101220.1 IMMUNIZATIONS 101220.1

(a) Prior to admission to a child care center, children shall be immunized against diseases as required by the California Code of Regulations, Title 17, commencing with Section 6000.

(1) Centers that meet the criteria of Health and Safety Code Section 1596.794 are not required to verify or document children's immunizations.

HANDBOOK BEGINS HERE

Health and Safety Code Section 1596.794 states:

Notwithstanding Section 1597.05, or any other provision of law, any day care center that exclusively offers a program of services at which there is no contract or agreement between any parent and the center for the regular care of any child, and for which there is no prearranged schedule of care for any child, shall not be required to verify children's immunizations or tuberculosis testing or maintain files regarding children's immunizations or tuberculosis testing. Upon admission of the child, the parent shall sign an acknowledgment that he or she understands that verification of immunizations and tuberculosis testing is not required for any child accepted for care in this type of program.

(b) The California Code of Regulations, Title 17, Section 6020, requires that children receive appropriate vaccines as follows:

(1) The required immunizations for admission to and attendance at a public or private elementary or secondary school, child care center, day nursery, nursery school, or family day care home, or developmental center shall be those set forth, according to age, in Table 1.

(2) In Table 1 of Section 6020 and in Table 2 of Section 6035, DTP (or DPT) means diphtheria and tetanus toxoids and pertussis vaccine, including DTaP vaccine. DT (or Td) and Td (or Dt) means diphtheria and tetanus toxoids.

(3) For pupils who have reached their seventh birthday, a history of any preparations containing both diphtheria and tetanus toxoids (DTP, DT, Td, etc.) shall be acceptable as meeting the requirement for tetanus and diphtheria toxoids that is set forth in Table 1.

(4) Pupils who have reached their seventh birthday shall be exempt from the pertussis and mumps immunization requirements.

(5) Combination vaccines that include measles, mumps and rubella components shall be acceptable as meeting the requirements for these vaccines that are set forth in Table 1.

HANDBOOK CONTINUES

101220.1 IMMUNIZATIONS (Continued) **101220.1**

HANDBOOK CONTINUES

(c) The California Code of Regulations, Title 17, Section 6035(a), requires that:

Any pupil seeking admission to a given public or private elementary or secondary school, child care center, day nursery, nursery school, family day care home, or development center who lacks documentation of having received all the required vaccine doses against poliomyelitis, diphtheria, tetanus, pertussis, measles, rubella, Haemophilus influenzae type B, mumps and hepatitis B as specified in Table 1, Section 6020, and has not obtained a permanent medical exemption or a personal beliefs exemption to immunization in accordance with Section 6051, may be admitted conditionally if:

(1) he or she has not received all the immunizations required for his or her age group but has commenced receiving doses of all the vaccines in accordance with Table 2, is not currently due for any doses at the time of admission (if he or she is due for any doses at this time they must be obtained before admission), and the pupil's parent or guardian is notified of the date by which the pupil must complete all the required immunizations in accordance with Table 2; or

(2) he or she is under age 18 months and has received all the immunizations required for his or her age group but will require additional vaccine doses at an older age, and the pupil's parent or guardian is notified of the date by which the pupil must complete all the remaining doses when they become due in accordance with Table 1, Section 6020; or

(3) he or she has obtained a temporary medical exemption from immunization in accordance with Section 6050, and the pupil's parent or guardian is notified of the date by which the pupil must complete all the required immunizations when the temporary exemption terminates; or

(4) he or she is a pupil entering a child care center governed by Education Code Section 8263(c), where a different deadline for obtaining all required immunizations may apply.

(d) The California Code of Regulations, Title 17, Section 6035(b), requires that children receive appropriate vaccines as follows:

The public or private elementary or secondary school, child care center, day nursery, nursery school, family day care home, or development center shall not allow the admission of any pupil seeking entry who does not meet the requirements for admission under Section 6025 or 6035. The principal or administrator shall advise the pupil, or the parent or guardian, to contact a physician or agency that provides immunizations.

HANDBOOK CONTINUES

101220.1 IMMUNIZATIONS (Continued) **101220.1**

HANDBOOK CONTINUES

TABLE 1. IMMUNIZATION REQUIREMENTS

Institution	Age	Vaccine	Total Doses Received
Child care center, day nursery, nursery school, family day care home, development center	Less than 2 months	None	
Same as above	2-3 months	1. Polio* .....1 dose 2. DTP.....1 dose 3. Hib.....1 dose 4. Hepatitis B**.....1 dose	
Same as above	4-5 months	1. Polio*..... 2 doses 2. DTP, or combination of DTP and diphtheria-tetanus toxoids..... 2 doses 3. Hib..... 2 doses 4. Hepatitis B**..... 2 doses	
Same as above	6-14 months	1. Polio*..... 2 doses 2. DTP, or combination of DTP and diphtheria-tetanus toxoids..... 3 doses 3. Hib..... 2 doses 4. Hepatitis B**..... 2 doses	
Same as above	15-17 months	1. Polio*..... 2 doses 2. DTP, or combination of DTP and diphtheria-tetanus toxoids..... 3 doses 3. Measles, rubella, and mumps ..... 1 dose of each separately or combined on or after the 1st birthday 4. Hib.....1 dose on or after the 1st birthday 5. Hepatitis B**..... 2 doses	

HANDBOOK CONTINUES

101220.1 IMMUNIZATIONS (Continued) **101220.1**

HANDBOOK CONTINUES

Institution	Age		Vaccine	Total Doses Received
Same as above	18 months - 5years	1.	Polio*	3 doses
		2.	DTP, or combination of DTP and diphtheria-tetanus toxoids	4 doses
		3.	Measles, rubella, and mumps	1 dose of each separately or combined on or or after the 1st birthday
		4.	Hib***	1 dose on or after the 1st birthday
		5.	Hepatitis B**	3 doses
Elementary school at kindergarten level and above	4-6 years	1.	Polio*	4 doses, except that a total of 3 doses is acceptable if at least one dose was given on or after the 2nd birthday
		2.	DTP, or combination of DTP and diphtheria-tetanus toxoids	At least 4 doses. One more dose required if the last dose was given before the 2nd birthday.
		3.	Measles, rubella, and mumps	1 dose of each, separately or combined on or after the 1st birthday. Pupils entering a kindergarten (or first grade if kindergarten skipped) on or after August 1, 1997 are required to have 2 doses of measles-containing vaccine, both given on or after the first birthday.
		4.	Hepatitis B**	3 doses

HANDBOOK CONTINUES

101220.1 IMMUNIZATIONS (Continued) **101220.1**

HANDBOOK CONTINUES

Institution	Age		Vaccine	Total Doses Received
Elementary school, secondary school	7-17 years	1.	Polio*	4 doses, except that a total of 3 doses is acceptable if at least one dose was given on or after the 2nd birthday.
		2.	Diphtheria and tetanus toxoids, given as DTP, DT, or Td (pertussis not required)	At least 3 doses. One more Td dose is required if the last dose was given before the 2nd birthday.
		3.	Measles and rubella (mumps not required)	1 dose of each, separately or combined, on or after the 1st birthday

* Oral polio vaccine (OPV) or inactivated polio vaccine (IPV) or any combination of these vaccines is acceptable.

