protective surfacing and use zones shall comply with
770 protective surfacing requirements in the most current U.S. Consumer Product Safety
771 Commission's (CPSC) Public Playground Safety Handbook.

772 F. Use zones shall be free of obstacles, including containment barriers for protective
773 surfacing, and shall extend a minimum of six feet in all directions from the perimeter of the
774 equipment.

775 G. Climbing equipment and swings shall not be installed over asphalt or concrete unless the
776 asphalt or concrete is:

777 1. Covered with a properly installed unitary surfacing material; or

- 778 2. Covered with a loose-fill surfacing system (see Table 3). A loose-fill surfacing system
 779 shall include the following layers of protection:
- 780 a. Immediately over the hard surface there shall be a three- to six-inch base layer of
 781 loose-fill gravel for drainage;
 - 782 b. The next layer shall be a geo-textile cloth;
 - 783 c. On top of the geo-textile cloth there shall be a loose-fill layer meeting the
 784 requirements of Table 1 of this section; and
 - 785 d. Impact attenuating mats shall be embedded in the top loose-fill layer in high traffic
 786 areas. High traffic areas include underneath swings, at slide exits, and other places
 787 where displacement is likely.

Table 3.

Loose-Fill Surfacing System Requirements for Use Over Asphalt or Concrete

Layer 5: Impact mats- under swings and slide exits

Layer 4: Loose-fill surface material- as required by 8VAC20-781-250 C

Layer 3: Cloth barrier- geo-textile cloth

Layer 2: Drainage layer- three to six inches of gravel

Layer 1: Hard Surface of existing asphalt or concrete

- 788 H. Ground supports shall be covered with materials that protect children from injury.
- 789 I. Swing seats shall be constructed with flexible material such as rubber, canvas, or nylon.
- 790 1. Nonflexible molded swing seats shall only be used in a separate infant or toddler play
 791 area.
 - 792 2. Swings made specifically for a child with a special need is permitted if a staff member
 793 is positioned to see and protect other children who might walk into the path of the swing.
 - 794 3. Multi-axis swings including tire swings (i) shall not use steel belted tires, and (ii) the
 795 minimum clearance between the seating surface of the swing and the uprights of the
 796 supporting structure shall be 30 inches when the seat is in a position closest to the
 797 support structure.
- 798 J. Sandboxes shall be covered when not in use.
- 799 K. A shady area shall be provided in outdoor play areas during the months of May through
 800 September.
- 801 L. Play equipment used by children shall meet the following requirements:
- 802 1. Openings above the ground or floor that allow a 3 ½ inch by 6 ¼ inch rectangle to fit
 803 through shall also allow a nine-inch circle to fit through to prevent entrapment of a child's
 804 body or body part.
 - 805 2. All hooks, such as S-hooks and C-hooks, shall be properly closed and shall not be
 806 open more than 0.04 inches and less than the thickness of a dime; and
 - 807 3. Have no protrusions, sharp points, shearing points, or pinch points.
- 808 M. The maximum fall height of slides and climbing equipment installed before June 1, 2005,
 809 and used by toddlers, twos, and preschool children, shall be seven feet high when outdoors,
 810 and five feet high when indoors.

811 N. The maximum fall height of slides and climbing equipment installed after June 1, 2005,
812 and used by toddlers, twos, and preschool children, shall be six feet high when outdoors, and
813 five feet when indoors.

814 O. Indoor slides and climbing equipment with a fall height over 18 inches shall not be over
815 bare flooring.

816 P. Indoor slides and climbing equipment with a fall height of 36 inches or more shall be
817 located over protective surfacing.

818 Q. Slides shall not have spaces or gaps that could trap strings, clothing, or body parts
819 between the platform and the start of the slide chute.

820 R. Trampolines shall not be used.

821 S. When inflatable equipment is used, the equipment shall be assembled, maintained, and
822 used in accordance with the manufacturer's instructions.

823 T. The requirements of this section shall not prohibit child day programs providing care for
824 preschool or school-age children at a location that is currently approved by the department or
825 recognized as a private school by the State Board of Education for school occupancy and that
826 houses a public or private school during the school year from permitting preschool or school-
827 age children to use outdoor play equipment and areas approved for use by students of the
828 school during school hours.

829 Part V

830 STAFFING AND SUPERVISION

831 **8VAC20-781-260. Supervision of children.**

832 A. The licensee shall ensure that staff provide for the safety of children under the
833 supervision of the center.

834 B. The licensee shall ensure that staff remain alert to the needs of the children in the care of
835 the center.

836 C. Whenever a child is in the care of the center, there shall be on the premises at least (i) a
837 lead teacher and (ii) a staff member or volunteer who has received training on how to contact
838 appropriate authorities if an emergency occurs.

839 D. There shall be at least one staff member who meets the qualifications of a lead teacher in
840 each group of children except during short breaks and special activities.

841 E. A lead teacher is not required in each grouping of children during the first and last 90
842 minutes of operation when a center operates more than eight hours per day and during the
843 designated rest period if the following are met:

844 1. There is a staff member in the group who is over 18 years of age and has at least
845 three months of programmatic experience;

846 2. There is an additional staff member on premises who meets lead teacher
847 qualifications, is not counted in the staff-to-children ratios and is immediately available to
848 help if needed; and

849 3. There is a direct means for communicating between these two staff members.

850 F. For children under 10 years of age, the licensee shall ensure sight and sound supervision
851 by staff who are always physically present without separation by a physical barrier, except that
852 staff need only be able to hear a child who is using the restroom provided that:

853 1. There is a system to assure that individuals who are not staff members or persons
854 allowed to pick up a child in care are not present in the restroom area while in use by
855 children;

856 2. Staff check on a child who has not returned from the restroom after five minutes.
857 Depending on the location and layout of the restroom, staff shall provide intermittent
858 sight supervision of the children in the restroom area during this five-minute period to
859 assure the safety of children and to provide assistance to children as needed; and

860 3. Staff can hear or see the children (video equipment, intercom systems, or other
861 technological devices shall not substitute for staff being able to directly see or hear
862 children).

863 G. Children 10 years of age and older shall be within sight and sound supervision of staff
864 except when the following requirements are met:

865 1. Staff can hear or see the children (video equipment, intercom systems, or other
866 technological devices shall not substitute for staff being able to directly see or hear
867 children);

868 2. Staff are nearby so they can provide immediate intervention if needed;

869 3. There is a system to ensure that staff know where the children are and what they are
870 doing;

871 4. There is a system to ensure that individuals who are not staff members or persons
872 allowed to pick up children in care are not present in the areas where children are not
873 under sight supervision; and

874 5. Staff provide sight and sound supervision of the children at variable and unpredictable
875 intervals not to exceed 15 minutes.

876 H. When the outdoor activity area is not adjacent to the center, there shall be at least two
877 staff members on the outdoor activity area whenever one or more children are present.

878 **8VAC20-781-270. Staff-to-children ratio and group size requirements.**

879 A. The maximum group size limitations specified in Table 1 shall be followed whenever
880 children are in care.

Table 1.

Maximum Group Size Requirements

	<u>Age</u>	<u>Maximum Group Size</u>
1.	<u>Birth up to 16 months</u>	<u>12</u>
2.	<u>16 months up to 24 months</u>	<u>15</u>
3.	<u>2-year-olds</u>	<u>24</u>
4.	<u>3-year-olds up to school-age eligibility</u>	<u>30</u>
5.	<u>School-age eligible through 12 years</u>	<u>100</u>

881 B. The staff-to-children ratios specified in Table 2 are required whenever children are in
882 care.

Table 2.

Ratio Requirements

	<u>Age</u>	<u>Ratio (staff: children)</u>
1.	<u>Birth up to 16 months</u>	<u>1:4</u>

2.	<u>16 months up to 24 months</u>	<u>1:5</u>
3.	<u>2-year-olds</u>	<u>1:8</u>
4.	<u>3-year-olds up to school-age eligibility</u>	<u>1:10</u>
5.	<u>School-age eligible through 12 years</u>	<u>1:20</u>

883 C. In accordance with Part V of 8VAC20-820 and with approval by the superintendent, a
884 center may temporarily alter the staff-to-child ratios (i) by one child for groups of children from
885 birth up to school-age eligibility, and (ii) by two children for groups of children school-age eligible
886 through age 12. Under this provision, group sizes three times the approved ratios may be
887 implemented for children ages birth up to school-age eligibility. Group size for school-age
888 children shall meet the requirements in subsection A of this section.

889 D. When a group includes children from different age groups, the age of the youngest child
890 in the group shall be used to determine the staff-to-children ratio and group size for that group.

891 E. Group size limitations shall not apply during the following:

- 892 1. Designated rest periods as described in 8VAC20-781-280 and 8VAC20-781-290;
- 893 2. Outdoor activity as described in 8VAC20-781-320, 8VAC20-781-340, and 8VAC20-
894 781-350;
- 895 3. Transportation and field trips as described in 8VAC20-781-630 and 8VAC20-781-640;
- 896 4. Meals and snacks served as described in 8VAC20-781-610; or
- 897 5. Special group activities, or during the first and last hour of operation when the center
898 operates more than six hours per day.

