R381. Health, Child Care Center Licensing Committee.
R381-100. Child Care Centers.

R381-100-6. Administration and Children's Records.
(1) The provider shall:
   (a) be at least 21 years of age,
   (b) pass a CCL background check, and
   (c) complete the new provider training offered by the Department.
(2) If the owner is not a sole proprietor, the business entity shall submit to the Department the name(s) and contact information of the individual(s) who shall legally represent them and who shall comply with the requirements stated in R381-100-6(1).
(3) The provider shall not engage in or allow conduct that endangers children in care; or is contrary to the health, morals, welfare, and safety of the public.
(4) The provider shall have knowledge of and comply with all federal, state, and local laws, ordinances, and rules, and shall be responsible for the operation and management of a child care program.
(5) The provider shall comply with licensing rules at all times when a child in care is present.
(6) The provider shall post the original child care license on the facility premises in a place readily visible and accessible to the public.
(7) The provider shall post a copy of the Department's Parent Guide at the facility for parent review during business hours.
(8) The provider shall inform parents and the Department of any changes to the program's telephone number and other contact information within 48 hours of the change.
(9) The provider shall establish, follow, and ensure that all staff and volunteers follow a written health and safety plan that is:
   (a) completed on the Department's required form,
   (b) submitted to the Department for initial approval and any time changes are made to the plan,
   (c) reviewed and updated as needed,
   (d) signed and dated at least annually, and
   (e) available for review by parents, staff, and the Department during business hours.
(10) The provider shall:
   (a) have liability insurance, or
   (b) inform parents in writing that the provider does not have liability insurance.
(11) The provider shall ensure that each parent completes an admission and health assessment form for their child before the child is admitted into the child care program.
(12) The provider shall ensure that the admission and health assessment form [shall] includes the following information:
   (a) child's name;
   (b) child's date of birth;
   (c) parent's name, address, and phone number, including a daytime phone number;
   (d) names of people authorized by the parent to pick up the child;
   (e) name, address, and phone number of a person to be contacted
in case of an emergency if the provider is unable to contact the parent;
(f) if available, the name, address, and phone number of an out-of-area emergency contact person for the child;
(g) current emergency medical treatment and emergency transportation releases with the parent's signature;
(h) any known allergies of the child;
(i) any known food sensitivities of the child;
(j) any chronic medical conditions that the child may have;
(k) instructions for special or nonroutine daily health care of the child;
(l) current ongoing medications that the child may be taking;
and
(m) any other special health instructions for the caregiver.
(13) The provider shall ensure that the admission and health assessment form shall:
(a) be reviewed, updated, and signed or initialed by the parent at least annually; and
(b) kept on-site for review by the Department.
(14) Before admitting any child younger than 5 years of age into the child care program, including the provider's and employees' own children, the provider shall obtain the following documentation from the child's parent:
(a) current immunizations, as required by Utah law;
(b) a medical schedule to receive required immunizations;
(c) a legal exemption; or
(d) a 90-day exemption for children who are homeless.
(15) For each child younger than 5 years of age, including the provider's and employees' own children, the provider shall keep their current immunization records on-site for review by the Department.
(16) The provider shall submit the annual immunization report to the Immunization Program in the Utah Department of Health by the date specified by the Department.
(17) The provider shall ensure that each child's information shall be kept confidential and shall not be released without written parental permission.

R381-100-7. Personnel and Training Requirements.
(1) The provider shall ensure that all employees and volunteers are supervised, qualified, and trained to:
(a) meet the needs of the children as required by rule, and
(b) be in compliance with all licensing rules.
(2) The provider shall ensure that the center has a qualified director as required by licensing rules.
(3) The provider shall ensure that the director shall:
(a) be at least 21 years of age;
(b) pass a CCL background check;
(c) receive at least 2.5 hours of preservice training before beginning job duties;
(d) complete the new director training offered by the Department within 60 working days of assuming director duties;
(e) have knowledge of and follow all applicable laws and rules; and
(f) complete at least 20 hours of child care training each year, based on the facility's license date.
The provider shall ensure that new directors have one of the following educational credentials:

(a) any bachelor's or higher education degree, and at least 60 clock hours of approved Utah Early Childhood Career Ladder courses in child development, social/emotional development, and the child care environment; or 60 clock hours of equivalent training as approved by the Department;

(b) at least 12 college credit hours of child development courses;

(c) a currently valid national certification such as a Certified Childcare Professional (CCP) issued by the National Child Care Association, a Child Development Associate (CDA) issued by the Council for Early Childhood Professional Recognition, or other equivalent credential as approved by the Department;

(d) at least a Level 9 from the Utah Early Childhood Career Ladder system; or

(e) a National Administrator Credential (NAC) and at least 60 clock hours of approved Utah Early Childhood Career Ladder courses in child development, social/emotional development, and the child care environment; or 60 clock hours of equivalent training as approved by the Department.

The provider shall ensure that the director on duty at the facility for at least 20 hours per week during operating hours and have sufficient freedom from other responsibilities to manage the center and respond to emergencies.

The provider shall ensure that there is a director designee with authority to act on behalf of the director in the director's absence.

The provider shall ensure that the director designee:

(a) is at least 21 years of age;

(b) passes a CCL background check;

(c) receives at least 2.5 hours of preservice training before beginning job duties;

(d) has knowledge of and follow all applicable laws and rules; and

(e) completes at least 20 hours of child care training each year, based on the facility's license date.

The provider shall ensure that the director or the director designee be present at the facility whenever the center is open for care.

The provider shall ensure that caregivers:

(a) are at least 16 years old;

(b) pass a CCL background check;

(c) receive at least 2.5 hours of preservice training before caring for children;

(d) have knowledge of and follow all applicable laws and rules; and

(e) complete at least 20 hours of child care training each year, based on the facility's license date.

The provider shall ensure that substitutes:

(a) are at least 18 years old;

(b) pass a CCL background check;

(c) are capable of providing care, supervising children,
and handling emergencies in the caregiver's absence;
(d) receive at least 2.5 hours of preservice training before
caring for children; and
(e) complete at least 1.5 hours of child care training for each
month they work 40 hours or more.
(11) The provider shall ensure that [A] all other employees such
as drivers, cooks, and clerks [shall]:
(a) pass a CCL background check,
(b) receive at least 2.5 hours of preservice training before
beginning job duties,
(c) have knowledge of and follow all applicable laws and rules,
and
(d) do not have unsupervised contact with any child in care if
the employee is younger than 16 years of age.
(12) The provider shall ensure that [V] volunteers [shall]:
(a) pass a CCL background check, and
(b) do not have unsupervised contact with any child in care if
the volunteer is younger than 18 years of age.
(13) The provider shall ensure that [G] guests:
(a) do not have unsupervised contact with any child in care,
and
(b) [shall] wear a guest nametag,[, and].
(c) are not required to pass a CCL background check.
(14) The provider shall ensure that [S] student interns who are
registered and participating in a high school or college child care
course:
[(a) are not required to pass a CCL background check,]
[(b) (a) [shall] do not have unsupervised contact with any child
in care, and
(b) [shall] wear a guest nametag.]
(15) The provider shall ensure that [P] parents of children in
care do not have unsupervised contact with any child in care except
their own. [+]
(a) shall not have unsupervised contact with any child in care
except their own, and
(b) do not need a CCL background check unless involved with child
care in the center.]
(16) The provider shall ensure that [H] household members who
are:
(a) 12 to 17 years old [shall] pass a CCL background check and
do not have unsupervised contact with any child in care, including
during offsite activities and transportation[.]; and
(b) 18 years of age or older [shall] pass a CCL background check
that includes fingerprints[; and].
(c) younger than 18 years of age shall not have unsupervised
contact with any child in care including during offsite activities
and transportation.
(17) The provider shall ensure that [T] individuals who provide
IEP or IFSP services such as physical, occupational, or speech
therapists:
(a) are not required to have a CCL background check as long
as the child's parent has given permission for services to take place
at the center, [provide proper identification before having access
to the facility or a child at the facility, and]
(b) [shall provide proper identification before having access to the facility or a child at the facility.] have received the child's parent permission for services to take place at the center.

(18) The provider shall ensure that [M]embers from law enforcement or from Child Protective Services provide proper identification before having access to the facility or a child at the facility. [+]

(a) are not required to have a CCL background check, and

(b) shall provide proper identification before having access to the facility or a child at the facility.]