** Applies only to children entering at kindergarten level (or at first grade level if kindergarten skipped) or below on or after August 1, 1997.

*** Required only for children who have not reached the age of 4 years 6 months.

HANDBOOK CONTINUES

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101220.1 IMMUNIZATIONS (Continued) **101220.1**

HANDBOOK CONTINUES

TABLE 2. CONDITIONAL ADMISSION IMMUNIZATION SCHEDULE

Vaccine	Dose	Time Intervals
Polio*	1st dose	Before admission.
	2nd dose	As early as 6 weeks but no later than 10 weeks after the 1st dose. Before admission if 10 or more weeks have elapsed since the 1st dose at the time of admission.
	3rd dose	As early as 6 weeks but no later than 12 months after the 2nd dose. Before admission if 12 or more months have elapsed since the 2nd dose at the time of admission.
	4th dose (Required only for entry to kindergarten level or above	If the 3rd dose was given before the 2nd birthday one more dose is required before admission.

HANDBOOK CONTINUES

101220.1 IMMUNIZATIONS (Continued) **101220.1**

HANDBOOK CONTINUES

TABLE 2. CONDITIONAL ADMISSION IMMUNIZATION SCHEDULE (Continued)

Vaccine	Dose	Time Intervals
Diphtheria, Tetanus, and Pertussis	1st dose	Before admission.
FOR PUPILS UNDER AGE 7 YEARS:	2nd dose	As early as 4 weeks but no later than 8 weeks after the 1st dose. Before admission if 8 or more weeks have elapsed since the 1st dose at the time of admission.
Diphtheria-tetanus-pertussis (DTP) or combination of DTP and diphtheria-tetanus toxoids.	3rd dose	As early as 4 weeks but no later than 8 weeks after the 2nd dose. Before admission if 8 or more weeks have elapsed since the 2nd dose at the time of admission.
	4th dose	As early as 6 months but no later than 12 months after the 3rd dose. Before admission if 12 or more months have elapsed since the 3rd dose at the time of admission.
	5th dose or more..... (Required only for pupils ages 4-6 years for entry to kindergarten level and above)	If the last dose was given before the 2nd birthday, one more dose is required before admission.

HANDBOOK CONTINUES

101220.1 IMMUNIZATIONS (Continued) **101220.1**

HANDBOOK CONTINUES

TABLE 2. CONDITIONAL ADMISSION IMMUNIZATION SCHEDULE (Continued)

Vaccine	Dose	Time Intervals
FOR PUPILS AGE 7 YEARS AND OLDER:		
Diphtheria-tetanus (Pertussis not required)	1st dose ..... 2nd dose	Before admission. As early as 4 weeks but no later than 8 weeks after the 1st dose. Before admission if 8 or more weeks have elapsed since the 1st dose at the time of admission.
	3rd dose	As early as 6 months but no later than 12 months after the 2nd dose. Before admission if 12 or more months have elapsed since the 2nd dose at the time of admission.
	4th dose or more	If the last dose was given before the 2nd birthday, one more dose is required before admission.
Measles	One dose only	Before admission. If the pupil is under age 15 months, this dose is required when age 15 months is reached.
Note: For children entering kindergarten (or first grade if kindergarten is skipped) on or after August 1, 1997, two doses are required.	1st dose ..... 2nd dose	Before admission. As early as 1 month but no later than 3 months after the 1st dose.
Rubella	One dose only	Before admission. If the pupil is under age 15 months, this dose is required when age 15 months is reached.

HANDBOOK CONTINUES

101220.1 IMMUNIZATIONS (Continued) **101220.1**

HANDBOOK CONTINUES

TABLE 2. CONDITIONAL ADMISSION IMMUNIZATION SCHEDULE (Continued)

Vaccine	Dose	Time Intervals
Mumps (Not required for pupils age 7 years and older)	One dose only	Before admission. If the pupil is under age 15 months, this dose is required when age 15 months is reached.
Hib Children 2-14 months old	Two doses	1st dose before admission. 2nd dose as early as 2 months but no later than 3 months after the 1st dose.
Children 15 months - 4 1/2 years old	One dose	Before admission.
Hepatitis B -- For children entering at kindergarten level (or first grade if kindergarten skipped) or below on or after August 1, 1997	1st dose ..... 2nd dose ..... 3rd dose	Before admission. As early as 1 month but no later than 2 months after the first dose. Infants and children under age 18 months: As early as 2 months but no later than 12 months after the 2nd dose. Children age 18 months and older: As early as 2 months but no later than 6 months after the 2nd dose.

* Oral polio vaccine (OPV) or inactivated polio vaccine (IPV) or any combination of these vaccines is acceptable.

HANDBOOK ENDS HERE

(e) The licensee shall be permitted to exempt a child from immunization requirements provided that one of the following criteria is met and the related documentation is kept in the child's file:

(1) A physician provides a written statement that an immunization(s) should not be given to the child and specifies how long this exemption is expected to be needed.

(2) The child's authorized representative provides a written statement that immunizations are contrary to his/her personal or religious beliefs.

101220.1 IMMUNIZATIONS (Continued) **101220.1**

(f) As required by the California Code of Regulations, Title 17, Section 6035(b), a child who does not meet any of the requirements in Sections 101220.1(c), (d) or (e) above shall not be admitted to a child care center.

(g) The licensee shall document each child's immunizations and shall maintain such documentation in the center for as long as the child is enrolled.

(1) This requirement includes updating each child's immunization record when the child is due to receive required immunizations after enrollment in the child care center.

HANDBOOK BEGINS HERE

(h) The California Code of Regulations, Title 17, Section 6075, specifies in pertinent part that each child care center shall report to state and local health departments as follows:

(1) The ... child care center ... shall file a report with the state and local health departments on the immunization status of new entrants annually or when needed to determine immunization status such as during an epidemic or potential epidemic.... The Department of Health Services or the local health department will provide the appropriate reporting form.

HANDBOOK ENDS HERE

(i) The licensee is not required to document immunizations of children also enrolled in a public or private elementary school.

NOTE: Authority cited Section 1596.81, Health and Safety Code. Reference: Sections 1596.72, 1596.73, 1596.81, 1597.05 and 1596.794, Health and Safety Code.