899 F. Staff shall be counted in the required staff-to-children ratios only when they are directly
900 supervising children.

901 G. A child volunteer 13 years of age or older not enrolled in the program shall not be
902 counted as a child in the staff-to-children ratio requirements.

903 H. With a parent's written permission and a written assessment by the director and lead
904 teacher, a center may choose to assign a child to a different age group if the age group is more
905 appropriate for the child's developmental level and the staff-to-children ratio and group size shall
906 be for the established age group. These assignments are intended to be a permanent new
907 group and staff members for the child until it is determined the child's developmental level
908 indicates a new assignment.

909 **8VAC20-781-280. Ratios and group size for a balanced-mixed-age grouping.**

910 A. The ratio for a classroom of a balanced-mixed-age grouping of children preschool to six
911 years of age shall be one staff member for every 14 children provided:

- 912 1. The center has additional staff who are readily accessible if there is an emergency to
913 maintain a ratio of one staff member for every 10 children when three- year-olds are
914 included in the balanced-mixed-age group; and
- 915 2. The lead teacher has received at least eight hours of training in classroom
916 management of a balanced-mixed-age grouping.

917 B. The staff-to-children ratio for a balanced-mixed-age grouping during rest time shall be
918 one staff member for every 28 children and the requirements of subsection B through D of
919 8VAC20-781-290 shall be met.

920 C. A maximum group size of 28 shall be followed whenever children in care are in a
921 balanced- mixed-age grouping.

922 **8VAC20-781-290. Ratios during designated rest periods.**

923 A. For children ages 16 months through preschool age, during the designated rest period,
924 when children are resting or in an inactive state, the following rest period ratios are permitted if
925 the requirements of subsections B through D of this section are met:

926 1. Children 16 up to 24 months of age: one staff per 10 children.

927 2. Children two years of age: one staff per 16 children.

928 3. Children of preschool age: one staff per 20 children.

929 B. In addition to the staff required by rest period ratios, an additional staff member shall
930 always be available on-site to offer immediate assistance. The staff required by rest period
931 ratios shall be able to summon the additional staff member without leaving the room or area of
932 the sleeping or resting children.

933 C. Once at least half of the children in the resting room or area are awake and off their mats
934 or cots, the staff-to-children ratio shall meet the ratios as required in 8VAC20-781-270 and
935 8VAC20-781-280.

936 D. The licensee shall ensure that one staff member shall not supervise more than one room
937 or area during rest time.

938 E. Centers providing evening and overnight care shall meet the requirements of subsections
939 A through D of this section during sleep periods.

940 **8VAC20-781-300. Ratios and supervision during transportation and field trips.**

941 A. The staff-to-children ratios of [8VAC20-781-270](#) and 8VAC20-781-280 A shall be followed
942 on all field trips.

943 B. The staff-to-children ratio need not apply during transportation of school-age children to
944 and from the center.

945 C. One staff member or adult is necessary in addition to the driver when 16 or more
946 preschool or younger children are being transported in the vehicle.

947 Part VI

948 PROGRAM REQUIREMENTS AND EQUIPMENT

949 **8VAC20-781-310. Daily activities.**

950 A. The center shall provide a variety of daily activities for all age groups that are age and
951 stage appropriate and based on the physical, social, emotional, and intellectual needs of the
952 children.

953 B. The center shall provide opportunities for staff-directed and self-directed activities; a
954 balance of active and quiet activities; active outdoor play; and individual and group activities.

955 C. If the center uses media such as television, videos, video games, software, and
956 computers, the following shall apply:

957 1. For infants, the use of visual media is prohibited.

958 2. For toddlers, media use up to two hours per day is permitted if the center operates
959 more than six hours per day.

960 3. For children two and older, not more than a total of two hours per day, when content is
961 not based on curriculum or educational content.

962 4. All media provided by the center shall be limited to age-appropriate programs and
963 meet all the requirements in subsection A of this section.

964 D. Requirements in subdivision 3 of subsection C of this section do not apply to school-age
965 children who attend educational programming that incorporates technology into curriculum
966 learning activities.

967 E. Children shall be allowed to sleep or rest as individually needed.

968 **8VAC20-781-320. Daily care and activities for infants.**

969 A. The center shall post a flexible daily schedule for infants based on their individual needs
970 and the requirements of 8VAC20-781-310 B.

971 B. During the day, the licensee shall ensure that infants are provided with the following:

972 1. Food as specified in 8VAC20-781-610 and 8VAC20-781-620.

973 2. Outdoor time, unless weather or the Air Quality Color Code Chart as provided by the
974 Department of Environmental Quality states that outdoor conditions are hazardous.

975 3. Comfort as needed.

976 4. Stimulation and language development activities, including but not limited to staff
977 reading, talking to, showing pictures to, naming objects for, playing with, and engaging in
978 positive interactions (such as smiling, cuddling, and making eye contact) with infants.

979 5. A variety of play spaces that offer:

980 a. Room for extensive movement (rolling, crawling, or walking) and exploration;

981 b. A diversity of sensory and perceptual experiences; and

982 c. Equipment and toys that support large and small motor development.

983 6. Frequent opportunities for infants to creep, crawl, toddle and walk.

984 7. Protection from older children.

985 C. The licensee shall ensure that staff respond promptly to infants who are crying or
986 distraught.

987 D. The licensee shall ensure that, for an infant playing on the floor or ground who cannot
988 move without help, staff ensure that the infant's position and the selection of toys accessible to
989 the infant changes every 30 minutes or more often based on the infant's needs.

990 E. The licensee shall ensure that staff shall not confine infants who are awake and not
991 actively eating in one piece of equipment including: swings, highchairs, cribs, play pens, or other
992 similar pieces of equipment for more than 30 consecutive minutes. Except when eating, the
993 intervening time between confinements shall be at least 30 minutes.

994 F. The licensee shall ensure that for infants who are awake and unable to turn over alone,
995 staff shall make a minimum of two attempts at supervised tummy time throughout the day.

996 G. The licensee shall ensure that infant car seats are only used for child transportation.

997 H. The licensee shall ensure that cribs are only used for rest and sleep.

998 **8VAC20-781-330. Resting and sleeping infants.**

999 A. The licensee shall ensure that staff allow infants to follow individual patterns of sleeping
1000 and eating.

1001 B. The licensee shall ensure that staff place infants in cribs on their backs (supine) rather
1002 than on their bellies (prone) unless otherwise ordered by a written, signed statement signed by
1003 the child's physician or physician's designee.

1004 C. The licensee shall ensure that when an infant is able to turn supine to the prone, staff
1005 shall place the infant supine but allow the infant to adopt the infant's preferred position unless
1006 otherwise directed in a written, signed statement by the child's physician or physician's
1007 designee.

1008 D. The licensee shall ensure that staff shall not use sleep adaptive equipment unless
1009 otherwise directed in a written, signed statement by the child's physician or physician's
1010 designee.

1011 E. The licensee shall ensure that each resting or sleeping infant is individually checked for
1012 breathing, the color of the infant's skin, signs of distress, and to ensure safe sleep conditions
1013 are still met every 15-20 minutes.

1014 F. The licensee shall ensure that staff shall move an infant who falls asleep outside of their
1015 crib to the infant's assigned crib as soon as possible.

1016 G. The licensee shall ensure that staff ensure that items that could restrict infant movement
1017 or breathing (i.e., swaddling, weighted blankets, bibs, necklaces, or garments with ties or hoods)
1018 or cover the infant's head or face are not included in the crib with sleeping infants.

1019 **8VAC20-781-340. Daily care and activities for toddlers, twos, and preschoolers.**

1020 A. The center shall develop, follow, and post a daily schedule that allows for flexibility as
1021 children's needs require and that meets the requirements of 8VAC20-781-310 B. The daily
1022 schedule need not apply on days occupied a majority of the time by a field trip or other special
1023 event. The outdoor activity time need not apply when the weather or the Air Quality Color Code
1024 Chart as provided by the Department of Environmental Quality states that outdoor conditions
1025 are hazardous. The daily schedule shall include opportunities for:

1026 1. Outdoor activity, for at least:

1027 a. Fifteen minutes per day or session if the center operates up to three hours per day
1028 or session;

1029 b. Thirty minutes per day or session if the center operates between three and five
1030 hours per day or session; or

1031 c. One hour per day or session if the center operates more than five hours per day or
1032 session.

1033 2. Sleep or rest. Centers operating five or more hours per day shall have a designated
1034 rest period for at least one hour but no more than two hours.

1035 3. Meals and snacks as specified in 8VAC20-781-610.

1036 4. Small and large motor activities, language and communication experiences, sensory
1037 experiences, art, or music activities, and play acting or social living.

1038 B. After the first 30 minutes, children not sleeping shall be permitted to engage in quiet
1039 activities.

1040 C. A child who falls asleep in a place other than his designated sleeping location may
1041 remain in that space if comfortable and safe.

1042 D. The licensee shall ensure that each sleeping toddler is individually checked for breathing,
1043 the color of the toddler's skin, signs of distress, and to ensure safe sleep conditions are still met
1044 every 30 minutes.