(19) The provider shall ensure that [P]reservice training [shall] includes the following:

(a) job description and duties;
(b) current Department rule sections R381-100-7 through 24;
(c) the Department-approved health and safety plan that includes preparing for and responding to emergencies;
(d) prevention, signs and symptoms of child abuse and neglect, including child sexual abuse, and legal reporting requirements;
(e) prevention of shaken baby syndrome and abusive head trauma, and coping with crying babies;
(f) prevention of sudden infant death syndrome (SIDS) and the use of safe sleeping practices;
(g) recognizing the signs of homelessness and available assistance;
(h) a review of the information in each child's health assessment in the caregiver's assigned group; and
(i) an introduction and orientation to the children in care.

(20) The provider shall keep [D]ocumentation of each individual's preservice training [shall be kept] on-site for review by the Department and that documentation includes the following:

(a) training topics,
(b) date of the training, and
(c) total hours or minutes of training.

(21) The provider shall ensure that [A]nual child care training [shall] includes the following topics:

(a) current Department rule sections R381-100-7 through 24;
(b) the Department-approved health and safety plan that includes preparing for and responding to emergencies;
(c) the prevention, signs and symptoms of child abuse and neglect, including child sexual abuse, and legal reporting requirements;
(d) principles of child growth and development, including brain development;
(e) positive guidance and interactions with children;
(f) prevention of shaken baby syndrome and abusive head trauma, and coping with crying babies;
(g) prevention of sudden infant death syndrome (SIDS) and use of safe sleeping practices; and
(h) recognizing the signs of homelessness and available assistance.

(22) The provider shall ensure that [A]t least 10 of the 20 hours of annual child care training [shall be] is face-to-face instruction.

(23) The provider shall ensure that [I]ndividuals who are
required to receive annual child care training and who begin employment partway through the facility's license year shall complete a proportionate number of training hours including the face-to-face instruction.

(24) The provider shall ensure that [D]ocumentation of each individual's annual child care training is kept on-site for review by the Department and includes the following:
   (a) training topic,
   (b) date of the training,
   (c) whether the training was face-to-face or non-face-to-face instruction,
   (d) name of the person or organization that presented the training, and
   (e) total hours or minutes of training.

(25) Whenever there are children at the center, the provider shall ensure that there is at least one caregiver present who can demonstrate English literacy skills needed to care for children and respond to emergencies.

(26) The provider shall ensure that [A]t least one staff member with a current Red Cross, American Heart Association, or equivalent first aid and infant/child CPR certification is present when children are in care:
   (a) at the facility,
   (b) in each vehicle transporting children, and
   (c) at each offsite activity.

(27) The provider shall ensure that CPR certification includes hands-on testing.

(28) The provider shall ensure that the following records for each covered individual are kept on-site for review by the Department:
   (a) the date of initial employment or association with the program;
   (b) a current first aid and CPR certification, if required in rule; and
   (c) a six-week record of the times worked each day.

R381-100-8. Background Checks.

(1) Before a new covered individual becomes involved with child care in the program, the provider shall use the CCL provider portal search to:
   (a) verify that the individual has a current CCL background check, and
   (b) associate that individual with their facility.

(2) Before a new covered individual who does not show in the CCL provider portal search becomes involved with child care in the program, the provider shall:
   (a) have the individual submit an online background check form and fingerprints for individuals age 18 years and older,
   (b) authorize the individual's background check through the CCL provider's portal,
   (c) pay all required fees, and
   (d) receive written notice from CCL that the individual passed the background check.

(3) A covered individual without a current background check will
not show in the CCL provider portal search. The Department may not consider a covered individual’s background check current when the covered individual has:

(a) failed to pass a CCL background check;
(b) moved outside of Utah; or
(c) not been associated with an active, CCL approved child care facility for the past 180 days.

(4) Within 10 working days from when a child who resides in the facility turns 12 years old, the provider shall:
(a) ensure that an online background check form is submitted,
(b) authorize the child’s background check through the CCL provider’s portal, and
(c) pay all required fees.

(5) The provider shall ensure that fingerprints are prepared by a local law enforcement agency or an agency approved by local law enforcement.

(6) If fingerprints are submitted through Live Scan (electronically), the provider shall ensure that the agency taking the fingerprints follows the Department’s guidelines.

(7) The Department may deny a covered individual from being involved with child care for any of the following background findings:
(a) LIS supported findings,
(b) the individual's name appears on the Utah or national sex offender registry,
(c) any felony convictions, or
(d) for any of the reasons listed under R381-100-8(8).

(8) The following convictions, regardless of severity, may result in a background check denial:
(a) unlawful sale or furnishing alcohol to minors;
(b) sexual enticing of a minor;
(c) cruelty to animals, including dogfighting;
(d) bestiality;
(e) lewdness, including lewdness involving a child;
(f) voyeurism;
(g) providing dangerous weapons to a minor;
(h) a parent providing a firearm to a violent minor;
(i) a parent knowing of a minor's possession of a dangerous weapon;
(j) sales of firearms to juveniles;
(k) pornographic material or performance;
(l) sexual solicitation;
(m) prostitution and related crimes;
(n) contributing to the delinquency of a minor;
(o) any crime against a person;
(p) a sexual exploitation act;
(q) leaving a child unattended in a vehicle; and
(r) driving under the influence (DUI) while a child is present in the vehicle.

(9) A covered individual shall not be denied by the Department if the only background finding is a conviction or plea of no contest to a nonviolent drug offense that occurred 10 or more years before the CCL background check was conducted.

(10) The Department may rely on the criminal background check
(11) If the provider has a background check denial, the Department may suspend or deny their license until the reason for the denial is resolved.

(12) If a covered individual fails to pass a CCL background check, including that the individual has been convicted, has pleaded no contest, or is currently subject to a plea in abeyance or diversion agreement for a felony or misdemeanor, the provider shall prohibit that individual from being employed by the child care program or residing at the facility until the reason for the denial is resolved.

(13) If a covered individual is denied a license or employment based upon the criminal background check and disagrees with the information provided by the Department of Public Safety, the covered individual may appeal the information as provided in Utah Code, Sections 77-18-10 through 77-18-14 and 77-18a-1.

(14) If a covered individual disagrees with a supported finding on the Department of Human Services Licensing Information System (LIS):
   (a) the individual cannot appeal the supported finding to the Department of Health, and
   (b) the covered individual may appeal the finding to the Department of Human Services and follow the process established by the Department of Human Services.

(15) The provider and the covered individual shall notify the Department within 48 hours of becoming aware of a covered individual's arrest warrant, felony or misdemeanor arrest, charge, conviction, or supported LIS finding. Failure to notify the Department within 48 hours may result in disciplinary action, including revocation of the license.

(16) The Executive Director of the Department of Health may overturn a background check denial when the Executive Director determines that the nature of the background finding or mitigating circumstances do not pose a risk to children.


(1) The provider shall ensure that there is at least 35 square feet of indoor space for each child in care, including the provider's and employees' children.

(2) The Department may include as floor space per child floor space used for furniture, fixtures, or equipment if the furniture, fixture, or equipment is used:
   (a) by children,
   (b) for the care of children, or
   (c) to store classroom materials.

(3) The Department shall not include the following areas when measuring indoor space for children's use:
   (a) bathrooms,
   (b) closets and staff lockers,
   (c) hallways,
   (d) lobbies and entryways,
   (e) kitchens, and
   (f) staff offices.

(4) The Department may limit the maximum allowed capacity for
a child care facility [may be limited by] based on local ordinances.

(5) The provider shall ensure that the number of children in care at any given time [shall] does not exceed the capacity identified on the license.

(6) The provider shall ensure that any building or play structure on the premises constructed before 1978 that has peeling, flaking, chalking, or failing paint is tested for lead. If lead-based paint is found, the provider shall contact their local health department within 5 working days and follow required procedures for remediation of the lead hazard.

(7) The provider shall ensure that [E]ach room and indoor area that is used by children shall be ventilated by mechanical ventilation, or by windows that open and have screens.

(8) The provider shall ensure that [W]indows and glass doors within 36 inches from the floor or ground [shall be] are made of safety or tempered glass, or have a protective guard.

(9) The provider shall ensure that [A]ll rooms and areas [shall] have adequate light intensity for the safety of the children and the type of activity being conducted.

(10) The provider shall maintain the indoor temperature between 65 and 82 degrees Fahrenheit.