101221 CHILD'S RECORDS **101221**

(a) The licensee shall ensure that a separate, complete and current record for each child is maintained in the child care center.

(b) Each record shall contain information including, but not limited to, the following:

(1) Name of child.

(2) Birthdate.

101221 CHILD'S RECORDS (Continued) **101221**

(3) Sex.

(4) Date of Admission.

(5) Name, address and telephone number of the child's authorized representative and of relatives or others who can assume responsibility for the child if the authorized representative cannot be reached when necessary.

(6) A signed copy of the admission agreement specified in Section 101219.

(7) Name, address and telephone number of the child's physician and dentist and any other medical/dental or mental health providers.

(8) Medical assessment, including ambulatory status as specified in Section 101220, and the following health information:

(A) Dietary restrictions and allergies.

(B) Instructions for action to be taken in case the child's authorized representative, or the physician designated by the authorized representative, cannot be reached in an emergency.

(C) A signed consent form for emergency medical treatment unless the child's authorized representative has signed the statement specified in Section 101220(f).

(9) Record of any illness or injury requiring treatment by a physician or dentist and for which the center provided assistance to the child in meeting his/her necessary medical or dental needs.

(10) Record of current medications, including the name of the prescribing physician, and instructions, if any, regarding control and custody of medications.

(11) Signed and dated authorization from the child's authorized representative for each activity away from the center.

(12) Date of termination of services.

(c) All information and records obtained from or regarding children shall be confidential.

(1) The licensee shall be responsible for safeguarding the confidentiality of record contents.

101221 CHILD'S RECORDS (Continued) **101221**

(2) Except as specified in (d) below, or as otherwise authorized by law, the licensee and all employees shall not reveal or make available confidential information.

(d) All children's records shall be available to the Department to inspect, audit, and copy upon demand during normal business hours. Records may be removed if necessary for copying. Removal of records shall be subject to the following requirements:

(1) Licensing representatives shall not remove the following current records for current children in care unless the same information is otherwise readily available in another document or format:

(A) Name, address and telephone number of the child's authorized representative, and of relatives or others who can assume responsibility for the child if the authorized representative cannot be reached, as specified in Section 101221(a)(5).

(B) Name, address and telephone number of the child's physician, dentist and any other health-care providers as specified in Section 101221(a)(7).

(C) Medical assessment and other information as specified in Section 101221(a)(8).

(D) Records of any current illness or injury as specified in Section 101221(a)(9).

(E) Record of current medications as specified in Section 101221(a)(10).

(F) Any current authorizations for children's activities away from the center as specified in Section 101221(a)(11).

(G) Immunization records as specified in Section 101220.1(g).

(H) Any other records containing current emergency or health-related information for current children in care.

(2) Prior to removing any records, a licensing representative shall prepare a list of the records to be removed, sign and date the list upon removal of the records, and leave a copy of the list with the administrator or designee.

(3) Licensing representatives shall return the records undamaged and in good order within three business days following the date the records were removed.

(e) A child's records shall also be open to inspection by the child's authorized representative.

(f) The information specified in (b)(1) through (b)(12) above shall be updated as necessary to ensure the accuracy of the child's record.

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101221 CHILD'S RECORDS (Continued) **101221**

(g) Originals or photocopies of all children's records shall be kept for at least three years following termination of service to the child.

(h) The licensee shall provide the name, address and telephone number of the child's authorized representative to a peace officer as specified in Health and Safety Code Section 1596.876.

HANDBOOK BEGINS HERE

Health and Safety Code Section 1596.876 provides:

In any case in which a child day care facility releases a minor to a peace officer pursuant to Section 305 of the Welfare and Institutions Code, the official in charge of that facility shall provide the peace officer with the address and telephone number of the minor's parent or guardian in order to enable the peace officer to make the notification required by Section 308 of the Welfare and Institutions Code.

HANDBOOK ENDS HERE

NOTE: Authority cited: Section 1596.81, Health and Safety Code. Reference: Sections 1596.72, 1596.73, 1596.857, 1596.876 and 1597.05, Health and Safety Code; and *Golden Day Schools, Inc. v. Pirillo* (C.D. Cal 2000) 118 F.Supp.2nd 1037.

101223 PERSONAL RIGHTS **101223**

(a) The licensee shall ensure that each child is accorded the following personal rights:

(1) To be accorded dignity in his/her personal relationships with staff and other persons.

(2) To be accorded safe, healthful and comfortable accommodations, furnishings and equipment to meet his/her needs.

101223 PERSONAL RIGHTS (Continued) **101223**

(3) To be free from corporal or unusual punishment, infliction of pain, humiliation, intimidation, ridicule, coercion, threat, mental abuse or other actions of a punitive nature including but not limited to: interference with functions of daily living including eating, sleeping or toileting; or withholding of shelter, clothing, medication or aids to physical functioning.

(4) To be informed, and to have his/her authorized representative informed, by the licensee of the law regarding complaints including, but not limited to, information on confidentiality and the address and telephone number of the Department's complaint unit.

HANDBOOK BEGINS HERE

(A) Provisions regarding inspection requests are found in Health and Safety Code Section 1596.853:

1. Any person may request an inspection of any child day care facility in accordance with the California Child Day Care Facilities Act by transmitting to the department notice of an alleged violation of applicable requirements prescribed by statutes or regulations of this state....

2. The substance of the complaint shall be provided to the licensee no earlier than at the time of the inspection....

3. Upon receipt of a complaint, the department shall make a preliminary review and, unless the department determines that the complaint is willfully intended to harass a licensee or is without any reasonable basis, the department shall make an onsite inspection within 10 days after receiving the complaint. In either event, the complainant shall be promptly informed of the department's proposed course of action.

HANDBOOK ENDS HERE

(5) To be free to attend religious services or activities of his/her choice.

(A) Attendance at religious services in or outside of the center shall be voluntary. The child's authorized representative shall make decisions about the child's attendance at religious services.

(6) Not to be locked in any room, building or center premises by day or night.

101223 PERSONAL RIGHTS (Continued) **101223**

(A) The licensee is not prohibited by this provision from locking exterior doors and windows or from establishing rules for the protection of children provided the children are able to exit the center.

(B) The licensee shall obtain prior approval from the Department to utilize means other than those specified in (A) above for securing exterior doors and windows.

(7) Not to be placed in any restraining device. Postural supports may be used as specified in Section 101223.1.

(8) To receive or reject medical care, or health-related services, except for minors for whom a guardian, conservator or other legal authority has been appointed.

(b) The center shall inform each child's authorized representative of the rights specified in (a) (1) through (8) above.

(1) The center shall give each authorized representative a copy of the Personal Rights form (LIC 613A [9/96]).