1045 E. The licensee shall ensure that staff shall not confine children who are awake and not
1046 actively eating in one piece of equipment including: swings, highchairs, cribs, play pens, or other
1047 similar pieces of equipment for more than 30 consecutive minutes. Except when eating, the
1048 intervening time between confinements shall be at least one hour.

1049 **8VAC20-781-350. Daily care and activities for school-age children.**

1050 A. The center shall develop, follow, and post, a daily schedule for school-age children that
1051 allows for flexibility based on their individual needs and the requirements of 8VAC20-781-310 B.
1052 This schedule need not apply on field trip days or special events. The outdoor activity time need

1053 not apply when the weather or the Air Quality Color Code Chart as provided by the Department
1054 of Environmental Quality states that outdoor conditions are hazardous.

1055 B. Before or after school, the center shall provide an opportunity for children to do
1056 homework, projects, hobbies, small motor activities, art activities, or music activities in a suitable
1057 area. In the afternoon, there shall be an opportunity for large motor activities at least 25% of the
1058 time.

1059 C. On non-school days, the center shall provide opportunities for large motor activities at
1060 least 25% of the time; small motor activities; projects, hobbies, or homework in a suitable place;
1061 art or music activities; outdoor activity for at least one hour per day; and food as specified in
1062 8VAC20-781-610.

1063 **8VAC20-781-360. Daily care and activities for children with special needs.**

1064 A. The center shall work with the parent and the staff assigned to the child to develop a plan
1065 to ensure that a child with special needs receives care and activity opportunities appropriate to
1066 their individual needs, including specific care and activities recommended by a professional.
1067 The plan shall be documented and maintained in the child's record, and updated annually, or
1068 more frequently, as necessary.

1069 B. For a child who cannot move without assistance, staff shall change the place and position
1070 of the child at least every 30 minutes or according to the child's needs.

1071 **8VAC20-781-370. Behavioral guidance.**

1072 A. The center shall use positive methods of guiding behavior.

1073 B. When a child is in the care of the center, the licensee shall ensure that staff interact with
1074 children and one another to provide needed help, comfort, support and:

1075 1. Respect personal privacy;

1076 2. Respect differences in cultural, ethnic, religious, and family backgrounds;

1077 3. Encourage decision-making abilities;

1078 4. Promote ways of getting along;

1079 5. Encourage independence and self-direction; and

1080 6. Use consistency in applying expectations.

1081 C. The licensee shall ensure that behavioral guidance is constructive in nature, age, and
1082 stage appropriate, and shall be intended to redirect children to appropriate behavior and resolve
1083 conflicts.

1084 D. If time out is used as a behavior guidance technique:

1085 1. It shall be used sparingly and shall not exceed one minute for each year of the child's
1086 age;

1087 2. It shall be appropriate to the child's developmental level and individual needs;

1088 3. It shall not be used with infants or toddlers;

1089 4. The child shall be in a safe, lighted, well-ventilated place, and within sight and sound
1090 of a staff member; and

1091 5. The child shall not be left alone inside or outside the center.

1092 **8VAC20-781-380. Prohibited actions.**

1093 The following actions or threats are prohibited:

1094 1. Physical punishment;

1095 2. Striking a child, roughly handling, or shaking a child, biting, pinching, restricting
1096 movement through binding or tying, forcing a child to assume an uncomfortable position,
1097 forced exercise, or action taken to cause pain or discomfort;

- 1098 3. Enclosure in a small, confined space or a space that the child cannot freely exit
1099 himself; however, this does not apply to the use of equipment such as cribs, play yards,
1100 highchairs, and safety gates when used with children preschool age or younger for their
1101 intended purpose;
1102 4. Permitting a child to discipline or punish other children;
1103 5. Punitive separation from the group so that the child is away from the hearing and
1104 vision of a staff member.
1105 6. Withholding or forcing of food, water, or rest;
1106 7. Verbal remarks that are demeaning to the child or psychological punishment,
1107 including ridicule or humiliation;
1108 8. Punishment for toileting accidents or withholding opportunities for toileting;
1109 9. Punishment by applying unpleasant or harmful substances; and
1110 10. Withholding outside activity time as punishment.

1111 **8VAC20-781-390. Parental engagement.**

1112 Before the child's first day of attending, parents shall be notified about how to access the
1113 following:

- 1114 1. The center's philosophy and if applicable, religious affiliation;
1115 2. Operating information, including the hours and days of operation and holidays or other
1116 times closed, and the contact information to communicate with staff;
1117 3. Description of established lines of authority for staff;
1118 4. A custodial parent's right to be admitted to the center as required by [§ 22.1-289.054](#) of
1119 the Code of Virginia;
1120 5. The appropriate general daily schedule for the age of the enrolling child;
1121 6. How the center will notify parents of emergency situations and send parent
1122 communication and notifications as required by 8VAC20-781-400; and
1123 7. The following information from the center's emergency procedures:
1124 a. The relocation site;
1125 b. Method of communication with parents and emergency responders; and
1126 c. Procedure to reunite children with a parent or authorized person designated by the
1127 parent.
1128 8. The center's transportation policy;
1129 9. The center's policies for the arrival and departure of children, including procedures for
1130 verifying that only persons authorized by the parent are allowed to pick up the child,
1131 picking up children after closing, and when a child is not picked up for emergency
1132 situations including inclement weather or natural or man-made disasters;
1133 10. The center's policy regarding medication or medical procedures that will be given;
1134 11. The center's policy regarding application of topical skin products;
1135 12. The center's policy for reporting suspected child abuse and neglect as required by [§](#)
1136 63.2-1509 of the Code of Virginia;
1137 13. The center's food policies;
1138 14. Discipline policies including acceptable and unacceptable discipline measures; and
1139 15. Termination policies.

1140 **8VAC20-781-400. Parent communication and notification.**

1141 A. The center shall inform parents when a pattern of behavioral problems emerges or
1142 persists. Notification shall include actions taken in response.

1143 B. The center shall maintain a written record and provide parents with a written report of
1144 each injury involving their child on the day of occurrence. The written report shall protect the
1145 confidentiality of other children involved, and shall include:

1146 1. Date and time of incident or injury;

1147 2. Child's name;

1148 3. Type and circumstance of incident or injury;

1149 4. Staff present, and actions taken, or treatment offered;

1150 5. Date, time, and method used to notify parents;

1151 6. Staff and parent signatures or two staff signatures and

1152 7. Future action to prevent reoccurrence.

1153 C. The center shall notify the parent immediately and provide written documentation
1154 pursuant to subsection B of this section if the following incidents occur:

1155 1. The child sustains an injury that may reasonably require medical or dental treatment.

1156 2. The child has an adverse reaction to an administered medication or topical skin
1157 product, a medication error has occurred, or the center has administered an emergency
1158 medication.

1159 3. The child has a confirmed or suspected allergic reaction; or has ingested food
1160 identified in the written care plan required in subdivision 6 of 8VAC20-781-50 B even if a
1161 reaction did not occur.

1162 4. A situation in which the child's whereabouts is or was unknown, including a lost or
1163 missing child; a child left unattended in a vehicle or on the playground; or a child who
1164 wandered away unattended from the facility or assigned group.

1165 D. When a child has been exposed to a communicable disease listed in the Department of
1166 Health's current communicable disease chart, the parents shall be notified within 24 hours or
1167 the next business day of the center's having been informed unless forbidden by law, except for
1168 life threatening diseases, which shall be reported to parents immediately.

1169 E. Parents shall be informed in writing of a change to the center's relocation site, the
1170 communication plan, and the reunification plan.

1171 F. If an emergency evacuation or relocation is necessary, the parent shall be informed of the
1172 child's whereabouts as soon as possible as stated in the center's emergency preparedness and
1173 response plan.

1174 G. For each infant, the center shall maintain a daily record that can be easily accessed by
1175 both the parent and the staff working with the child. The record shall contain the following
1176 information:

1177 1. The amount of time the infant slept;

1178 2. The amount of food consumed and the time;

1179 3. Record of diaper changes and the application of diaper ointment;

1180 4. A description and time of bowel movements;

1181 5. Developmental milestones and daily activities; and

1182 6. For infants, who are awake and cannot turn over by themselves, the number of
1183 attempts at tummy time.

1184 H. Parents shall be informed of reasons for termination of services.

1185 I. The center shall provide to parents of children, at least semiannually or more frequently if
1186 needed:

- 1187 1. Written information about their child's development and needs; and
1188 2. Scheduled opportunities for parents to provide feedback on their children. This
1189 opportunity to provide feedback shall be documented.

1190 J. Information on a child required by subsection I of this section shared between the child's
1191 parents and the center shall be documented in the child's record.

1192 K. Requirements in subsection I of this section shall not apply to school-age children and
1193 children participating in short-term programs as defined in 8VAC20-781-10.

1194 **8VAC20-781-410. Parental agreements.**

1195 A written agreement between the parent and the center shall be in each child's record by the
1196 first day of the child's attendance. The agreement shall be signed by the parent and include:

- 1197 1. An authorization for emergency medical care should an emergency occur when the
1198 parent cannot be located immediately unless the parent states in writing an objection to
1199 the provision of emergency medical care on religious or other grounds;
1200 2. A statement that the center will notify the parent when the child becomes ill and that
1201 the parent will arrange to have the child picked up as soon as possible if requested by
1202 the center;
1203 3. A statement that the parent will inform the center within 24 hours or the next business
1204 day after his child or a member of the immediate household has developed a reportable
1205 communicable disease, as defined by the State Board of Health, except for life
1206 threatening diseases, which shall be reported immediately; and
1207 4. Authorization for the center to transport the child if an emergency occurs, including
1208 needing medical care or facility relocation.