(11) The provider shall ensure that [T]here [shall be] is a working telephone at the facility, in each vehicle while transporting children, and during offsite activities.

(12) The provider shall ensure that [T]here [shall be] is a working handwashing sink in each classroom or next to each classroom in buildings constructed after 1 July 1997.

(13) The provider shall ensure that [E]ach area where infants or toddlers are cared for [shall] meets one of the following criteria:

(a) There shall be 2 working sinks in the room. One sink shall be used exclusively for the preparation of food and bottles and handwashing before food preparation, and the other sink shall be used only for handwashing after diapering and nonfood activities.

(b) There shall be 1 working sink that is used only for handwashing in the room, and all bottle and food preparation shall be done in the kitchen and brought to the infant and toddler area by a non-diapering staff member.

(14) For preschoolers and toddlers who are toilet trained, there shall be 1 working toilet and 1 working sink for every fifteen children in the center. For school-age children, there shall be 1 working toilet and 1 working sink for every 25 children in the center.

14. The provider shall ensure that:

(a) there is 1 working toilet and 1 working sink for every 15 children in the center who are toilet trained; and

(b) there is 1 working toilet and 1 working sink for every 25 school-age children in the center.

(15) The provider shall ensure that [A] bathroom that provides privacy [shall be] is available for use by school-age children.

(16) The provider shall ensure that [T]here [shall be] is an outdoor area that is safely accessible to children.

(17) The provider shall ensure that the outdoor area [shall have] has at least 40 square feet of space for each child using the area at one time.

(18) The provider shall ensure that the total square footage
of the outdoor area [shall] accommodates at least one-third of the approved capacity at one time or [shall be] at least 1600 square feet.

(19) The provider shall ensure that the outdoor area [shall be] enclosed within a fence, wall, or solid natural barrier that is at least 4 feet high.

(20) When children are outdoors, the provider shall ensure that they [shall be] are in the enclosed area except during offsite activities.

(21) The provider shall ensure that there [shall be] is no gap 5 by 5 inches or greater in or under the fence or barrier.

(22) Whenever there are children in the outdoor area, the provider shall ensure that there [shall be] shade available to protect them from excessive sun and heat.

(23) If there is a swimming pool on the premises that is not emptied after each use:

(a) the provider shall meet applicable state and local laws and ordinances related to the operation of a swimming pool and maintain the pool in a safe manner; and

(b) when not in use, the provider shall ensure that the pool [shall be] enclosed within at least a 4-foot-high fence or solid barrier that is kept locked and that separates the pool from any other areas on the premises, or covered with a properly installed safety enclosure [that meets the ASTM F1346 standard].

(24) The provider shall maintain buildings and outdoor areas in good repair and safe condition including:

(a) ceilings, walls, and floor coverings;

(b) lighting, bathroom, and other fixtures;

(c) draperies, blinds, and other window coverings;

(d) indoor and outdoor play equipment;

(e) furniture, toys, and materials accessible to the children; and

(f) entrances, exits, steps, and walkways including keeping them free of ice, snow, and other hazards.

(25) The provider shall ensure that [A] accessible raised decks or balconies that are 5 feet or higher, and open [basement] stairwells that are 5 feet or deeper shall have protective barriers that are at least 3 feet high.

(26) If the facility is subdivided, any part of the building is rented out, or any area of the facility is shared including the outdoor area, the Department may inspect the entire facility [shall be inspected] and the provider shall ensure that covered individuals in the facility [shall] comply with all rules, except when all of the following conditions are met:

(a) there is a separate entrance for the child care program;

(b) there are no connecting interior doorways that can be used by unauthorized individuals; and

(c) there is no shared access to the outdoor area used for child care, or a qualified caregiver is present when children are using a shared outdoor area of the facility.

R381-100-10. Ratios and Group Size.

(1) As listed in Table 1 for single-age groups of children, the provider shall:
(a) maintain at least the number of caregivers and not exceed the number of children in the caregiver-to-child ratio, and (b) not exceed the group sizes.

**TABLE 1**

<table>
<thead>
<tr>
<th>Ages of Children</th>
<th># of Caregivers</th>
<th># of Children</th>
<th>Group Size</th>
</tr>
</thead>
<tbody>
<tr>
<td>birth - 23 months</td>
<td>1</td>
<td>4</td>
<td>8</td>
</tr>
<tr>
<td>2 years old</td>
<td>1</td>
<td>7</td>
<td>14</td>
</tr>
<tr>
<td>3 years old</td>
<td>1</td>
<td>12</td>
<td>24</td>
</tr>
<tr>
<td>4 years old</td>
<td>1</td>
<td>15</td>
<td>30</td>
</tr>
<tr>
<td>School-age</td>
<td>1</td>
<td>20</td>
<td>40</td>
</tr>
</tbody>
</table>

(2) As listed in Tables 2-13 for mixed-age groups of children, the provider shall:

(a) maintain at least the number of caregivers and not exceed the number of children in the caregiver-to-child ratio, and (b) not exceed the group sizes.

**TABLE 2**

Older Toddlers and Two-year-olds

<table>
<thead>
<tr>
<th># Caregivers Required</th>
<th>Age</th>
<th># Children Present</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>18 to 23 months</td>
<td>1-3</td>
</tr>
<tr>
<td>2</td>
<td>1-6</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total children: up to 7</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>18 to 23 months</td>
<td>1-6</td>
</tr>
<tr>
<td>2</td>
<td>1-13</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total children: up to 14</td>
<td></td>
</tr>
</tbody>
</table>

**TABLE 3**

Two-year-olds and Three-year-olds

<table>
<thead>
<tr>
<th># Caregivers Required</th>
<th>Age</th>
<th># Children Present</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>1-6</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>1-9</td>
</tr>
<tr>
<td></td>
<td>Total children: up to 10</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>2</td>
<td>1-13</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>1-19</td>
</tr>
<tr>
<td></td>
<td>Total children: up to 20</td>
<td></td>
</tr>
</tbody>
</table>

**TABLE 4**
Two-year-olds and Four-year-olds

<table>
<thead>
<tr>
<th># Caregivers Required</th>
<th>Age</th>
<th># Children Present</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>1-6</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>1-10</td>
</tr>
<tr>
<td><strong>Total children:</strong></td>
<td><strong>up to 11</strong></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>2</td>
<td>1-13</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>1-21</td>
</tr>
<tr>
<td><strong>Total children:</strong></td>
<td><strong>up to 22</strong></td>
<td></td>
</tr>
</tbody>
</table>

**TABLE 5**

Two-year-olds and Five-twelve Year-olds

<table>
<thead>
<tr>
<th># Caregivers Required</th>
<th>Age</th>
<th># Children Present</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>1-6</td>
</tr>
<tr>
<td></td>
<td>5-12</td>
<td>1-13</td>
</tr>
<tr>
<td><strong>Total children:</strong></td>
<td><strong>up to 14</strong></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>2</td>
<td>1-13</td>
</tr>
<tr>
<td></td>
<td>5-12</td>
<td>1-27</td>
</tr>
<tr>
<td><strong>Total children:</strong></td>
<td><strong>up to 28</strong></td>
<td></td>
</tr>
</tbody>
</table>

**TABLE 6**

Three-year-olds and Four-year-olds

<table>
<thead>
<tr>
<th># Caregivers Required</th>
<th>Age</th>
<th># Children Present</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>3</td>
<td>1-11</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>1-13</td>
</tr>
<tr>
<td><strong>Total children:</strong></td>
<td><strong>up to 14</strong></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>3</td>
<td>1-23</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>1-27</td>
</tr>
<tr>
<td><strong>Total children:</strong></td>
<td><strong>up to 28</strong></td>
<td></td>
</tr>
</tbody>
</table>

**TABLE 7**

Three-year-olds and Five-to-twelve-year-olds

<table>
<thead>
<tr>
<th># Caregivers Required</th>
<th>Age</th>
<th># Children Present</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>3</td>
<td>1-11</td>
</tr>
<tr>
<td></td>
<td>5-12</td>
<td>1-15</td>
</tr>
<tr>
<td><strong>Total children:</strong></td>
<td><strong>up to 16</strong></td>
<td></td>
</tr>
</tbody>
</table>
Two 3 1-23
5-12 1-31
Total children: up to 32