(A) Each authorized representative shall be asked to sign and date the acknowledgement-of-receipt statement at the bottom of the LIC 613A (9/96). This documentation shall be kept in the child's file.

(2) The center shall post a copy of the LIC 613A (9/96) in a prominent, publicly accessible area in the center.

(c) The licensee shall ensure that each child is accorded the personal rights specified in this section.

NOTE: Authority cited: Section 1596.81, Health and Safety Code. Reference: Sections 1596.72, 1596.73, 1596.81 and 1597.05, Health and Safety Code.

101223.1 POSTURAL SUPPORTS/PROTECTIVE DEVICES 101223.1

(a) Postural supports may be used with prior approval by the Department as specified in (1) through (5) below.

(1) Supportive restraints shall be limited to appliances or devices, including straps, spring-release trays or soft ties, that are used to support a child in a bed, chair or wheelchair to prevent falling.

(2) All requests to use supportive restraints shall be in writing and shall include a written order from a physician indicating the need for such restraints. The Department is authorized to require additional documentation in order to evaluate the request.

(3) Approved supportive restraints shall be fastened or tied in a manner that permits quick release.

(4) The Department shall approve the use of supportive restraints only after the appropriate fire clearance, as required by Section 101171, has been secured.

(5) The Department has the authority to grant conditional and/or limited approvals to use supportive restraints.

NOTE: Authority cited: Section 1596.81, Health and Safety Code. Reference: Sections 1596.72, 1596.73, 1596.81 and 1597.05, Health and Safety Code.

101223.2 DISCIPLINE 101223.2

(a) Any form of discipline or punishment that violates a child's personal rights as specified in Section 101223 shall not be permitted regardless of authorized representative consent or authorization.

NOTE: Authority cited: Section 1596.81, Health and Safety Code. Reference: Sections 1596.72, 1596.73, 1596.81 and 1597.05, Health and Safety Code.

101224 TELEPHONES 101224

(a) All child care centers shall have working telephone service on the premises.

NOTE: Authority cited: Section 1596.81, Health and Safety Code. Reference: Sections 1596.72, 1596.73 and 1596.81, Health and Safety Code.

101225 TRANSPORTATION 101225

(a) Only drivers licensed for the type of vehicle operated shall be permitted to transport children.

(b) The manufacturer's rated seating capacity of the vehicles shall not be exceeded.

(c) Motor vehicles used to transport children shall be maintained in a safe operating condition.

(d) All vehicle occupants shall be secured in an appropriate restraint system.

(e) Children shall not be left in parked vehicles.

(f) The licensee shall post signs at the entrance to the child care center that provide the telephone number of the local health department and information on child passenger restraint systems pursuant to Health and Safety Code section 1596.95(g) and Vehicle Code sections 27360 and 27360.5.

(1) The signs shall provide all of the following information:

(A) Protect your child--it is the law.

(B) All the information specified in Sections 27360 and 27360.5 of the Vehicle Code regarding child passenger restraint systems.

(C) Call your local health department for more information.

HANDBOOK BEGINS HERE

Health and Safety Code section 1596.95(g) provides:

Evidence satisfactory to the department that the applicant has posted signs at the point of entry to the facility that provide the telephone number of the local health department and state all of the following:

(1) Protect your child--it is the law.

(2) All the information specified in Sections 27360 and 27360.5 of the Vehicle Code regarding child passenger restraint systems.

(3) Call your local health department for more information.

HANDBOOK CONTINUES

101225 TRANSPORTATION (Continued) **101225**

HANDBOOK CONTINUES

Vehicle Code section 27315(c)(1) provides:

As used in this section, "motor vehicle" means a passenger vehicle, a motortruck, or a truck tractor, but does not include a motorcycle.

Vehicle Code section 27315(d)(2) provides:

For purposes of this section the phrase, "properly restrained by a safety belt" means that the lower (lap) portion of the belt crosses the hips or upper thighs of the occupant and the upper (shoulder) portion of the belt, if present, crosses the chest in front of the occupant.

Vehicle Code section 27360 provides:

(a) Except as provided in Section 27363, a parent, legal guardian, or driver shall not transport on a highway in a motor vehicle, as defined in paragraph (1) of subdivision (c) of Section 27315, a child or ward who is under eight years of age, without properly securing that child in a rear seat in an appropriate child passenger restraint system meeting applicable federal motor vehicle safety standards.

(b) Except as provided in Section 27363, a parent, legal guardian, or driver who transports a child under two years of age on a highway in a motor vehicle, as defined in paragraph (1) of subdivision (c) of Section 27315, shall properly secure the child in a rear-facing child passenger restraint system that meets applicable federal motor vehicle safety standards, unless the child weighs 40 or more pounds or is 40 or more inches tall. The child shall be secured in a manner that complies with the height and weight limits specified by the manufacturer of the child passenger restraint system.

(c) Subdivision (a) does not apply to a driver if the parent or legal guardian of the child is also present in the motor vehicle and is not the driver.

Vehicle Code section 27360.5 provides:

(a) A parent, legal guardian, or driver shall not transport on a highway in a motor vehicle, as defined in paragraph (1) of subdivision (c) of Section 27315, a child or ward who is eight years of age or older, but less than 16 years of age, without properly securing that child or ward in an appropriate child passenger restraint system or safety belt meeting applicable federal motor vehicle safety standards.

(b) Subdivision (a) does not apply to a driver if the parent or legal guardian of the child is also present in the motor vehicle and is not the driver.

HANDBOOK CONTINUES

101225 TRANSPORTATION (Continued) **101225**

HANDBOOK CONTINUES

Vehicle Code section 27363 provides:

(a) The court may exempt from the requirements of this article any class of child by age, weight, or size if it is determined that the use of a child passenger restraint system would be impractical by reason of physical unfitness, medical condition, or size. The court may require satisfactory proof of the child's physical unfitness, medical condition, or size and that an appropriate special needs child passenger restraint system is not available.

(b) In case of a life-threatening emergency, or when a child is being transported in an authorized emergency vehicle, if there is no child passenger restraint system available, a child may be transported without the use of that system, but the child shall be secured by a seatbelt.

(c) A child weighing more than 40 pounds may be transported in the backseat of a vehicle while wearing only a lap safety belt when the backseat of the vehicle is not equipped with a combination lap and shoulder safety belt.

(d) Notwithstanding Section 27360, a child or ward under eight years of age who is four feet nine inches in height or taller may be properly restrained by a safety belt, as defined in paragraph (2) of subdivision (d) of Section 27315, rather than by a child passenger restraint system.

(e) Notwithstanding Section 27360, a child or ward under eight years of age may ride properly secured in an appropriate child passenger restraint system meeting applicable federal motor vehicle safety standards in the front seat of a motor vehicle under any of the following circumstances:

(1) There is no rear seat.