1209 **8VAC20-781-420. Play furnishings, equipment, materials, and toys.**

1210 A. Furnishings, equipment, and materials shall be (i) of an appropriate size for the child
1211 using it and (ii) used in accordance with the manufacturer's instructions.

1212 B. Materials and equipment shall be available and shall be age and stage appropriate for the
1213 children and shall include an adequate supply, as appropriate for each age group, of arts and
1214 crafts materials, texture materials, construction materials, music and sound materials, books,
1215 social living equipment, and manipulative equipment.

- 1216 1. Equipment used for play with a diameter of less than 1-1/4 inch and a length of less
1217 than 2-1/4 inches shall be inaccessible to children under three years of age; and
1218 2. Toys and equipment with cords and strings shall only be accessible to children two
1219 and older.

1220 C. Washable toys and materials used by infants shall be cleaned and sanitized daily, or
1221 more often if necessary.

1222 D. The following cloth items provided by the center shall be washable: stuffed animals, cloth
1223 dolls, and dress-up clothes; floor pillows shall be washable or have removable covers that are
1224 machine washable. When used by children, the center shall wash stuffed animals, cloth dolls,
1225 dress-up clothes, and pillows or removable covers, when used by children, at least once a week
1226 or when soiled.

1227 E. If water play tables or tubs are used, they shall be cleaned and sanitized daily.

1228 F. If combs, toothbrushes, or other personal articles are used, they shall be individually
1229 assigned.

- 1230 G. Disposable products not used for play, learning or craft activities shall be used once and
1231 discarded.
- 1232 H. Provision shall be made for an individual place for each child's personal belongings.
- 1233 I. Infant walkers shall not be used.
- 1234 J. Play yards where used shall:
- 1235 1. Meet the current Juvenile Products Manufacturers Association (JPMA) and the
1236 American Society for Testing and Materials (ASTM) requirements and shall retain the
1237 manufacturer's label documenting product compliance with current safety standards at
1238 the time they were manufactured;
- 1239 2. Not use pillows or filled comforters;
- 1240 3. Not be used for the designated sleeping area;
- 1241 4. Not be occupied by more than one child; and
- 1242 5. Be sanitized each day of use or more often as needed.
- 1243 K. The licensee shall register to receive free recall alerts from the U.S. Consumer Product
1244 Safety Commission and shall remove all recalled items from the center.
- 1245 L. Portable water coolers shall be cleaned daily when in use, kept securely closed and
1246 designed so that water may be withdrawn from the container only by tap.
- 1247 **8VAC20-781-430. Cribs, cots, rest mats, and beds.**
- 1248 Cribs, cots, rest mats or beds shall be provided for children during the designated rest
1249 period and not be occupied by more than one child at a time.
- 1250 B. Cribs shall not be used as a play space.
- 1251 C. Cribs, cots, rest mats, and beds shall be identified for use by a specific child.
- 1252 D. Double decker cribs, cots, or beds, or other sleeping equipment when stacked shall not
1253 be permitted to be used for children.
- 1254 E. Occupied cribs, cots, rest mats, and beds shall be at least 2-1/2 feet from heat producing
1255 appliances.
- 1256 F. There shall be at least 12 inches of space between occupied cots, beds, and rest mats.
- 1257 G. Twelve inches of space is not required where cots, beds, or rest mats are located
1258 adjacent to a wall or a divider if one side is open at all times to allow for passage.
- 1259 H. Mattresses, cots, or rest mats shall be (i) nonabsorbent or covered with a waterproof
1260 material, and (ii) sanitized on all sides weekly or before use by another child.
- 1261 I. Rest mats shall have at least one inch of cushioning.
- 1262 J. Cribs shall be used for children under 12 months of age.
- 1263 K. Cribs shall meet the following requirements:
- 1264 1. They shall meet the current Consumer Product Safety Commission Standards at the
1265 time they were manufactured;
- 1266 2. There shall be no more than one inch between the mattress and the crib; and
- 1267 3. Not have mesh sides.
- 1268 L. Cribs shall be placed where objects outside the crib such as cords from blinds or curtains
1269 are not within reach of children in cribs.
- 1270 M. There shall be at least:
- 1271 1. Twelve inches of space between the sides and ends of occupied cribs except where
1272 they touch the wall or solid barrier; and

1273 2. Thirty inches of space between service sides of occupied cribs and other furniture
1274 where that space is the walkway for staff to gain access to occupied cribs.

1275 N. If cribs with a swing down safety gate on one side for easy access to a child are used, the
1276 hinged safety gates shall be up and the fastenings secured when a child is in the crib, except
1277 when a staff member is giving the child immediate attention.

1278 O. No soft objects or loose bedding shall be used with infants under 12 months when
1279 sleeping or resting including pillows, blankets, quilts, comforters, sheepskins, bumper pads, or
1280 stuffed toys.

1281 P. Toys or objects hung over an infant in a crib and crib gyms that are strung across the crib
1282 shall be out of reach of the infant and shall not be used for infants over five months of age or
1283 infants who are able to push up on their hands and knees.

1284 **8VAC20-781-440. Linens.**

1285 A. Cribs when being used by infants shall only have a tight fitted bottom cover that does not
1286 make the mattress buckle or bend.

1287 B. Cribs, cots, mats, and beds used by children other than infants during the designated rest
1288 period or during evening and overnight care shall have linens consisting of a top cover and a
1289 bottom cover or a one-piece covering that is open on three edges.

1290 C. Linens and pillows used by children shall be (i) assigned for individual use, and (ii) stored
1291 separately from those of other children.

1292 D. Linens and pillows shall be (i) changed when wet, soiled, or dirty, and (ii) linens shall be
1293 washed at least weekly.

1294 E. Pillows when used shall be covered with pillowcases.

1295 **8VAC20-781-450. Swimming and wading.**

1296 A. The center shall post written safety rules for swimming or wading in the swimming area
1297 when the pool is located on the premises of the center.

1298 B. The center shall follow posted rules of public swimming areas when swimming activities
1299 are located off site.

1300 C. Safety rules for swimming or wading shall be explained to children participating in
1301 swimming or wading activities.

1302 D. Before a child is able to participate in swimming or wading activities, and annually
1303 thereafter, the center shall obtain (i) written permission from the parent of each child who
1304 participates in swimming or wading and (ii) a written assessment from a certified lifeguard or a
1305 written statement from the parent to identify if the child is a swimmer or nonswimmer before the
1306 child is allowed in water with a depth of more than two feet.

1307 E. The licensee shall ensure that staff maintain active supervision when a child is in or
1308 around water by staff designated to supervise children in the water. Notwithstanding ratio
1309 requirements in 8VAC20-781-270 and 8VAC20-781-280 A, these staff shall only be responsible
1310 for the supervision of children participating in the water activity and additional staff shall be
1311 available to supervise children not participating.

1312 F. The licensee shall ensure that staff have a system for accounting at all times for all
1313 children in the water and in the aquatic area.

1314 G. The staff-to-children ratios required by 8VAC20-781-270 and 8VAC20-781-280 A shall be
1315 maintained while children are participating in swimming or wading activities. Notwithstanding the
1316 staff-to-children ratios already stated, at no time shall there be fewer than two staff members
1317 supervising the group.

1318 H. If a pool, lake, or other swimming area has a water depth of more than two feet, a
1319 certified lifeguard holding a current certification shall be on duty supervising whenever a child is
1320 participating in swimming or wading activities.

1321 1. One lifeguard for every 25 children in the water shall be on duty and supervising the
1322 children.

1323 2. The designated certified lifeguard shall not be counted in the staff-to-children ratios.

1324 3. The lifeguard certification shall (i) include an in-person competency demonstration,
1325 and (ii) be obtained from an individual or organization holding instructor certification from
1326 an organization such as the American Red Cross.

1327 I. Outdoor swimming activities shall occur only during daylight hours unless underwater and
1328 deck lighting is provided.

1329 **8VAC20-781-460. Pools and Equipment.**

1330 A. When permanent swimming or wading pools are located on the premises of the center,
1331 the following shall apply:

1332 1. The manufacturer's specifications for operating the pool shall be followed as well as
1333 applicable local ordinances and Department of Health requirements for swimming pools;

1334 2. Pools constructed, renovated, or remodeled after April 1, 1986, shall have a statement
1335 in writing of their inspection and approval from the local building official when approval is
1336 required;

1337 3. Outdoor swimming pools shall be enclosed by safety fences and gates that are in
1338 compliance with the applicable edition of the Virginia USBC (13VAC5-63) and shall be
1339 kept locked when the pool is not in use;

1340 4. Entrances to indoor swimming pools shall be locked when the pool is not in use; and

1341 5. A whistle or other audible signaling device, a buoy or a lemon line, a reach pole, and a
1342 backboard shall be available at the swimming or wading site.