<table>
<thead>
<tr>
<th># Caregivers Required</th>
<th>Age</th>
<th># Children Present</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>4</td>
<td>1-14</td>
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<tr>
<td></td>
<td>5-12</td>
<td>1-17</td>
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<tr>
<td>Total children: up to 18</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| 2                     | 4       | 1-29               |
|                       | 5-12    | 1-35               |
| Total children: up to 36 |

#### TABLE 8

Four-year-olds and Five-to-twelve-year-olds

#### TABLE 9

Two-year-olds, Three-year-olds, and Four-year-olds

#### TABLE 10

Two-year-olds, Three-year-olds, and Five-to-twelve-year-olds
### TABLE 11

Two-year-olds, Four-year-olds, and Five-to-twelve-year-olds

<table>
<thead>
<tr>
<th># Caregivers Required</th>
<th>Age</th>
<th># Children Present</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>1-6</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>1-12</td>
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<tr>
<td></td>
<td>5-12</td>
<td>1-12</td>
</tr>
<tr>
<td>Total: up to 14</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>2</td>
<td>1-13</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>1-26</td>
</tr>
<tr>
<td></td>
<td>5-12</td>
<td>1-26</td>
</tr>
<tr>
<td>Total children: up to 28</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### TABLE 12

Three-year-olds, Four-year-olds, and Five-to-twelve-year-olds

<table>
<thead>
<tr>
<th># Caregivers Required</th>
<th>Age</th>
<th># Children Present</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>3</td>
<td>1-11</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>1-14</td>
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<td>5-12</td>
<td>1-14</td>
</tr>
<tr>
<td>Total: up to 16</td>
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<td></td>
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<tr>
<td>2</td>
<td>3</td>
<td>1-23</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>1-30</td>
</tr>
<tr>
<td></td>
<td>5-12</td>
<td>1-30</td>
</tr>
<tr>
<td>Total children: up to 32</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### TABLE 13

Two-year-olds, Three-year-olds, Four-year-olds, and Five-to-twelve-year-olds

<table>
<thead>
<tr>
<th># Caregivers Required</th>
<th>Age</th>
<th># Children Present</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>1-6</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>1-11</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>1-11</td>
</tr>
<tr>
<td></td>
<td>5-12</td>
<td>1-11</td>
</tr>
<tr>
<td>Total children: up to 14</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>2</td>
<td>1-13</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>1-25</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>1-25</td>
</tr>
<tr>
<td></td>
<td>5-12</td>
<td>1-25</td>
</tr>
<tr>
<td>Total children: up to 28</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(3) The provider shall ensure that [i] infants and toddlers [may be] are included in mixed-age groups only when 8 or fewer children are
present in the group.

(4) If more than 2 children who are younger than 24 months old are included in a mixed-age group, and the group has more than 4 children, the provider shall ensure that there are at least 2 caregivers with the group.

(5) During nap time only, the provider shall ensure that the caregiver-to-child ratio is double only if:
   (a) all children in the group are at least 18 months old,
   (b) all children in the group are in a restful and nonactive state, and
   (c) the caregiver supervising the napping children is able to contact another on-site caregiver without leaving the children unattended.

(6) The provider shall ensure that there are at least 2 caregivers present when there is only one group of children on the premises and that group has more than 8 children, or more than 2 infants or toddlers.

(7) The Department shall not count the provider's or an employee's child age 4 years or older in the caregiver-to-child ratio when the parent of the child is working at the facility, but the child shall be counted in the group size.

(8) The provider may include caregivers who are 16 or 17 years old in the caregiver-to-child ratio, but shall not let them have unsupervised contact with any child in care.

(9) The provider may include volunteers in the caregiver-to-child ratio if the volunteers:
   (a) are at least 16 years old, and
   (b) receive at least 2.5 hours of preservice training before counting in the caregiver-to-child ratio, and
   (c) complete at least 1.5 hours of child care training for each month they volunteer 40 hours or more.

(10) The provider may include student interns who are registered in a high school or college child care course in the caregiver-to-child ratio when those students do not have unsupervised contact with any child in care, and wear a guest nametag. [requirements in R381-100-7(14)(a), (c) are met.]

(11) The provider shall ensure that guests do not count in caregiver-to-child ratios.

(12) A center that has been constructed, licensed, and continuously operated since 1 January 2004 is exempt from maximum group size requirements if:
    (a) the caregiver-to-child ratio is maintained, and
    (b) the required square footage for each group of children is maintained.


(1) The provider shall ensure that caregivers provide and
maintain active supervision of each child at all times, including:

(2) Active supervision shall include:
(a) for children younger than 5 years of age, the caregiver shall be physically present in the room or area with the children;
(b) for school-age children, the caregiver shall be able to hear the children and be close enough to intervene;
(c) caregivers shall know the number of children in their care at all times;
(d) caregivers' attention shall be focused on the children and not on caregivers' personal interests;
(e) caregivers are aware of the entire group of children even when interacting with a smaller group or an individual child; and
(f) caregivers position themselves so all children in their assigned group are actively supervised.

(3) The provider shall ensure that when video cameras and mirrors are used to supervise napping children:
(a) the napping room is adjacent to a non-napping room;
(b) there is a staff member in the non-napping room;
(c) cameras or mirrors are positioned so that every child can be seen;
(d) the staff member is able to see and hear each child;
(e) there is an open door without a barrier, such as a gate, between the napping room and the non-napping room; and
(f) children who wake up are moved to the non-napping room.

(4) The provider shall ensure that a blanket or other item not be placed over sleeping equipment in such a way that prevents the caregiver from seeing the sleeping child.

(5) The provider shall ensure that whenever a child is in care, the child's parents have access to their child and the areas used to care for their child whenever their child is in care.

(6) To maintain security and supervision of children, the provider shall ensure that:
(a) each child is signed in and out;
(b) only parents or persons with written authorization from the parent may sign out a child;
(c) photo identification is required if the individual signing the child in or out is unknown to the provider;
(d) persons signing children in and out use identifiers, such as a signature, initials, or electronic code;
(e) the sign-in and sign-out records include the date and time each child arrives and leaves; and
(f) there is written permission from their parents if school-age children sign themselves in and out.

(7) In an emergency, the provider shall accept the parent's verbal authorization to release a child when the provider can confirm the identity of:
(a) the person giving verbal authorization, and
(b) the person picking up the child.

(8) The provider shall ensure that a six-week record of each child's daily attendance, including sign-in and sign-out records,

(1) The provider shall ensure that no child is subjected to physical, emotional, or sexual abuse while in care.

(2) The provider shall inform parents, children, and those who interact with the children of the center's behavioral expectations and how any misbehavior will be handled.

(3) **The provider shall ensure that** [I]individuals who interact with the children [shall] guide children's behavior by using positive reinforcement, redirection, and by setting clear limits that promote children's ability to become self-disciplined.

(4) **The provider shall ensure that** [C]caregivers [shall] use gentle, passive restraint with children only when it is needed to stop children from injuring themselves or others, or from destroying property.

(5) **The provider shall ensure that** [I]interactions with the children [shall]do not include:

   (a) any form of corporal punishment or any action that produces physical pain or discomfort such as hitting, spanking, shaking, biting, or pinching;

   (b) restraining a child's movement by binding, tying, or any other form of restraint that exceeds gentle, passive restraint;

   (c) shouting at children;

   (d) any form of emotional abuse;

   (e) forcing or withholding food, rest, or toileting; or

   (f) confining a child in a closet, locked room, or other enclosure such as a box, cupboard, or cage.

(6) Any person who witnesses or suspects that a child has been subjected to abuse, neglect, or exploitation shall immediately notify Child Protective Services or law enforcement as required in Utah Code Section 62A-4a-403 and Section 62A-4a-411.


(1) The **provider shall ensure that** the building, outdoor area, toys, and equipment [shall be]are used in a safe manner and as intended by the manufacturer to prevent injury to children.

(2) **The provider shall ensure that** [P]oisonous and harmful plants [shall be]are inaccessible to children.

(3) **The provider shall ensure that** [S]harp objects, edges, corners, or points that could cut or puncture skin [shall be]are inaccessible to children.

(4) **The provider shall ensure that** [C]hoking hazards [shall be]are inaccessible [to children] to children younger than 3 years of age.

(5) **The provider shall ensure that** [S]trangulation hazards such as ropes, cords, chains, and wires attached to a structure and long enough to encircle a child's neck [shall be]are inaccessible to children.