(2) The rear seats are side-facing jump seats.

(3) The rear seats are rear-facing seats.

(4) The child passenger restraint system cannot be installed properly in the rear seat.

(5) All rear seats are already occupied by children seven years of age or under.

HANDBOOK CONTINUES

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101225 TRANSPORTATION (Continued) **101225**

HANDBOOK CONTINUES

(6) Medical reasons necessitate that the child or ward not ride in the rear seat. The court may require satisfactory proof of the child's medical condition.

(f) Notwithstanding subdivision (e), a child shall not be transported in a rear-facing child passenger restraint system in the front seat of a motor vehicle that is equipped with an active frontal passenger airbag.

HANDBOOK ENDS HERE

NOTE: Authority cited: Section 1596.81, Health and Safety Code. Reference: Sections 1596.72, 1596.73, 1596.81 and 1596.95, Health and Safety Code.

101226 HEALTH-RELATED SERVICES 101226

(a) The licensee shall immediately notify the child's authorized representative if the child becomes ill or sustains an injury more serious than a minor cut or scratch. The licensee shall obtain specific instructions from the authorized representative regarding action to be taken.

(1) In the case of an illness severe enough to require isolation of the child, the center shall follow the procedures specified in Section 101226.2.

(2) In the case of less serious injuries including, but not limited to, minor cuts, scratches and bites from other children requiring assessment and/or administration of first aid by staff, the licensee shall document the injury in the child's record and notify the child's authorized representative of the nature of the injury when the child is picked up from the center.

(b) The licensee shall make prompt arrangements for obtaining medical treatment for any child if necessary.

(c) The licensee shall obtain emergency medical treatment without specific instructions from the child's authorized representative if the authorized representative cannot be reached immediately, or if the nature of the child's illness or injury is such that there should be no delay in getting medical treatment for the child.

(1) The teacher supervising activities away from the center premises shall carry one of the following for each child engaged in such activities:

(A) A signed consent form for emergency medical treatment; or

(B) For a child not required to have a consent form for emergency medical treatment pursuant to Section 101220(f), the phone numbers of the authorized representative, relatives or others who can assume responsibility for the child in an emergency.

(d) The licensee shall maintain the following first-aid supplies in a location accessible to staff but inaccessible to children:

(1) A current edition of a first-aid manual.

(2) Sterile first-aid dressings.

(3) Bandages or roller bandages.

(4) Adhesive tape.

(5) Scissors.

(6) Tweezers.

(7) Thermometer.

(8) Antiseptic solution.

101226 HEALTH-RELATED SERVICES **101226**
(Continued)

(e) In centers where the licensee chooses to handle medications:

(1) All prescription and nonprescription medications shall be centrally stored in accordance with the requirements specified below:

(A) Medications shall be kept in a safe place inaccessible to children.

(B) Each container shall have an unaltered label.

(C) A refrigerator shall be used to store any medication that requires refrigeration.

(2) All prescription and nonprescription medications shall be maintained with the child's name and shall be dated.

(3) Prescription medications may be administered if all of the following conditions are met:

(A) Prescription medications shall be administered in accordance with the label directions as prescribed by the child's physician.

(B) For each prescription medication, the licensee shall obtain, in writing, approval and instructions from the child's authorized representative for the administration of the medication to the child.

1. This documentation shall be kept in the child's record.

2. The instructions from the child's authorized representative shall not conflict with the label directions as prescribed by the child's physician.

(4) Nonprescription medications may be administered without approval or instructions from the child's physician if all of the following conditions are met:

(A) Nonprescription medications shall be administered in accordance with the product label directions on the nonprescription medication container(s).

(B) For each nonprescription medication, the licensee shall obtain, in writing, approval and instructions from the child's authorized representative for the administration of the medication to the child.

101226 HEALTH-RELATED SERVICES 101226
(Continued)

1. This documentation shall be kept in the child's record.

2. The instructions from the child's authorized representative shall not conflict with the product label directions on the nonprescription medication container(s).

(5) The licensee shall develop and implement a written plan to record the administration of prescription and nonprescription medications and to inform the child's authorized representative daily when such medications have been given.

(6) When no longer needed by the child, or when the child withdraws from the center, all medications shall be returned to the child's authorized representative or disposed of after an attempt to reach the authorized representative.

NOTE: Authority cited: Section 1596.81, Health and Safety Code. Reference: Sections 1596.72, 1596.73, 1596.81 and 1597.05, Health and Safety Code.

101226.1 DAILY INSPECTION FOR ILLNESS
101226.1

(a) The licensee shall be responsible for ensuring that children with obvious symptoms of illness including, but not limited to, fever or vomiting, are not accepted.

(1) Additional attention shall be paid to children who:

(A) Have been absent because of illness.

(B) Have been exposed to a contagious disease.

(b) The licensee shall develop and implement a written inspection procedure that shall include the following:

(1) No child shall be accepted without contact between center staff and the person bringing the child to the center.

(2) The licensee shall require that the person bringing the child to the center remain until the child is accepted.

(A) After the child has been determined to be without obvious signs of illness and has been accepted, the center shall require that the person sign the child in.

NOTE: Authority cited: Section 1596.81, Health and Safety Code. Reference: Sections 1596.72, 1596.73, 1596.81 and 1597.05, Health and Safety Code.

101226.2 ISOLATION FOR ILLNESS 101226.2

(a) A center shall be equipped to isolate and care for any child who becomes ill during the day.

(1) The isolation area shall be located to afford easy supervision of children by center staff.

(2) The isolation area shall be equipped with a mat, cot, couch or bed for each ill child.

(3) The isolation area shall not be located in the kitchen area or the general-use toilet area.

(4) In combination centers, only one isolation area that serves all licensed components is required.

(b) The child's authorized representative shall be notified immediately when the child becomes ill enough to require isolation, and shall be asked to have the child removed from the center as soon as possible.

NOTE: Authority cited: Section 1596.81, Health and Safety Code. Reference: Sections 1596.72, 1596.73, 1596.81 and 1597.05, Health and Safety Code.

101226.3 OBSERVATION OF THE CHILD 101226.3

(a) The behavior and health of the children shall be continually observed throughout the period of attendance.

(b) Any unusual behavior, any injury or any signs of illness requiring assessment and/or administration of first aid by staff shall be reported to the child's authorized representative and recorded in the child's record.

NOTE: Authority cited: Section 1596.81, Health and Safety Code. Reference: Sections 1596.72, 1596.73, 1596.81 and 1597.05, Health and Safety Code.