1343 B. If children are allowed to swim in a lake or other place other than a pool, safe swimming
1344 areas shall be clearly marked and there shall be appropriate water safety equipment.

1345 C. Piers, floats, and platforms shall be in good repair and where used for diving, the
1346 minimum water depth shall be stated on the deck or planking.

1347 D. After use by a group of children, or more frequently as necessary, portable wading pools
1348 without an integrated filtration system shall be emptied, rinsed, and filled with fresh water.

1349 E. After each day's use, portable wading pools shall be emptied, sanitized, and stored in a
1350 position to keep them clean and dry.

1351 F. Children who are not toilet trained shall not use portable wading pools without an
1352 integrated filtration system.

1353 Part VII

1354 PREVENTING THE SPREAD OF DISEASE AND INFECTION CONTROL

1355 **8VAC20-781-470. Preventing the spread of disease.**

1356 A. Unless otherwise approved by a child's health care professional, a child shall be excluded
1357 from the center if the child has:

1358 1. A fever, which means an oral or axillary temperature at or above 100.4°F;

1359 2. Recurring vomiting or diarrhea not associated with diet change or medication; or

1360 3. Symptoms of a communicable disease listed in the Virginia Department of Health's
1361 current communicable disease chart.

1362 B. If a child needs to be excluded according to subsection A of this section, the following
1363 shall apply:

1364 1. The center shall contact the parents or designated emergency contact immediately so
1365 that arrangements can be made to remove the child from the center as soon as possible;
1366 and

1367 2. The child shall remain in a designated area as required by 8VAC20-781-230 D. The
1368 licensee shall ensure that the child is within sight and sound of a staff member at all
1369 times and shall ensure that staff respond to the needs of the child.

1370 C. When a surface has been contaminated with body fluids, it shall be cleaned and sanitized
1371 immediately or restricted from use until cleaned and sanitized.

1372 D. When a child's clothing has been contaminated with body fluids, it shall be separated,
1373 stored, and sealed in a leakproof storage bag until returned to the child's parent.

1374 **8VAC20-781-480. Hand washing.**

1375 A. The licensee shall ensure that staff ensure children's hands are washed with liquid soap
1376 and running water:

1377 1. After diapering or toileting;

1378 2. After contact with body fluids;

1379 3. After coming in from outdoors;

1380 4. After handling or caring for animals;

1381 5. Before and after playing with water used by more than one child;

1382 6. When their hands are visibly dirty; and

1383 7. Before eating.

1384 B. The licensee shall ensure that children's hands are washed with liquid soap and
1385 running water or disposable wipes after eating.

1386 C. Until an infant is old enough to be safely raised to the sink and reach for the water, the
1387 infant's hands may be washed using disposable wipes.

1388 D. The licensee shall ensure that staff wash their hands with liquid soap and running water:

1389 1. Before and after:

1390 a. Helping a child use the toilet;

1391 b. A diaper change;

1392 c. Feeding or helping children with feeding;

1393 d. Preparing or serving food or beverages; and

1394 e. Administering medication or topical skin products when there is direct contact with
1395 the medication or product.

1396 2. After:

1397 a. Using the toilet;

1398 b. Contact with body fluids;

1399 c. Eating;

1400 d. Handling garbage or cleaning materials;

1401 e. Coming in from outdoors; and

1402 f. Handling or caring for animals.

1403 E. The licensee shall ensure that staff wash their hands with liquid soap and running water
1404 when entering the facility before working with children and when their hands are visibly dirty.

1405 F. If running water is not available, a germicidal cleansing agent administered per
1406 manufacturer's instruction may be used.

1407 **8VAC20-781-490. Diapering and toileting.**

1408 A. The diapering area shall be accessible and within the building used by children.

1409 B. There shall be sight and sound supervision for all children when a child is being diapered.

1410 C. The licensee shall ensure that staff do not leave a child unattended on the diapering
1411 surface.

1412 D. The diapering area shall have the following:

1413 1. A sink with running water not to exceed 120°F;

1414 2. Liquid soap, disposable towels, and single use gloves such as surgical or examination
1415 gloves;

1416 3. A nonabsorbent surface for diapering or changing shall be used. For children younger
1417 than three years, this surface shall be a changing table or countertop designated for
1418 changing unless otherwise specified in this subsection; and

1419 4. The appropriate disposal containers as required by this section.

1420 E. When a child's clothing, diaper, or disposable training pants becomes wet or soiled, the
1421 child shall be wiped clean and changed immediately.

1422 F. Staff shall check diapers and disposable training pants at least once every two hours.

1423 G. Disposable diapers and disposable training pants shall be disposed in a covered
1424 leakproof or plastic-lined storage system that is either foot-operated or used in a way that the
1425 staff member's hand and the soiled diaper do not touch an exterior surface of the storage
1426 system during disposal.

1427 H. When cloth diapers are used, a separate covered leakproof storage system as specified
1428 in subsection G of this section shall be used for each individual child.

1429 I. Diapers, disposable training pants, or underwear of children who are toilet training may be
1430 changed in the bathroom, and not on the diapering surface required in subdivision 3 of
1431 subsection D of this section, but the required procedures for handwashing in 8VAC20-781-480
1432 and disposal of diapers or disposable training pants in subsections G and H of this section shall
1433 be followed.

1434 J. The diapering surface shall (i) not be used for storage, (ii) be used only for diapering or
1435 wiping children clean, and (iii) be cleaned and sanitized after each use. Tables used for
1436 children's activities or meals shall not be used for changing diapers.

1437 K. Staff shall ensure the immediate safety of a child during diapering.

1438 **8VAC20-781-500. Toilet training.**

1439 Toilet training. For every 10 children in the process of being toilet trained, there shall be at
1440 least one toilet chair or one child-sized toilet, or at least one adult sized toilet with a platform or
1441 steps and adapter seat.

1442 1. The location of these items shall allow for sight and sound supervision of children in
1443 the classroom if necessary for the required staff-to-children ratios to be maintained.

1444 2. Toilet chairs shall be emptied promptly and cleaned and sanitized after each use and
1445 located on non-carpeted areas when used.

1446 Part VIII

1447 MEDICATION ADMINISTRATION AND TOPICAL SKIN PRODUCTS

1448 **8VAC20-781-510. Requirements for medication administration.**

1449 A. The decision to administer medicines at a facility may be limited by center policy to
1450 administer: (i) prescribed medications, (ii) nonprescription medications, or (iii) only those
1451 medications required for emergencies or by law.

1452 B. Written parental authorization for medication shall be obtained before a medication is
1453 accepted, maintained, or stored at the center.

1454 C. Medications accepted, maintained, or stored at the center shall (i) be labeled with the
1455 child's name, and (ii) not be kept or used beyond the date of expiration or use by date on the
1456 medication container.

1457 D. For a child for whom emergency medication (such as albuterol, glucagon, or epinephrine
1458 auto-injector) has been provided to the center by the parent, there shall always be a staff
1459 member who is immediately accessible and available and meets the requirements listed in
1460 8VAC20-781-170.

1461 E. Prescription and nonprescription medication shall be given to a child only with written
1462 authorization from the parent that has not expired. Medication shall be administered by a staff
1463 member who is 18 years of age or older.

1464 F. The licensee shall ensure that written authorization from the child's parent for medication
1465 is only valid for 10 business days unless written authorization from the child's physician is on
1466 file.

1467 G. Long-term prescription and nonprescription drug administration shall be allowed only with
1468 written authorization from the child's physician and parent and shall be renewed based on
1469 instructions from the child's physician.

1470 H. Medication authorization shall be available to staff during the entire time it is effective.

1471 I. When an authorization for medication expires, the center shall notify the parent with the
1472 intent to safely return the medication to the parent or receive an updated authorization form. If a
1473 parent has been non-responsive and has not retrieved the medication, the center shall safely
1474 dispose of the medication, but no later than 30 calendar days after the expiration date of the
1475 authorization. The expired medication authorization form shall be kept with the medication until
1476 the center can safely return the medication to the parent or dispose of the medication.

1477 J. Undesignated or stock epinephrine kept at the center pursuant to § 22.1-289.059 shall be
1478 labeled with the name of the medication and the dosage amount.

1479 **8VAC20-781-520. Prescription medication.**

1480 The center may administer prescription medication provided that:

1481 1. The medication is administered by a staff member who meets the requirements in
1482 8VAC20-781-170;

1483 2. The center administers only those drugs that are dispensed from a pharmacy or
1484 health care provider and maintained in the original, labeled container; and

1485 3. The center administers medications only to the child identified on the prescription
1486 label in accordance with the prescriber's instructions pertaining to dosage, frequency,
1487 and route of administration.

1488 **8VAC20-781-530. Non-prescription medication.**

1489 The center may administer nonprescription medication provided the medication is:

1490 1. Administered by a staff member who meets the requirements in 8VAC20-781-170;

1491 2. Labeled with the child's name; the name of the medication, the dosage amount, and
1492 the time or times to be given;

1493 3. In the original container with the manufacturer's direction label attached; and

1494 4. Given only as specified on the manufacturer's label unless otherwise designated by
1495 written physician's order.