(6) **The provider shall ensure that** [T]ripping hazards such as unsecured flooring, rugs with curled edges, or cords in walkways [shall be]are inaccessible to children.

(7) [For children younger than 5 years of age,] The **provider shall ensure that** empty plastic bags large enough for a child's head
to fit inside, latex gloves, and balloons [shall be] are inaccessible to children younger than 5 years of age.

(8) **The provider shall ensure that** standing water that measures 2 inches or deeper and 5 by 5 inches or greater in diameter [shall be] is inaccessible to children.

(9) **The provider shall ensure that** toxic or hazardous chemicals such as cleaners, insecticides, lawn products, and flammable materials [shall be]:
   (a) inaccessible to children,
   (b) used according to manufacturer instructions, and
   (c) stored in containers labeled with their contents.

(10) **The provider shall ensure that** Items and substances that could burn a child or start a fire [shall be] are inaccessible, such as:
   (a) matches or cigarette lighters;
   (b) open flames;
   (c) hot wax or other substances; and
   (d) when in use, portable space heaters, wood burning stoves, and fireplaces of all types.

(11) **The provider shall ensure that** children [shall be] are protected from items that cause electrical shock such as:
   (a) live electrical wires; and
   (b) for children younger than 5 years of age, electrical outlets and surge protectors without protective caps or safety devices when not in use.

(12) Unless used and stored in compliance with the Utah Concealed Weapons Act or as otherwise allowed by law, the provider shall ensure that firearms such as guns, muzzle loaders, rifles, shotguns, hand guns, pistols, and automatic guns [shall]:
   (a) are locked in a cabinet or area with a key, combination lock, or fingerprint lock; and
   (b) stored unloaded and separate from ammunition.

(13) **The provider shall ensure that** weapons such as paintball guns, BB guns, airsoft guns, sling shots, arrows, and mace [shall be] inaccessible to children.

(14) **The provider shall ensure that** alcohol, illegal substances, and sexually explicit material [shall be] are inaccessible, and [shall] not be used on the premises, during offsite activities, or in center vehicles any time a child is in care.

(15) **The provider shall ensure that** an outdoor source of drinking water, such as individually labeled water bottles, a pitcher of water and individual cups, or a working water fountain [shall be] is available to each child whenever the outside temperature is 75 degrees or higher.

(16) **The provider shall ensure that** areas accessible to children [shall be] are free of heavy or unstable objects that children could pull down on themselves, such as furniture, unsecured televisions, and standing ladders.

(17) **The provider shall ensure that** hot water accessible to children [shall] does not exceed 120 degrees Fahrenheit.

(18) **The provider shall ensure that** highchairs [shall] have T-shaped safety straps or devices that are used whenever a child is in the chair.

(19) **The provider shall ensure that** infant walkers with
wheels [shall be] are inaccessible to children.

(20) The provider shall ensure that [T]obacco, e-cigarettes, e-juice, e-liquids, and similar products [shall be] are inaccessible and, in compliance with the Utah Indoor Clean Air Act, not used:
   (a) in the facility or any other building when a child is in care,
   (b) in any vehicle that is being used to transport a child in care,
   (c) within 25 feet of any entrance to the facility or other building occupied by a child in care, or
   (d) in any outdoor area or within 25 feet of any outdoor area occupied by a child in care.

(1) The provider shall post the center's street address and emergency numbers, including ambulance, fire, police, and poison control, near each telephone in the center or in an area clearly visible to anyone needing the information.
(2) The provider shall keep first-aid supplies in the center, including at least antiseptic, bandages, and tweezers.
(3) The provider shall conduct fire evacuation drills monthly. Drills shall include a complete exit of all children, staff, and volunteers from the building.
(4) The provider shall document each fire drill, including:
   (a) the date and time of the drill,
   (b) the number of children participating,
   (c) the name of the person supervising the drill,
   (d) the total time to complete the evacuation, and
   (e) any problems encountered.
(5) The provider shall conduct drills for disasters other than fires at least once every 6 months.
(6) The provider shall document each disaster drill, including:
   (a) the type of disaster, such as earthquake, flood, prolonged power or water outage, or tornado;
   (b) the date and time of the drill;
   (c) the number of children participating;
   (d) the name of the person supervising the drill; and
   (e) any problems encountered.
(7) The provider shall vary the days and times on which fire and other disaster drills are held.
(8) The provider shall keep documentation of the previous 12 months of fire and disaster drills on-site for review by the Department.
(9) In case of an emergency or disaster, the provider and employees shall follow procedures as outlined in the center's health and safety plan unless otherwise instructed by emergency personnel.
(10) The provider shall give parents a written report of every incident, accident, or injury involving their child:
   (a) the caregivers involved, the center director or director designee, and the person picking up the child shall sign the report on the day of occurrence; and
   (b) if school-age children sign themselves out of the center, the provider shall send a copy of the report [shall be sent] to the parent on the day following the occurrence.
(11) If a child is injured and the injury appears serious but
not life-threatening, the provider shall contact the child's parent immediately.

(12) In the case of a life-threatening injury to a child, or an injury that poses a threat of the loss of vision, hearing, or a limb the provider shall:
(a) call emergency personnel immediately;
(b) contact the parent after emergency personnel are called; and
(c) if the parent cannot be reached, try to contact the child's emergency contact person.

(13) If a child is injured while in care and receives medical attention, or for a child fatality, the provider shall:
(a) submit a completed accident report form to the Department within the next business day of the incident; or
(b) contact the Department within the next business day and submit a completed accident report form within 5 business days of the incident.

(14) The provider shall keep a six-week record of every incident, accident, and injury report on-site for review by the Department.

(1) The provider shall ensure that the building, furnishings, equipment, and outdoor area are kept clean and sanitary including keeping:
(a) walls and flooring clean and free of spills, dirt, and grime;
(b) areas and equipment used for the storage, preparation, and service of food clean and sanitary;
(c) surfaces used by children free of rotting food or a build-up of food;
(d) the building and grounds free of a build-up of litter, trash, and garbage; and
(e) the facility free of animal feces.
(2) The provider shall take safe and effective measures to prevent and eliminate the presence of insects, rodents, and other pests.
(3) The provider shall ensure that all toys and materials including those used by infants and toddlers are cleaned:
(a) at least weekly or more often if needed,
(b) after being put in a child's mouth and before another child plays with the toy, and
(c) after being contaminated by a body fluid.
(4) The provider shall ensure that fabric toys and items such as stuffed animals, cloth dolls, pillow covers, and dress-up clothes are machine washable and washed weekly, and as needed.
(5) The provider shall ensure that highchair trays are cleaned and sanitized before each use.
(6) The provider shall ensure that water play tables or tubs are cleaned and sanitized daily, if used by the children.
(7) The provider shall ensure that bathroom surfaces including toilets, sinks, faucets, and counters are cleaned and sanitized each day.
(8) The provider shall ensure that potty chairs are
cleaned and sanitized after each use.

(9) The provider shall ensure that [T]oilet paper [shall be] is accessible to children and kept in a dispenser.

(10) The provider shall post handwashing procedures that are readily visible from each handwashing sink and shall ensure that the procedures are followed.

(11) The provider shall ensure that [S]toilet paper [shall be] is accessible to children and kept in a dispenser.

(12) The provider shall ensure that [C]aregivers [shall] wash their hands thoroughly with liquid soap and running water at required times including:

(a) before handling or preparing food or bottles,
(b) before and after eating meals and snacks or feeding a child,
(c) after using the toilet or helping a child use the toilet,
(d) after contact with a body fluid,
(e) when coming in from outdoors, and
(f) after cleaning up or taking out garbage.

(13) The provider shall ensure that children wash their hands thoroughly with liquid soap and running water at required times including:

(a) before and after eating meals and snacks,
(b) after using the toilet,
(c) after contact with a body fluid,
(d) before using a water play table or tub, and
(e) when coming in from outdoors.

(14) The provider shall ensure that [O]nly single-use towels from a covered dispenser or an electric hand dryer [may be] are used to dry hands.

(15) The provider shall ensure that [P]ersonal hygiene items, such as toothbrushes, combs, and hair accessories, [shall be] are not be shared and [shall be] are stored so they do not touch each other, or they [shall be] are sanitized between each use.

(16) The provider shall ensure that [P]acifiers, bottles, and nondisposable drinking cups [shall be]:

(a) labeled with each child's name or individually identified, and
(b) not shared, or washed and sanitized before being used by another child.