101227 FOOD SERVICE 101227

(a) In child care centers providing meals to children, the following shall apply:

(1) All food shall be safe and of the quality and in the quantity necessary to meet the needs of the children. Each meal shall include, at a minimum, the amount of food components as specified by Title 7, Code of Federal Regulations, Part 226.20, (Revised January 1, 1990) Requirements for Meals, for the age group served. All food shall be selected, stored, prepared and served in a safe and healthful manner.

101227 FOOD SERVICE **101227**
(Continued

HANDBOOK BEGINS HERE

(A) REQUIREMENTS FOR MEALS: (as specified by Title 7, Code of Federal Regulations, Part 226.20.)

CHILD CARE INFANT MEAL PATTERN

	Birth through 3 months	4 through 7 months	8 through 11 months
Breakfast	4-6 fl. oz. formula[1]	4-8 fl. oz. formula[1] or breast milk. 0-3 Tbsp. infant cereal[2] (optional).	6-8 fl. oz. formula[1], breast milk, or whole milk. 2-4 Tbsp. infant cereal[2]. 1-4 Tbsp. fruit and/or vegetable.
Lunch or Supper	4-6 fl. oz. formula[1]	4-8 fl. oz. formula[1] or breast milk. 0-3 Tbsp. infant cereal[2] (optional). 0-3 Tbsp. fruit and/or vegetable (optional).	6-8 fl. oz. formula[1], breast milk, or whole milk. 2-4 Tbsp. infant cereal[2] and/or 1-4 Tbsp. meat, fish, poultry, egg yolk, or cooked dry beans or peas, or 1/2-2 oz. cheese or 1-4 oz. cottage cheese, cheese food, or cheese spread. 1-4 Tbsp. fruit and/or vegetable.
Supplement	4-6 fl. oz. formula[1].	4-6 fl. oz. formula[1].	2-4 fl. oz. formula[1], breast milk, whole milk, or fruit juice[3]. 0-1/2 bread or 0-2 crackers (optional)[4].

HANDBOOK CONTINUES

101227 FOOD SERVICE (Continued) **101227**

HANDBOOK CONTINUES

1 Shall be iron-fortified infant formula.
2 Shall be iron-fortified dry infant formula.
3 Shall be full-strength fruit juice.
4 Shall be from whole-grain or enriched meal or flour.

(NOTE: Caution should be used with foods that can cause choking in young children and infants [under 4 years of age]. Such foods include, but are not limited to, nuts, e.g., peanuts; popcorn; large pieces of raw vegetables; large grapes; and hot dogs.)

BREAKFAST

(1) The minimum amount of food components to be served as breakfast as set forth in paragraph (a)(1) of [7 CFR, Part 226.20, Revised January 1, 1990] are as follows:

Food Components	Age 1 and 2	Age 3 through 5	Age 6 through 12[1]
Milk			
Milk, fluid.	1/2 cup[2]	3/4 cup	1 cup
Vegetables and Fruits			
Vegetable(s) and/or fruit(s) or Full-strength vegetable or fruit juice or an equivalent quantity of any combination of vegetable(s), fruit(s), and juice	1/4 cup	1/2 cup	1/2 cup
	1/4 cup	1/2 cup	1/2 cup

HANDBOOK CONTINUES

101227 FOOD SERVICE (Continued) **101227**

HANDBOOK CONTINUES

BREAKFAST (Cont.)

Food Components	Age 1 and 2	Age 3 through 5	Age 6 through 12[1]
Bread and Bread Alternates[3]			
Bread	1/2 slice	1/2 slice	1 slice
or			
Cornbread, biscuits, rolls, muffins, etc.[4]	1/2 serving	1/2 serving	1 serving
or			
Cold dry cereal[5]	1/4 cup or 1/3 oz.	1/3 cup or 1/2 oz.	3/4 cup or 1 oz.
or			
Cooked cereal	1/4 cup	1/4 cup	1/2 cup
or			
Cooked pasta or noodle products	1/4 cup	1/4 cup	1/2 cup
or			
Cooked cereal grains or an equivalent quantity of any combination of bread/bread alternate.	1/4 cup	1/4 cup	1/2 cup

1 Children age 12 and up may be served adult size portions based on the greater food needs of older boys and girls, but shall be served not less than the minimum quantities specified in this section for children 6 up to 12.
2 For purposes of the requirements outlined in this subsection, a cup means a standard measuring cup.
3 Bread, pasta, or noodle products, and cereal grains, shall be wholegrain or enriched; cornbread, biscuits, rolls, muffins, etc., shall be made with wholegrain or enriched meal or flour; cereal shall be wholegrain or enriched or fortified.
4 Serving sizes and equivalents to be published in guidance materials by FNS.
5 Either volume (cup) or weight (oz.) whichever is less.

(NOTE: Caution should be used with foods that can cause choking in young children and infants [under 4 years of age]. Such foods include, but are not limited to, nuts, e.g., peanuts; popcorn; large pieces of raw vegetables; large grapes; and hot dogs.)

HANDBOOK CONTINUES

101227 FOOD SERVICE (Continued) **101227**

HANDBOOK CONTINUES

LUNCH OR SUPPER

(2) The minimum amounts of food components to be served as lunch or supper as set forth in paragraph (a)(2) of ...[7 CFR, Part 226.20, Revised January 1, 1990] are as follows:

Food Components	Age 1 and 2	Age 3 through 5	Age 6 through 12[1]
Milk			
Milk, fluid.	1/2 cup[2]	3/4 cup	1 cup
Vegetables and Fruits[3]			
Vegetable(s) and/or fruit(s)	1/4 cup total	1/2 cup total	3/4 cup total
Bread and Bread Alternates[4]			
Bread	1/2 slice	1/2 slice	1 slice
or			
Cornbread, biscuits, rolls, muffins, etc.[5]	1/2 serving	1/2 serving	1 serving
or			
Cooked pasta or noodle products	1/4 cup	1/4 cup	1/2 cup
or			
Cooked cereal grains or an equivalent quantity of any combination of bread/bread alternate.	1/4 cup	1/4 cup	1/2 cup
Meat and Meat Alternates			
Lean meat or poultry or fish[6]	1 oz.	1-1/2 oz.	2 oz.
or			
Cheese	1 oz.	1-1/2 oz.	2 oz.
or			
Eggs	1 egg	1 egg	1 egg
or			
Cooked dry beans or peas	1/4 cup	3/8 cup	1/2 cup
or			

HANDBOOK CONTINUES

101227 FOOD SERVICE (Continued) **101227**

HANDBOOK CONTINUES

LUNCH OR SUPPER (Cont.)