1496 **8VAC20-781-540. Storage of medication.**

1497 A. Unless designated otherwise by a written physician's order, medications, including
1498 refrigerated and staff's personal medications, shall be kept in a locked place, using a safe
1499 locking method, that prevents access by children.

1500 B. If a key is used, the key shall be inaccessible to the children.

1501 C. When needed, medication shall be refrigerated.

1502 D. When medication is stored in a refrigerator used for food, the medications shall be stored
1503 together in a container or in a clearly defined area away from food.

1504 **8VAC20-781-550. Medication records.**

1505 The center shall keep a record of prescription and nonprescription medication given to
1506 children, that shall include the following:

1507 1. Name of the child to whom medication was administered;

1508 2. The dose, the route, and the name of the medication administered to the child;

1509 3. The date and time the medication was administered to the child;

1510 4. Name of the staff member administering the medication;

1511 5. Adverse reactions; and

1512 6. Medication administration errors and action taken.

1513 **8VAC20-781-560. Self-administered medication.**

1514 A. When a school-age child self-administers medication while in care, the center shall:

1515 1. Establish written safety procedures for self-administration of medication for school-
1516 age children that include direct supervision of during the administration of the
1517 medication; and

1518 2. Obtain: (i) documentation of written authorization from the child's physician; (ii) a
1519 written request from the child's parent for the child's self-administration of medication;
1520 and (iii) written authorization from the parent to administer the medication if the child is
1521 unable to self-administer.

1522 B. The center shall document medication self-administered by a child to include:

1523 1. The child's name;

1524 2. The dose, the route, and name of the medication self-administered;

1525 3. The date and time the medication was self-administered;

1526 4. Adverse reactions; and

1527 5. Medication administration errors and action taken.

1528 C. If the written safety procedures required in this section are not followed, the center shall:

1529 1. Notify the child's parent;

1530 2. Assume responsibility for administration of the medication while the child is in care;
1531 and

1532 3. Document in the child's record, the discontinuation of the authorization to self-
1533 administer and the notification to the child's parent.

1534 **8VAC20-781-570. Topical skin products.**

1535 A. When topical skin products such as lip balm, hand lotion, sunscreen, diaper ointment and
1536 lotion, and insect repellent are administered by the center, the following requirements shall be
1537 met:

1538 1. Written parent authorization noting known adverse reactions shall be obtained at least
1539 annually;

1540 2. The product shall be in the original container and, if provided by the parent, labeled
1541 with the child's name; and

1542 3. Manufacturer's instructions for application shall be followed.

1543 B. When diaper ointment and insect repellent are administered by the center a record shall
1544 be kept that includes the child's name, the name of the product, the frequency of use and the
1545 approximate time given, adverse reactions, and application errors and action taken.

1546 C. Caregivers without medication administration training may apply topical skin products
1547 unless the product is a prescription medication, in which case the requirements in 8VAC20-781-
1548 520 shall be met.

1549 D. Children five years of age and older may have access to and may self-administer hand
1550 sanitizer, liquid hand soap, sunscreen, lip balm and hand lotion labeled "Keep out of reach of
1551 children" provided that the label does not contain other warnings listed in 8VAC20-781-220 A
1552 and is used under adult supervision.

1553 E. Sunscreen provided by the center shall have a minimum sunburn protection factor (SPF)
1554 of 15.

1555 F. The product shall not be kept or used beyond the expiration date.

1556 G. Topical skin products except those referenced in subsection C of this section, do not
1557 need to be kept locked, but shall be inaccessible to children under five years of age.

1558 Part IX

1559 FIRST AID, EMERGENCY SUPPLIES, AND EMERGENCY PREPAREDNESS AND
1560 RESPONSE

1561 **8VAC20-781-580. First aid and emergency supplies.**

1562 A. The center shall have a minimum of one working flashlight that does not require electricity
1563 on each floor of each building that is used by children.

1564 B. The center shall have a minimum of one working radio that does not require electricity in
1565 each building used by children and a primitive camp location without a building.

1566 C. The center shall have first aid supplies on each floor of the building, accessible from
1567 outdoor play areas, while on field trips, in vehicles when transporting children, and wherever
1568 children are in care. The first aid supplies shall be readily accessible to staff, inaccessible to
1569 children, and include the following:

1570 1. An ice pack or instant cold pack;

1571 2. A pair of scissors;

1572 3. A pair of tweezers;

1573 4. Gauze pads;

1574 5. Adhesive tape;

1575 6. Adhesive bandages, assorted sizes;

1576 7. An antiseptic cleansing solution or pads;

1577 8. An operable digital thermometer;

- 1578 9. A minimum of two triangular bandages;
- 1579 10. Single use gloves such as surgical or examination gloves; and
- 1580 11. A first aid instructional manual.

1581 **8VAC20-781-590. Emergency preparedness and response plan.**

1582 A. The center shall have a written emergency preparedness and response plan developed
1583 in consultation with the local emergency manager, or the state or local fire official. The plan shall
1584 include:

1585 1. Emergency preparedness and response planning for emergencies resulting from a
1586 natural disaster or a human-caused event such as violence at or near the child care
1587 facility; and

1588 2. Emergency evacuation, relocation, shelter-in-place, and lockdown procedures to
1589 include:

1590 a. Scenario applicability: the most likely emergency scenarios including fire, severe
1591 storms, flooding, tornadoes, earthquakes, pandemic, loss of utilities, and other
1592 situations including facility damage that requires evacuation, lockdown, or shelter in
1593 place;

1594 b. Emergency communication to alert staff and emergency responders;

1595 c. Methods to account for all children and to ensure continued supervision of
1596 children;

1597 d. Method of communication with staff, parents, and emergency responders;

1598 e. Accommodations or special requirements for infants, toddlers, children with
1599 special needs and children with chronic physical or medical conditions to ensure their
1600 safety during evacuation or relocation;

1601 f. Procedure to reunite children with a parent or authorized person designated by the
1602 parent; and

1603 g. Staff and volunteer training requirements and drill frequency.

1604 B. The center's emergency preparedness and response plan shall also include the following
1605 additional requirements:

1606 1. Evacuation and relocation procedures shall include:

1607 a. Designated primary and secondary routes out of the building;

1608 b. Designated assembly point away from the building;

1609 c. Designated relocation site;

1610 d. Methods to ensure essential documents, including attendance records; parent
1611 contact information; emergency contact information; information on allergies, and
1612 intolerance to food or medication are taken to the assembly point or relocation site;
1613 and

1614 e. Methods to ensure special healthcare needs to include medications and care
1615 plans; and supplies are taken to the assembly point or relocation site.

1616 2. Shelter-in-place procedures shall include:

1617 a. Designated shelter-in-place areas within the center;

1618 b. Designated primary and secondary routes to the shelter-in-place areas;

1619 c. Methods to ensure essential documents, including attendance records; parent
1620 contact information; emergency contact information; information on allergies, and
1621 intolerance to food or medication are taken to the assembly point or relocation site;
1622 and

1623 d. Methods to ensure special healthcare needs to include medications and care
1624 plans; and supplies are taken to the assembly point or relocation site.

1625 3. Lockdown procedures shall include designated safe areas that the facility can contain
1626 using procedures such as closing or locking of doors or other barriers.

1627 C. The center shall review the emergency preparedness and response plan at least annually
1628 and update as needed. The center shall document each review and update made to the
1629 emergency preparedness and response plan.

1630 D. Emergency evacuation and shelter-in-place diagrams, and a 911 or local dial number for
1631 police, fire, and emergency medical services, and the number of the national poison control
1632 center hotline shall be posted in conspicuous locations in each room used by children or staff.

1633 E. Continuity of operations shall be established to ensure that essential functions are
1634 maintained during an emergency.

1635 **8VAC20-781-600. Emergency response drills.**

1636 A. All emergency response drills shall be practiced:

1637 1. In each building used by children;

1638 2. With all staff, volunteers and children present at the time of the drill;

1639 3. At varying times during the center's hours of operation; and

1640 4. For centers offering evening and overnight care, a separate drill shall be completed
1641 during the evening and overnight hours according to the same schedules specified in
1642 subsections B through D of this section.

1643 B. Emergency evacuation procedures shall be practiced monthly.

1644 C. Shelter-in-place procedures shall be practiced a minimum of twice per year.

1645 D. Lockdown procedures shall be practiced a minimum of twice per year.

1646 E. Documentation shall be maintained for one year of emergency evacuation, shelter-in-
1647 place and lockdown drills that include:

1648 1. The date and time of the drill;

1649 2. The number of staff, volunteers and children participating; and

1650 3. The time it took to complete the drill.

1651 Part X

1652 SPECIAL SERVICES

1653 **8VAC20-781-610. Nutrition and food services.**

1654 A. Centers shall schedule appropriate times for snacks or meals, or both, based on the
1655 hours of operation and time of the day (e.g., a center open only for after school care shall
1656 schedule an afternoon snack; a center open from 7 a.m. to 1 p.m. shall schedule a morning
1657 snack and midday meal).

1658 B. The licensee shall ensure that children arriving from a half-day, morning program who
1659 have not yet eaten lunch receive a lunch.