(17) The provider shall ensure that [A] child's clothing [shall be] is promptly changed if the child has a toileting accident.

(18) The provider shall ensure that [C]hildren's clothing that is wet or soiled from a body fluid [shall be]:

(a) not be rinsed or washed at the center,
(b) be placed in a leakproof container that is labeled with the child's name, and
(c) be returned to the parent, or
d) thrown away with parent consent.

(19) The provider shall ensure that [S]taff [shall] take precautions when cleaning floors, furniture, and other surfaces contaminated by blood, urine, feces, or vomit. Except for diaper changes and toileting accidents, staff shall:

(a) wear waterproof gloves;
(b) clean the surface using a detergent solution;
(c) rinse the surface with clean water;
(d) sanitize the surface;
(e) throw away in a leakproof plastic bag the disposable materials, such as paper towels, that were used to clean up the body fluid;
(f) wash and sanitize any nondisposable materials used to clean up the body fluid, such as cleaning cloths, mops, or reusable rubber gloves, before reusing them; and
(g) wash their hands after cleaning up the body fluid.
(20) The provider shall ensure that a child who is ill with an infectious disease may not be cared for at the center except when the child shows signs of illness after arriving at the center.
(21) When a child becomes ill while in care:
(a) the provider shall contact the child's parent or, if the parent cannot be reached, an individual listed as the emergency contact to immediately pick up the child; and
(b) if the child is ill with an infectious disease, the provider shall make the child comfortable in a safe, supervised area that is separated from the other children until the parent arrives.
(22) When any child or employee has an infectious disease, an unusual or serious illness, or a sudden onset of an illness, the provider shall notify the local health department on the day the illness is discovered.
(23) The provider shall post a notice at the center when any staff member or child has an infectious disease or parasite. The notice shall:
(a) not disclose any personal identifiable information,
(b) be posted in a conspicuous place where it can be seen by all parents,
(c) be posted and dated on the same day that the disease or parasite is discovered, and
(d) remain posted for at least 5 days.
(24) To prevent contamination of food, the spread of foodborne illnesses, and other diseases the provider shall ensure that:
(a) individuals who prepare food in the kitchen do not change diapers or help in toileting children;
(b) caregivers who care for diapered children only prepare food for the children in their care, and they do not prepare food outside of the room used by the diapered children or prepare food for other children and adults in the facility; and
(c) individuals with an infectious disease or showing symptoms such as diarrhea, fever, and vomit do not prepare or serve foods.

R381-100-16. Food and Nutrition.
(1) The provider shall ensure that each child age 2 years and older is offered a meal or snack at least once every 3 hours.
(2) The provider shall ensure that when food for children's meals and/or snacks is supplied by the provider:
(a) the meal service meets local health department food service regulations;
(b) the foods that are served meet the nutritional requirements of the USDA Child and Adult Care Food Program (CACFP) whether or not the provider participates in the CACFP;
(c) the provider uses the CACFP menus, the standard
Department-approved meal pattern requirements, or menus approved by a registered dietitian. That dietitian approval noted and dated on the menus, and current within the past 5 years;

d) the current week's menu posted for review by parents and the Department; and

e) providers who are not participating or in good standing with the CACFP keep a six-week record of foods served at each meal and snack.

(3) The provider shall ensure that the person who serves food to children:
   a) is aware of the children in their assigned group who have food allergies or sensitivities, and
   b) ensures that the children are not served the food or drink they are allergic or sensitive to.

(4) The provider shall ensure that children's food served on dishes, napkins, or sanitary highchair trays, except an individual finger food, such as a cracker, that may be placed directly in a child's hand, and that children's food is not placed on a bare table.

(5) The provider shall ensure that food and drink brought in by parents for their child's use:
   a) labeled with the child's name,
   b) refrigerated if needed, and
   c) consumed only by that child.

R381-100-17. Medications.

(1) The provider shall ensure that nonrefrigerated medications are stored at least 48 inches above the floor or locked.

(2) The provider shall ensure that refrigerated medications are stored at least 36 inches above the floor or are locked, and if liquid, they are stored in a separate leakproof container.

(3) The provider shall ensure that all over-the-counter and prescription medications supplied by parents:
   a) are labeled with the child's full name,
   b) are kept in the original or pharmacy container,
   c) have the original label, and
   d) have child-safety caps.

(4) The provider shall have a written medication permission form completed and signed by the parent before administering any medication supplied by the parent for their child.

(5) The provider shall ensure that the medication permission form includes:
   a) the name of the child,
   b) the name of the medication,
   c) written instructions for administration, and
   d) the parent signature and the date signed.

(6) The instructions for administering the medication shall include:
   a) the dosage,
   b) how the medication will be given,
   c) the times and dates to administer the medication, and
   d) the disease or condition being treated.
(7) If the provider supplies an over-the-counter medication for children’s use, the provider shall ensure that the medication is not administered to any child without previous parental consent for each instance it is given. The provider shall ensure that the consent:

(a) prior written consent; or
(b) verbal consent if the date and time of the consent is documented, and is signed by the parent upon picking up their child.

(8) The provider shall ensure that the caregiver administering the medication:

(a) washes their hands,
(b) checks the medication label to confirm the child's name if the parent supplied the medication,
(c) checks the medication label or the package to ensure that a child is not given a dosage larger than that recommended by the health care professional or manufacturer, and
(d) administers the medication.

(9) The provider shall ensure that immediately after administering a medication, the caregiver giving the medication records the following information:

(a) the date, time, and dosage of the medication given;
(b) any errors in administration or adverse reactions; and
(c) their signature or initials.

(10) The provider shall report a child's adverse reaction to a medication or error in administration to the parent immediately upon recognizing the reaction or error, or after notifying emergency personnel if the reaction is life-threatening.

(11) If the provider chooses not to administer medication as instructed by the parent, the provider shall notify the parent of their refusal to administer the medication before the time the medication needs to be given.

(12) The provider shall keep a six-week record of medication permission and administration forms on-site for review by the Department.

R381-100-18. Activities.

(1) The provider shall offer daily activities that support each child's healthy physical, social, emotional, cognitive, and language development.

(2) The provider shall ensure that daily activities include outdoor play as weather and air quality allow.

(3) The provider shall ensure that physical development activities include light, moderate, and vigorous physical activity for a daily total of at least 15 minutes for every 2 hours children spend in the program.

(4) For each preschool and school-age group, the provider shall post a daily schedule that includes:

(a) activities that support children's healthy development, and
(b) the times activities occur including at least meal, snack, nap or rest, and outdoor play times.

(5) The provider shall ensure that toys, materials, and equipment needed to support children's healthy development are available to the children.

(6) Except for occasional special events, the provider shall
ensure that the children's primary screen time activity on media such as television, cell phones, tablets, and computers [shall] is:
(a) not [be] allowed for children 0 to 17 months old;
(b) [be] limited for children 18 months to 4 years old to 1 hour per day, or 5 hours per week with a maximum screen time of 2 hours per activity; and
(c) [be] planned to address the needs of children 5 to 12 years old.

(7) If swimming activities are offered or if wading pools are used the provider shall ensure that:
(a) the provider shall obtain parental permission is obtained before each child in care uses the pool;
(b) caregivers [shall] stay at the pool supervising whenever a child is in the pool or has access to the pool, and whenever a wading pool has water in it;
(c) diapered children [shall] wear swim diapers whenever they are in the pool;
(d) wading pools [shall be] are emptied and sanitized after use by each group of children;
(e) if the pool is over 4 feet deep, there [shall be] is a lifeguard on duty who is certified by the Red Cross or other approved certification program any time children have access to the pool; and
(f) lifeguards and pool personnel [shall] do not count toward the caregiver-to-child ratio.

(8) If offsite activities are offered, the provider shall ensure that:
(a) the provider shall obtain written parental consent is obtained before each activity;
(b) the required caregiver-to-child ratio and supervision are maintained during the entire activity;
(c) first aid supplies, including at least antiseptic, band-aids, and tweezers are available;
(d) children are wear or carry with them the name and phone number of the center;
(e) children's names are not used on nametags, t-shirts, or in other visible ways; and
(f) there is a way for caregivers and children to wash their hands with soap and water, or if there is no source of running water, caregivers and children [shall] clean their hands with wet wipes and hand sanitizer.