Food Components	Age 1 and 2	Age 3 through 5	Age 6 through 12[1]
Peanut butter or soynut butter or other nut or seed butters or Peanuts or soynuts or tree nuts or seeds[7] or An equivalent quantity of any combination of the above meat/meat alternates.	2 tbsp. 1/2 oz.[8] = 50%	3 tbsp. 3/4 oz.[8] = 50%	4 tbsp. 1 oz.[8] = 50%

1 Children age 12 and up may be served adult size portions based on the greater food needs of older boys and girls, but shall be served not less than the minimum quantities specified in this section for children age 6 up to 12.
2 For purposes of the requirements outlined in this subsection, a cup means a standard measuring cup.
3 Serve 2 or more kinds of vegetable(s) and/or fruit(s). Full-strength vegetable or fruit juice may be counted to meet not more than one-half of this requirement.
4 Bread, pasta or noodle products, and cereal grains shall be wholegrain or enriched, cornbread, biscuits, rolls, muffins, etc., shall be made with wholegrain or enriched meal or flour.
5 Serving sizes equivalents to be published in guidance materials by FNS.
6 Edible portion as served.
7 Tree nuts and seeds that may be used as meat alternates are listed in program guidance.
8 No more than 50% of the requirement shall be met with nuts or seeds. Nuts or seeds shall be combined with another meat/meat alternate to fulfill the requirement. For purpose of determining combinations, 1 oz. of nuts or seeds is equal to 1 oz. of cooked lean meat, poultry or fish.

(NOTE: Caution should be used with foods that can cause choking in young children and infants [under 4 years of age]. Such foods include, but are not limited to, nuts, e.g., peanuts; popcorn; large pieces of raw vegetables; large grapes; and hot dogs.)

HANDBOOK CONTINUES

101227 FOOD SERVICE (Continued) **101227**

HANDBOOK CONTINUES

SUPPLEMENTAL FOOD

(3) The minimum amounts of food components to be served as supplemental food as set forth in paragraph (a)(3) of ...[7 CFR, Part 226.20, Revised January 1, 1990] are as follows. Select two of the following four components. (Juice may not be served when milk is served as the only other component.)

Food Components	Age 1 and 2	Age 3 through 5	Age 6 through 12[1]
Milk			
Milk, fluid.	1/2 cup[2]	1/2 cup	1 cup
Vegetables and Fruits			
Vegetable(s) and/or fruit(s)	1/2 cup	1/2 cup	3/4 cup
or			
Full-strength vegetable or fruit juice or an equivalent quantity of any combination of vegetable(s), fruit(s), and juice.	1/2 cup	1/2 cup	3/4 cup
Bread and Bread Alternates[3]			
Bread	1/2 slice	1/2 slice	1 slice
or			
Cornbread, biscuits, rolls, muffins, etc.[4]	1/2 serving	1/2 serving	1 serving
or			
Cold dry cereal[5]	1/4 cup or 1/3 oz.	1/3 cup or 1/2 oz.	3/4 cup or 1 oz.
or			
Cooked cereal	1/4 cup	1/4 cup	1/2 cup
or			
Cooked pasta or noodle products	1/4 cup	1/4 cup	1/2 cup
or			
Cooked cereal grains or an equivalent quantity of any combination of bread/bread alternate.	1/4 cup	1/4 cup	1/2 cup

HANDBOOK CONTINUES

101227 FOOD SERVICE (Continued**)** **101227**

HANDBOOK CONTINUES

SUPPLEMENTAL FOOD (Cont.)

Food Components	Age 1 and 2	Age 3 through 5	Age 6 through 12[1]
Meat and Meat Alternates			
Lean meat or poultry or fish[6]	1/2 oz.	1/2 oz.	1 oz.
or			
Cheese	1/2 oz.	1/2 oz.	1 oz.
or			
Eggs	1/2 egg	1/2 egg	1 egg
or			
Cooked dry beans or peas	1/8 cup	1/8 cup	1/4 cup
or			
Peanut butter or soynut butter or other nut or seed butters	1 tbsp.	1 tbsp.	2 tbsp.
or			
Peanuts or soynuts or tree nuts or seeds[7]	1/2 oz.	1/2 oz.	1 oz.
or			
Yogurt, plain, or sweetened and flavored	2 oz. or 1/4 cup	2 oz. or 1/4 cup	4 oz. or 1/2 cup
or			
An equivalent quantity of any combination of the above meat/meat alternates.			

1 Children age 12 and up may be served adult size portions based on the greater food needs of older boys and girls, but shall be served not less than the minimum quantities specified in this section for children age 6 up to 12.
2 For purposes of the requirements outlined in this paragraph, a cup means a standard measuring cup.
3 Bread, pasta or noodle products, and cereal grains shall be wholegrain or enriched, cornbread, biscuits, rolls, muffins, etc., shall be made with wholegrain or enriched meal or flour; cereal shall be wholegrain or enriched or fortified.
4 Serving sizes and equivalents to be published in guidance materials by FNS.
5 Either volume (cup) or weight (oz.), whichever is less.
6 Edible portion as served.
7 Tree nuts and seeds that may be used as meat alternates are listed in program guidance.

(NOTE: Caution should be used with foods that can cause choking in young children and infants [under 4 years of age]. Such foods include, but are not limited to, nuts, e.g., peanuts; popcorn; large pieces of raw vegetables; large grapes; and hot dogs.)

HANDBOOK ENDS HERE

101227 FOOD SERVICE (Continued) **101227**

(2) Where all food is provided by the center, arrangements shall be made so that each child has available at least three meals per day.

(A) Not more than 15 hours shall elapse between the third meal of one day and first meal of the following day.

(3) Where meal service within a center is elective, arrangements shall be made to ensure availability of a daily food intake meeting the requirements of (a) (1) above for all children who elect meal service in their admission agreement.

(4) Between meals, snacks shall be available for all children unless the food a child may eat is limited by dietary restrictions prescribed by a physician. Each snack shall include at least one serving from each of two or more of the four major food groups.

(5) The following shall be offered daily:

(A) Full-day programs shall offer a midmorning and midafternoon snack.

(B) Full-day programs shall ensure that each child has a lunch.

1. The child's authorized representative may send meals and/or snacks for the child.

(C) Half-day programs shall offer a midmorning or midafternoon snack.

(6) Menus shall be in writing and shall be posted at least one week in advance in an area accessible for review by the child's authorized representative. Copies of the menus as served shall be dated and kept on file for at least 30 days. Menus shall be made available for review by the child's authorized representative and the Department upon request.

(7) Modified diets prescribed by a child's physician as a medical necessity shall be provided.

(A) The licensee shall obtain and follow instructions from the physician or dietitian on the preparation of the modified diet.

(B) A child shall not be served any food to which the child's record indicates he/she has an allergy.

(8) Commercial foods shall be approved by appropriate federal, state and local authorities. All foods shall be selected, transported, stored, prepared and served so as to be free from contamination and spoilage and shall be fit for human consumption. Food in damaged containers shall not be accepted, used or retained.