1660 C. The center shall schedule snacks or meals so that there is a period of at least 1-1/2 hours
1661 but no more than three hours between each meal or snack unless there is a scheduled rest or
1662 sleep period for children between the meals and snacks.

1663 D. Drinking water shall be offered at regular intervals to children.

1664 E. In environments of 80°F or above, attention shall be given to the fluid needs of children at
1665 regular intervals. Children in such environments shall be encouraged to drink water as outlined
1666 in subsection D of this section.

- 1667 F. When centers choose to provide meals or snacks, the following shall apply:
- 1668 1. Centers shall follow the most recent, age-appropriate nutritional requirements of the
- 1669 Child and Adult Care Food Program administered by the United States Department of
- 1670 Agriculture (USDA).
- 1671 2. Children shall be allowed second helpings of food listed in the Child and Adult Care
- 1672 Food Program.
- 1673 3. Centers shall not serve small (marble-sized), round, sticky, or hard foods that are
- 1674 difficult to chew and easy to swallow whole to children under four years of age.
- 1675 4. A menu listing food to be served for meals and snacks during the current one-week
- 1676 period shall:
- 1677 a. Be dated;
- 1678 b. Be posted in a location conspicuous to parents or given to parents;
- 1679 c. Be kept on file for one week at the center; and
- 1680 d. List substituted food by the end of the business day.
- 1681 5. Powdered milk shall not be used except for cooking.
- 1682 G. When food or beverage is brought from home, the following shall apply:
- 1683 1. The food and beverage container shall be sealed and labeled in a way that identifies
- 1684 the owner by first and last name.
- 1685 2. The center shall have extra food or shall have provisions to obtain food to serve to
- 1686 children so they can have an appropriate snack or meal if they forget to bring food from
- 1687 home, bring an inadequate meal or snack, or bring perishable food.
- 1688 3. Unused portions of opened food shall be discarded by the end of the day or returned
- 1689 to the parent.
- 1690 H. If a catering service is used, it shall be approved by the local health department.
- 1691 I. Contaminated or spoiled food shall not be served to children.
- 1692 J. Tables and highchair trays shall be cleaned and sanitized before and after each use for
- 1693 feeding;
- 1694 K. Staff shall be present in the feeding area with children whenever children are eating.
- 1695 L. Children shall remain seated while eating or drinking and shall not eat while riding in
- 1696 vehicles.
- 1697 M. Food and beverages shall be prepared, served, stored, and transported in a sanitary
- 1698 manner.
- 1699 N. When food is prepared to which a child in care is allergic, staff shall take steps to avoid
- 1700 cross contamination to prevent an allergic reaction.
- 1701 O. A child with a diagnosed food allergy shall not be served food identified in the emergency
- 1702 care plan required in subdivision 6 of 8VAC20-781-50 B.
- 1703 P. Disposable products used for food or beverages shall be used once and discarded.
- 1704 **8VAC20-781-620. Special feeding needs.**
- 1705 A. Highchairs, infant seats, or feeding tables shall be used for children under 12 months who
- 1706 are not held while being fed.
- 1707 1. Children shall be supervised during snacks and meals.
- 1708 2. When a child is placed in a feeding table with protective belts, a highchair, or an infant
- 1709 seat, the protective belt shall be fastened securely.

1710 B. Bottle fed infants who cannot hold their own bottles shall be held when fed. Bottles shall
1711 not be propped or used while the child is in his designated sleeping location.

1712 C. Each bottle-fed infant shall have a written feeding schedule on file that is updated as
1713 needed and contains:

1714 1. Whether the child receives breast milk, formula, or milk; and

1715 2. The brand name of formula, if applicable.

1716 D. Infants shall be fed on demand or in accordance with parental instructions.

1717 E. All prepared bottles or breast milk stored in other containers provided by parents shall be
1718 labeled with the child's name and date of receipt.

1719 F. Breast milk shall be stored according to the center's policy for the storage of breast milk.

1720 G. Infant formula prepared by the center shall be prepared according to manufacturer's
1721 instructions and prepared infant formula or milk shall be (i) refrigerated; and (ii) dated and
1722 labeled with the child's name.

1723 H. Heated breast milk, formula, milk, and baby food shall be stirred or shaken and tested for
1724 temperature before serving to children.

1725 I. Milk, formula or breast milk, and bottles or containers of infant foods shall be warmed
1726 under running warm tap water or by placing them in a container of water that is no warmer than
1727 120° F if needed. Bottles shall not be heated or warmed in a microwave.

1728 J. When a bottle warmer or slow-cooking device, such as a crock-pot, is used for warming
1729 breast milk, formula, milk or bottles of infant food, the device (and cord) shall be out of children's
1730 reach and used according to manufacturer's instructions.

1731 K. Breast milk, formula and milk shall not remain unrefrigerated at the center for more than
1732 two hours and shall not be reheated.

1733 L. Prepared bottles shall be discarded or returned to the parent at the end of the day.

1734 M. Prepared baby food not consumed during that feeding by an infant may be used by that
1735 same infant later in the same day, provided that the food is not served out of the infant food
1736 container and is dated and stored in the refrigerator; otherwise, it shall be discarded or returned
1737 to the parent at the end of the day.

1738 N. The licensee shall maintain on the premises, a one-day's emergency supply of clean and
1739 empty or disposable bottles, nipples, and commercial formulas. Emergency supply bottles shall
1740 only be used for one feeding and shall be appropriate for the children in care. The center shall
1741 consult parents on special feeding needs such as specific formula, breast milk, or other special
1742 accommodations.

1743 O. The center shall not prohibit breastfeeding.

1744 P. When bottles with breast milk, formula or milk are prepared by the center, they shall not
1745 be mixed with cereal unless a physician or physician's designee provides written documentation
1746 stating otherwise.

1747 Q. When feeding semisolid food to a child, staff shall use a spoon unless written instructions
1748 from a physician or physician's designee state differently.

1749 **8VAC20-781-630. Field trips.**

1750 A. Written parental permission for field trips shall be secured before the scheduled activity.

1751 B. If a blanket permission is used instead of a separate written permission, the following
1752 shall apply:

1753 1. Parents shall be notified in advance of the field trip; and

1754 2. Parents shall be given the opportunity to withdraw their child from the field trip.

1755 C. Children shall cross streets at corners or crosswalks or other designated safe crossing
1756 point if no corner or crosswalk is available.

1757 D. Before leaving on a field trip, a schedule of the trip's events and locations shall be shared
1758 with parents.

1759 E. The licensee shall ensure a method of communication for emergencies during field trips.

1760 F. The center shall make provisions for providing children on field trips with adequate food
1761 and water.

1762 **8VAC20-781-640. Transportation.**

1763 A. Written parental permission for transportation shall be secured before transportation is
1764 provided.

1765 B. Vehicles used by the center for the transportation of children shall meet the following
1766 requirements:

1767 1. The vehicle shall meet the safety standards set by the Department of Motor Vehicles
1768 and shall be kept in satisfactory condition to assure the safety of children.

1769 2. The vehicle shall be manufactured for the purpose of transporting people.

1770 3. The vehicle shall be insured with at least the minimum limits established by Virginia
1771 state statutes.

1772 4. If staff or volunteers supply personal vehicles, the center is responsible for ensuring
1773 that the requirements of this subsection are met.

1774 C. The licensee shall ensure that during transportation of children:

1775 1. Virginia state statutes about safety belts and child restraints are followed as required
1776 by §§ 46.2-1095 through 46.2-1100 of the Code of Virginia, and stated maximum
1777 number of passengers in a given vehicle is not exceeded;

1778 2. The children remain seated, and each child's arms, legs, and head remain inside the
1779 vehicle;

1780 3. Doors are closed and locked unless the manufacturer prevents locking for emergency
1781 purposes;

1782 4. At least one staff member or the driver always remains in the vehicle when one or
1783 more children are present; and

1784 5. The following information is in transportation vehicles:

1785 a. Emergency numbers as specified in 8VAC20-781-590 D;

1786 b. The center's name, address, and phone number;

1787 c. A list of the names of the children being transported and each child's emergency
1788 contact information as required in subdivisions 2 and 3 of 8VAC20-781-50 B;

1789 d. Emergency care plan and information as specified in 8VAC20-781-50 B 5 and B 6;
1790 and

1791 e. A document containing local emergency contact information, potential shelters,
1792 hospitals, and evacuation routes that pertain to each site frequently visited or of
1793 routes frequently driven by center staff for center business, such as field trips, pick-
1794 up, and drop-off of children to or from home and local schools.

1795 D. When entering and leaving vehicles, children shall enter and leave the vehicle from the
1796 curb side of the vehicle or in a protected parking area or driveway and cross streets at corners
1797 or crosswalks or other designated safe crossing point if no corner or crosswalk is available.

1798 E. The licensee shall ensure a method of communication for emergencies during
1799 transportation.

1800 F. The licensee shall ensure that the driver verifies that all children have been removed from
1801 the vehicle at the conclusion of each trip by checking every seat.

1802 **8VAC20-781-650. Animals and pets.**

1803 A. Animals that are kept on the premises of the center or that interact with children at the
1804 center shall be vaccinated if applicable.