(9) The provider shall ensure that [On every offsite activity,] caregivers [shall] take the written emergency information and releases for each child in the group on every offsite activity[-], and that the information [shall] includes:
(a) the child's name,
(b) the parent's name and phone number,
(c) the name and phone number of a person to notify in case of an emergency if the parent cannot be contacted,
(d) the names of people authorized by the parents to pick up the child, and
(e) current emergency medical treatment and emergency medical transportation releases.

(1) The provider shall ensure that children using play equipment use it safely and in the manner intended by the manufacturer.

(2) The provider shall ensure that the highest designated play surface on stationary play equipment used by infants or toddlers does not exceed 3 feet in height.

(3) The provider shall ensure that swings used by infants or toddlers have enclosed seats.

(4) The provider shall ensure that stationary play equipment has a surrounding use zone that extends from the outermost edge of the equipment, and that, with the exception of swings, stationary play equipment that is:
   (a) used by infants or toddlers has at least a 3-foot use zone if any designated play surface is higher than 18 inches,
   (b) used by preschoolers has at least a 6-foot use zone if any designated play surface is higher than 20 inches, and
   (c) used by school-age children has at least a 6-foot use zone if any designated play surface is higher than 30 inches.

(5) The provider shall ensure that the use zone in the front and rear of a single-axis, enclosed swing extends at least twice the distance of the swing pivot point to the swing seat.

(6) The provider shall ensure that the use zone in the front and rear of a single-axis swing extends at least twice the distance of the swing pivot point to the ground.

(7) The provider shall ensure that the use zone for a multi-axis swing, such as a tire swing, extends:
   (a) at least the measurement of the suspending rope or chain plus 3 feet, if the swing is used by infants or toddlers; or
   (b) at least the measurement of the suspending rope or chain plus 6 feet, if the swing is used by preschoolers or school-age children.

(8) The provider shall ensure that the use zone for a merry-go-round extends:
   (a) at least 3 feet in all directions from its outermost edge if the merry-go-round is used by infants or toddlers, or
   (b) at least 6 feet in all directions from its outermost edge if the merry-go-round is used by preschoolers or school-age children.

(9) The provider shall ensure that the use zone for a spring rocker extends:
   (a) at least 3 feet from the outermost edge of the rocker when at rest; or
   (b) at least 6 feet from the outermost edge of the rocker when at rest if the seat is higher than 20 inches, and the rocker is used by preschoolers or school-age children.

(10) The following use zones do not overlap the use zone of any other piece of play equipment:
   (a) the use zone in front of a slide;
   (b) the use zone in the front and rear of any single-axis swing, including a single-axis enclosed swing;
   (c) the use zone of a multi-axis swing; and
   (d) the use zone of a merry-go-round if the platform diameter measures 20 inches or more.

(11) Unless prohibited in R381-100-19(10), the provider shall ensure that the use zones of play equipment only overlaps when:
   (a) the equipment is used by infants or toddlers, and there is
at least 3 feet between the pieces of equipment; or
   (b) the equipment is used by preschoolers or school-age children
and there is at least 6 feet between the pieces of equipment if the
designated play surface is 30 inches or lower, or there is at least
9 feet between the pieces of equipment if the designated play surface
is higher than 30 inches.
(12) The provider shall ensure that stationary play
equipment without moving parts children sit or stand on [shall] not
be placed on concrete, asphalt, dirt, a bare floor, or any other
hard surface, but may be placed on grass or other cushioning, if the
highest designated play surface measures between:
   (a) 6 to 18 inches if used by infants or toddlers,
   (b) 6 to 20 inches if used by preschoolers, and
   (c) 6 to 30 inches if used by school-age children.
(13) The provider shall ensure that protective cushioning
shall cover the entire surface of each required use zone and its
depth or thickness shall be determined by the highest designated play
surface of the equipment.
(14) If sand, gravel, or shredded tires are used as protective
cushioning, the provider shall ensure that the depth of the material
shall meet the [CPSC] guidelines in Table 14.
   (a) the provider shall ensure that the cushioning is
periodically checked for compaction and loosened to the depth listed
in Table 14 if compacted; and
   (b) if the material cannot be loosened due to extreme weather
conditions, the provider shall not allow children to play on the
equipment until the material can be loosened to the required depth.

TABLE 14

Depths of Protective Cushioning Required
for Sand, Gravel, and Shredded Tires

<table>
<thead>
<tr>
<th>Highest Designated Play Surface, Climbing Bar, or Swing Pivot Point</th>
<th>Fine Sand</th>
<th>Coarse Sand</th>
<th>Fine Gravel</th>
<th>Medium Gravel</th>
<th>Shredded Tires</th>
</tr>
</thead>
<tbody>
<tr>
<td>4' high or less</td>
<td>6&quot;</td>
<td>6&quot;</td>
<td>6&quot;</td>
<td>6&quot;</td>
<td>6&quot;</td>
</tr>
<tr>
<td>Over 4' up to 5'</td>
<td>6&quot;</td>
<td>6&quot;</td>
<td>6&quot;</td>
<td>6&quot;</td>
<td>6&quot;</td>
</tr>
<tr>
<td>Over 5' up to 6'</td>
<td>6&quot;</td>
<td>6&quot;</td>
<td>9&quot;</td>
<td>9&quot;</td>
<td>6&quot;</td>
</tr>
<tr>
<td>Over 6' up to 7'</td>
<td>9&quot;</td>
<td>not allowed</td>
<td>9&quot;</td>
<td>not allowed</td>
<td>6&quot;</td>
</tr>
<tr>
<td>Over 7' up to 8'</td>
<td>9&quot;</td>
<td>not allowed</td>
<td>9&quot;</td>
<td>not allowed</td>
<td>6&quot;</td>
</tr>
<tr>
<td>Over 8' up to 9'</td>
<td>9&quot;</td>
<td>not allowed</td>
<td>9&quot;</td>
<td>not allowed</td>
<td>6&quot;</td>
</tr>
<tr>
<td>Over 9' up to 10'</td>
<td>not allowed</td>
<td>allowed</td>
<td>not allowed</td>
<td>allowed</td>
<td>6&quot;</td>
</tr>
<tr>
<td>Over 10' up to 11'</td>
<td>not allowed</td>
<td>allowed</td>
<td>not allowed</td>
<td>allowed</td>
<td>6&quot;</td>
</tr>
<tr>
<td>Over 11' up to 12'</td>
<td>not allowed</td>
<td>allowed</td>
<td>not allowed</td>
<td>allowed</td>
<td>6&quot;</td>
</tr>
</tbody>
</table>
If shredded wood products are used as protective cushioning, the provider shall:
(a) keep on-site for review by the Department documentation from the manufacturer that the wood product meets ASTM Specification F1292 is protective cushioning,
(b) ensure there is adequate drainage under the material, and
(c) ensure the depth of the shredded wood meets the CPSC guidelines in Table 15.

TABLE 15
Depths of Protective Cushioning Required for Shredded Wood Products

<table>
<thead>
<tr>
<th>Highest Designated Play Surface, Climbing Bar, or Swing Pivot Point</th>
<th>Engineered Wood Fibers</th>
<th>Wood Chips</th>
<th>Double Shredded Wood Bark Mulch</th>
</tr>
</thead>
<tbody>
<tr>
<td>4' high or less</td>
<td>6&quot;</td>
<td>6&quot;</td>
<td>6&quot;</td>
</tr>
<tr>
<td>Over 4' up to 5'</td>
<td>6&quot;</td>
<td>6&quot;</td>
<td>6&quot;</td>
</tr>
<tr>
<td>Over 5' up to 6'</td>
<td>6&quot;</td>
<td>6&quot;</td>
<td>6&quot;</td>
</tr>
<tr>
<td>Over 6' up to 7'</td>
<td>9&quot;</td>
<td>6&quot;</td>
<td>9&quot;</td>
</tr>
<tr>
<td>Over 7' up to 8'</td>
<td>9&quot;</td>
<td>9&quot;</td>
<td>9&quot;</td>
</tr>
<tr>
<td>Over 8' up to 9'</td>
<td>9&quot;</td>
<td>9&quot;</td>
<td>9&quot;</td>
</tr>
<tr>
<td>Over 9' up to 10'</td>
<td>9&quot;</td>
<td>9&quot;</td>
<td>9&quot;</td>
</tr>
<tr>
<td>Over 10' up to 11'</td>
<td>9&quot;</td>
<td>9&quot;</td>
<td>9&quot;</td>
</tr>
<tr>
<td>Over 11'</td>
<td>9&quot;</td>
<td>not allowed</td>
<td>not allowed</td>
</tr>
</tbody>
</table>

If a unitary cushioning is used, the provider shall ensure that the material meets the standard established in ASTM Specification F1292. The provider shall maintain on-site for review by the Department documentation from the manufacturer that the material is cushioning for playgrounds.