101227 FOOD SERVICE (Continued) **101227**

(9) Where indicated, food shall be cut, chopped or ground to meet individual needs.

(10) Powdered milk shall not be used as a beverage but shall be allowed in cooking and baking. Raw milk, as defined in Division 15 of the California Food and Agricultural Code, shall not be used. Milk shall be pasteurized.

(11) Except upon written approval by the Department, meat, poultry and meat food products shall be inspected by state or federal authorities. Written evidence of such inspection shall be available for all products not obtained from commercial markets.

(12) All home-canned foods shall be processed in accordance with standards of the University of California Agricultural Extension Service. Home-canned foods from outside sources shall not be used.

(13) If food is prepared off the center premises, the following shall apply:

(A) The preparation source shall meet all applicable requirements for commercial food services.

(B) The center shall have the equipment and staff necessary to receive and serve the food and to clean up.

(C) The center shall maintain the equipment necessary for in-house food preparation, or shall have an alternate source for food preparation and service in the event of an emergency.

(14) All persons engaged in food preparation and service shall observe personal hygiene and food-service sanitation practices that protect food from contamination.

(15) All foods or beverages capable of supporting the rapid and progressive growth of microorganisms that can cause food infections or food intoxications shall be stored in covered containers at 45 degrees F (7.2 degrees C) or less.

(16) Pesticides and other similar toxic substances shall not be stored in food storerooms, kitchen areas, food-preparation areas, or areas where kitchen equipment or utensils are stored.

(17) Soaps, detergents, cleaning compounds or similar substances shall be stored in areas separate from food supplies.

101227 FOOD SERVICE (Continued) **101227**

(18) All kitchen, food-preparation and storage areas shall be kept clean and free of litter and rubbish; and measures shall be taken to keep all such areas free of rodents and other vermin.

(19) All food shall be protected against contamination. Contaminated food shall be discarded immediately.

(20) All equipment (fixed or mobile), dishes and utensils shall be kept clean and maintained in safe condition.

(21) All dishes and utensils used for eating and drinking, and in the preparation of food and drink, shall be cleaned and sanitized after each use.

(A) Dishwashing machines shall reach a temperature of 165 degrees F (74 degrees C) during the washing and/or drying cycle to ensure that dishes and utensils are cleaned and sanitized.

(B) Centers not using dishwashing machines shall clean and sanitize dishes and utensils by an alternative comparable method.

(22) Equipment necessary for the storage, preparation and service of food or snacks shall be provided and shall be well-maintained. Necessary equipment shall include, but not be limited to:

(A) Sink.

(B) Hot and cold running water.

(C) Refrigeration.

(D) Storage space for food.

(23) Tables, dishes and utensils shall be provided in the quantity necessary to serve the children.

(24) Adaptive devices shall be provided for self-help in eating as needed by children.

(25) The food-preparation area shall not be used for:

(A) Children's play activities unless such activities are part of a supervised food-education program.

101227 FOOD SERVICE (Continued) **101227**

(B) Napping.

(C) A passageway for children while the area is being used for food preparation or service.

(b) The Department has the authority to require the center to provide documentation on food purchased and used over a given period, including menus, when necessary to determine if the licensee is complying with the food-service requirements in this chapter.

(1) The Department shall specify in writing the documentation required from the licensee.

NOTE: Authority cited: Section 1596.81, Health and Safety Code. Reference: Sections 1596.72, 1596.73, 1596.81 and 1597.05, Health and Safety Code.

101228 PERSONAL SERVICES (RESERVED) **101228**

101229 RESPONSIBILITY FOR PROVIDING CARE AND SUPERVISION **101229**

(a) The licensee shall provide care and supervision as necessary to meet the children's needs.

(1) No child(ren) shall be left without the supervision of a teacher at any time, except as specified in Sections 101216.2(e)(1) and 101230(c)(1). Supervision shall include visual observation.

NOTE: Authority cited: Section 1596.81, Health and Safety Code. Reference: Sections 1596.72, 1596.73, 1596.81 and 1597.05, Health and Safety Code.

101229.1 SIGN IN AND SIGN OUT **101229.1**

(a) In addition to the sign-in procedure requirement of Section 101226.1(b), the licensee shall develop, maintain and implement a written procedure to sign the child in/out of the child care center that shall, at a minimum, include the following:

(1) The person who signs the child in/out shall use his/her full legal signature and shall record the time of day.

(b) The person who brings the child to, and removes the child from, the center shall sign the child in/out.

101229.1 SIGN IN AND SIGN OUT (Continued) **101229.1**

(c) A person who removes the child from the center during the day, and returns the child to the center the same day, shall sign the child in/out.

(d) The sign-in and sign-out sheets with the signatures required by this section and by Section 101226.1 shall be kept for one month and shall be available at the center for review by the Department.

NOTE: Authority cited: Section 1596.81, Health and Safety Code. Reference: Sections 1596.72, 1596.73, 1596.81 and 1597.05, Health and Safety Code.

101230 ACTIVITIES/NAPPING **101230**

(a) Each center shall provide a variety of daily activities designed to meet the needs of children in care, including but not limited to:

(1) Quiet and active play.

(2) Rest and relaxation.

(3) Eating.

(4) Toileting.

(b) All children shall be given an opportunity to nap or rest without distraction or disturbance from other activities at the center.

(1) A napping space and a cot or mat shall be available for each child under the age of five.

(2) Centers that serve children in half-day programs are not required to schedule napping periods or have napping equipment for such children.

(3) No child shall be forced to stay awake or to stay in the napping area longer than the normal napping period.

101230 ACTIVITIES/NAPPING 101230
(Continued)

(c) A teacher-child ratio of one teacher supervising 24 napping children is permitted provided that the remaining teachers necessary to meet the overall ratio specified in Section 101216.3(a) are immediately available at the center.

(1) An aide who is 18 years of age or older, and who meets the requirements of Sections 101216 and 101216.2, may supervise 24 napping children in place of a teacher if the conditions specified in (c) above are met.

NOTE: Authority cited: Section 1596.81, Health and Safety Code. Reference: Sections 1596.72, 1596.73, 1596.81 and 1597.05, Health and Safety Code.

101231 SMOKING PROHIBITION 101231

(a) Smoking is prohibited on the premises of a child care center as specified in Health and Safety Code Section 1596.795(b).

HANDBOOK BEGINS HERE

(1) Health and Safety Code Section 1596.795(b) states:

The smoking of tobacco on the premises of a licensed day care center shall be prohibited.

HANDBOOK ENDS HERE

NOTE: Authority cited: Section 1596.81, Health and Safety Code. Reference: Section 1596.72, 1596.73, 1596.795, 1596.81 and 1597.05, Health and Safety Code.