1805 B. Animals that are, or are suspected of being, ill or infested with external lice, fleas and
1806 ticks or internal worms shall be removed from contact with children.

1807 C. Monkeys, bats, ferrets, poisonous or dangerous animals, reptiles, psittacine birds (birds
1808 of the parrot family), shall not be accessible to children during the hours children are in care and
1809 the licensee shall ensure that children shall not have direct physical contact with the animals.
1810 The licensee shall ensure that children do not come in physical contact with stray or wild
1811 animals.

1812 D. Animals that have shown aggressive behavior shall not be kept in the center or on the
1813 grounds.

1814 E. All animal excrement shall be removed promptly, disposed of properly, and, if indoors, the
1815 soiled area cleaned and sanitized.

1816 F. If a child is bitten by an animal while in care, the following procedures shall be followed:

1817 1. The site of the bite shall be washed with soap and water immediately;

1818 2. Appropriate first aid shall be administered immediately including appropriate medical
1819 attention if necessary;

1820 3. The child's parent and the local health department shall be notified immediately to
1821 report the animal bite incident; and

1822 4. The incident shall be documented in the child's record as required by 8VAC20-781-50
1823 and a written report shall be given to the parent as required by 8VAC20-781-400.

1824 G. Manure shall be removed from barns, stables, and corrals at least once a day and stored
1825 and disposed of in a manner to prevent the breeding of flies.

1826 Part XI

1827 EVENING AND OVERNIGHT CARE PROGRAMS

1828 **8VAC20-781-660. Evening and overnight care.**

1829 A. For evening care, beds with mattresses or cots with at least one inch of dense padding
1830 shall be used by children who sleep longer than two hours and are not required to sleep in cribs.

1831 B. For overnight care, beds with mattresses or cots with at least two inches of dense
1832 padding shall be used by children who are not required to sleep in cribs.

1833 C. In addition to 8VAC20-781-440 about linens, bedding appropriate to the temperature and
1834 other conditions of the rest area shall be provided.

1835 D. Centers providing evening care or overnight care on an occasional basis are not required
1836 to meet the requirements subsection A and B of this section if sleeping bags or cots are used.

1837 E. If sleeping bags are used, 8VAC20-781-430 A through H about cribs, cots, rest mats and
1838 beds shall also apply to the use of sleeping bags.

1839 F. In centers providing overnight care, an operational tub or shower with heated and cold
1840 water shall be provided.

1841 G. Activities for children in evening or overnight care shall include, as time allows age-
1842 appropriate activities as described in 8VAC20-781-310 through 8VAC20-781-350.

1843 H. Quiet activities shall be available immediately before bedtime.

- 1844 I. School-age children may use bunk beds for sleeping.
1845 J. Primitive camps are not required to have a tub or shower.

1846 Part XII

1847 THERAPEUTIC AND SPECIAL NEEDS PROGRAMS

1848 **8VAC20-781-670. Applicability.**

1849 A child day center that meets the definition of a therapeutic child day program or special
1850 needs child day program shall also comply with all requirements of Parts I through XI of this
1851 chapter.

1852 **8VAC20-781-680. Assessments.**

1853 Therapeutic child day programs shall ensure that an individual assessment is:

- 1854 1. Completed within six months before the child's attendance or 30 days after the first
1855 day of attendance and shall be maintained for each child.
1856 2. Reviewed and updated for each child no less than once every 12 months.

1857 **8VAC20-781-690. Individual service, recreation, education, or treatment plan.**

1858 Therapeutic child day programs shall ensure that an individual service, recreation,
1859 education, or treatment plan is:

- 1860 1. Developed for each child by the director or his designee in consultation with primary
1861 staff responsible for plan implementation.
1862 2. Implemented within 60 days after the first day of the child's attendance.
1863 3. Reviewed every three months and revised if needed by the director or his designee in
1864 consultation with primary staff responsible for plan implementation. The review and
1865 revisions shall be done in partnership with the child's parent.
1866 4. Maintained in the child's record and a copy given to the child's parent.

1867 **8VAC20-781-700. Qualifications of staff.**

1868 Notwithstanding 8VAC20-781-90 and 8VAC20-781-110, therapeutic child day programs and
1869 special needs programs shall ensure that:

- 1870 1. Directors have education and programmatic experience in the group care of children
1871 with special needs.
1872 2. Lead teachers have at least three months of programmatic experience in the group
1873 care of children with special needs.

1874 **8VAC20-781-710. Staff training.**

1875 Therapeutic child day programs and special needs child day programs shall ensure that staff
1876 who work with children:

- 1877 1. Receive training before assuming job responsibilities in:
1878 a. Staff occupational health and safety practices in accordance with Occupational
1879 Safety and Health Administration's bloodborne pathogens regulation (29 CFR
1880 1910.1030);
1881 b. Activity adaptations;
1882 c. Medication administration;
1883 d. The special needs of the children in care including functional abilities and
1884 accommodations;
1885 e. Disabilities and health issues; and
1886 f. Appropriate precautions and intervention strategies.

1887 2. Annually complete eight additional hours of training on topics related to the care of
1888 children with special needs.

1889 **8VAC20-781-720. Staff-to-children ratio requirements.**

1890 A. For therapeutic child day programs and special needs child day programs, in each
1891 grouping of children of preschool age or younger, the following ratios of staff-to-children are
1892 required according to the special needs of the children in care:

1893 1. For children with severe and profound disabilities, multiple special needs, serious
1894 medical need, or serious emotional disturbance: one staff member to three children.

1895 2. For children diagnosed as having an intellectual disability with significant sub-average
1896 intellectual functioning and deficits in adaptive behavior, or with physical and sensory
1897 disabilities, or with autism: one staff member to four children.

1898 3. For children diagnosed as having an intellectual disability in the mild range of
1899 development, children with a developmental delay, or children diagnosed with attention
1900 deficit/hyperactivity disorder (ADHD): one staff member to five children.

1901 4. For children diagnosed with specific learning disabilities: one staff member to six
1902 children.

1903 5. When children with varied special needs are included in a group, the staff-to-children
1904 ratio applicable to the child with the most significant special need in the group shall apply
1905 to the entire group.

1906 6. Whenever 8VAC20-781-270 B requires more staff than subsection A of this section
1907 because of the children's ages, 8VAC20-781-270 B shall take precedence over
1908 subsection A of this section.

1909 B. For therapeutic child day programs and special needs child day programs, in each
1910 grouping of school-age children, the following ratios of staff-to-children are required according to
1911 the special needs of the children in care:

1912 1. For children with severe and profound disabilities, autism, multiple special needs,
1913 serious medical need, or serious emotional disturbance: one staff member to four
1914 children.

1915 2. For children diagnosed as having an intellectual disability with significant sub-average
1916 intellectual functioning and deficits in adaptive behavior, or with physical and sensory
1917 disabilities, ADHD, or other health impairments: one staff member to five children.

1918 3. For children diagnosed as having an intellectual disability in the mild range of
1919 development, or developmentally delayed: one staff member to six children.

1920 4. For children diagnosed with specific learning disabilities or speech or language
1921 impairments: one staff member to eight children.

1922 5. When children with varied special needs are included in a group, the staff-to-children
1923 ratio applicable to the child with the most significant special need in the group shall apply
1924 to the entire group.

1925 C. Group size requirements in 8VAC20-781-270 A do not apply to therapeutic child day
1926 programs and special needs child day programs.

1927 **8VAC20-781-730. Equipment and materials.**

1928 Therapeutic child day programs and special needs child day programs serving children who
1929 use wheelchairs, shall provide appropriate positioning equipment and cushioned vinyl-covered
1930 floor mats for use when activities require children to be out of their wheelchairs.

1931 **8VAC20-781-740. Special feeding needs.**

1932 A. For therapeutic child day programs and special needs child day programs, the
1933 consistency of food shall be appropriate to a child's special feeding needs.

1934 B. Necessary and adaptive feeding equipment and feeding techniques shall be used for
1935 children with special feeding needs according to the information on file pursuant to 8VAC-20-
1936 781-50 B 5.

1937 **8VAC20-781-750. Transportation for non-ambulatory children.**

1938 A. Therapeutic child day programs and special needs child day programs providing
1939 transportation to non-ambulatory children shall ensure children are transported in a vehicle that
1940 is equipped with a ramp or hydraulic lift to allow entry and exit.

1941 B. Wheelchairs shall be equipped with restraining devices and shall be securely fastened to
1942 the floor when used to seat children in a vehicle.

1943 C. Arrangements of wheelchairs in a vehicle shall not impede access to exits.

1944 D. For therapeutic child day programs and special needs child day programs, when the
1945 center is responsible for providing transportation, the center shall develop and implement a plan
1946 based on the needs of the children in care to assure their safe supervision during on-loading,
1947 off-loading, and transporting.

1948 E. When 16 or more children are being transported, there shall be at least one staff member
1949 or adult besides the driver, for each group of 16.

1950 F. For therapeutic child day programs and special needs child day programs, if a child has a
1951 known seizure disorder or neurological, genetic, or physiological disability causing increased
1952 medical risk and that child is being transported, one staff member or adult who is not the driver
1953 and who is trained in first aid and CPR shall be present in the vehicle.