(17) If a unitary cushioning is used, the provider shall ensure that the cushioning material is securely installed, so that it cannot become displaced when children jump, run, walk, land, or move on it, or be moved by children picking it up.

(18) The provider shall ensure that a play equipment platform that is more than:
(a) 18 inches above the floor or ground and used by infants or toddlers has a protective barrier that is at least 24 inches high,
(b) 30 inches above the floor or ground and used by preschoolers has a protective barrier that is at least 29 inches high, and
(c) 48 inches above the floor or ground and used by school-age children has a protective barrier that is at least 38 inches high.

(19) The provider shall ensure that there is no
gap greater than 3-1/2 inches in or under a required protective barrier on a play equipment platform.

(20) The provider shall ensure that stationary play equipment is stable or securely anchored.

(21) The provider shall ensure that there are no trampolines on the premises that are accessible to any child in care.

(22) The provider shall ensure that there are no entrapment hazards on or within the use zone of any piece of stationary play equipment.

(23) The provider shall ensure that there are no strangulation hazards on or within the use zone of any piece of stationary play equipment.

(24) The provider shall ensure that there are no crush, shearing, or sharp edge hazards on or within the use zone of any piece of stationary play equipment.

(25) The provider shall ensure that there are no tripping hazards such as concrete footings, tree stumps, tree roots, or rocks within the use zone of any piece of stationary play equipment.

R381-100-20. Transportation.

If transportation services are offered:

(1) For each child being transported, the provider shall have a transportation permission form:
   (a) signed by the parent, and
   (b) on-site for review by the Department.

(2) The provider shall ensure that each vehicle used for transporting children:
   (a) is enclosed with a roof or top,
   (b) is equipped with safety restraints,
   (c) has a current vehicle registration,
   (d) is maintained in a safe and clean condition, and
   (e) contains first aid supplies, including at least antiseptic, band-aids, and tweezers.

(3) The provider shall ensure that the safety restraints in each vehicle that transports children:
   (a) are appropriate for the age and size of each child who is transported, as required by Utah law;
   (b) are properly installed; and
   (c) are in safe condition and working order.

(4) The provider shall ensure that the driver of each vehicle who is transporting children:
   (a) is at least 18 years old;
   (b) has and carries with them a current, valid driver's license for the type of vehicle being driven;
   (c) has with them the written emergency contact information for each child being transported;
   (d) ensures that each child being transported is in an individual safety restraint that is used according to Utah law;
   (e) ensures that the inside vehicle temperature is between 60-85 degrees Fahrenheit;
   (f) never leaves a child in the vehicle unattended by an adult;
   (g) ensures that children stay seated while the vehicle is moving;
   (h) never leaves the keys in the ignition when not in the
driver's seat; and

(i) ensures that the vehicle is locked during transport.

(5) When the provider walks or uses public transportation to transport children to or from the facility, the provider shall ensure that:

(a) each child being transported has a completed transportation permission form signed by their parent,

(b) a caregiver goes with the children and actively supervises them,

(c) the caregiver-to-child ratio is maintained, and

(d) caregivers take each child's written emergency contact information and releases with them.


(1) The provider shall inform parents of the kinds of animals allowed at the facility.

(2) The provider shall ensure that [T]here are no animal on the premises that:

(a) is naturally aggressive;

(b) has a history of dangerous, attacking, or aggressive behavior; or

(c) has a history of biting even one person.

(3) The provider shall ensure that [A]animals at the facility [shall be]are clean and free of obvious disease or health problems that could adversely affect children.

(4) The provider shall ensure that [T]here are no animal or animal equipment in food preparation or eating areas.

(5) The provider shall ensure that [C]children younger than 5 years of age [shall]do not assist with the cleaning of animals or animal cages, pens, or equipment.

(6) If school-age children help in the cleaning of animals or animal equipment, the provider shall ensure that the children [shall]wash their hands immediately after cleaning the animal or equipment.

(7) The provider shall ensure that [C]children and staff [shall]wash their hands immediately after playing with or touching reptiles and amphibians.

(8) The provider shall ensure that [D]dogs, cats, and ferrets that are housed at the facility [shall]have current rabies vaccinations.

(9) The provider shall keep current animal vaccination records on-site for review by the Department.

R381-100-22. Rest and Sleep.

(1) The provider shall offer children in care a daily opportunity for rest or sleep in an environment with subdued lighting, a low noise level, and freedom from distractions.

(2) The provider shall ensure that [N]ap or rest times [shall be]are not scheduled for more than 2 hours daily.

(3) The provider shall ensure that [A] separate crib, cot, mat, or other sleeping equipment [shall be]is used for each child during nap times.

(4) The provider shall ensure that [S]leeping equipment [shall be]is kept in good repair, including mats and mattresses that shall have smooth, waterproof surfaces.
The provider shall ensure that each crib:

(a) has a tight-fitting mattress;
(b) has slats spaced no more than 2-3/8 inches apart;
(c) has at least 20 inches from the top of the mattress to the top of the crib rail, or at least 12 inches from the top of the mattress to the top of the crib rail if the child using the crib cannot sit up without assistance;
(d) does not have strings, cords, ropes, or other entanglement hazards on the crib or within reach of the child; and
(e) meets CPSC standards.

The provider shall ensure that sleeping equipment such as cribs, cots, and mats is placed at least 2 feet apart when in use.

The provider shall ensure that sleeping equipment does not block exits.

The provider shall ensure that sleeping equipment that is clearly assigned to and used by an individual child shall be cleaned and sanitized as needed and at least weekly.

The provider shall ensure that sleeping equipment that is not clearly assigned to and used by an individual child is cleaned and sanitized before each use.

The provider shall store sleeping equipment so that:
(a) the surfaces children sleep on do not touch each other, or
(b) the provider shall clean and sanitize sleeping equipment before each use.

R381-100-23. Diapering.
If the provider accepts children who wear diapers:

(1) The provider shall post diapering procedures at each diapering station and ensure that they are followed.
(2) The provider shall ensure that each child's diaper is:
(a) checked at least once every 2 hours,
(b) promptly changed when wet or soiled, and
(c) checked as soon as a sleeping child awakens.
(3) The provider shall ensure that children's diapers are changed at a diapering station and diapers shall not be changed on surfaces used for any other purpose.
(4) The provider shall ensure that the diapering surface is smooth, waterproof, and in good repair.
(5) The provider shall ensure that each diapering station is equipped with railings to prevent a child from falling when being diapered.
(6) The provider shall ensure that caregivers do not leave children unattended on the diapering surface.
(7) The provider shall ensure that caregivers clean
and sanitize the diapering surface after each diaper change, or use a disposable, waterproof diapering surface that is thrown away after each diaper change.

(8) The provider shall ensure that caregivers shall wash their hands after each diaper change.
(9) The provider shall ensure that caregivers shall place wet and soiled disposable diapers:
   (a) in a container that has a disposable plastic lining and a tight-fitting lid,
   (b) directly in an outdoor garbage container that has a tight-fitting lid, or
   (c) in a container that is inaccessible to children.
(10) The provider shall ensure that indoor containers where wet and soiled diapers are placed shall be cleaned and sanitized each day.
(11) The provider shall ensure that if cloth diapers are used:
   (a) they are not be rinsed at the facility; and
   (b) they are placed directly into a leakproof container that is inaccessible to any child and labeled with the child's name, or placed in a leakproof diapering service container.

R381-100-24. Infant and Toddler Care.
If the provider cares for infants or toddlers:
(1) The provider shall ensure that each awake infant and toddler receives positive physical and verbal interaction with a caregiver at least once every 20 minutes.
(2) To stimulate their healthy development, the provider shall ensure that infants receive daily interactions with adults; including on the ground interaction and closely supervised time spent in the prone position for infants less than 6 months of age.
(3) The provider shall ensure that infant and toddler areas are not be used to pass through or access other indoor and outdoor areas.
(4) The provider shall ensure that infants and toddlers play in the same enclosed outdoor space with older children only when there are 8 or fewer children in the group.
(5) The provider shall ensure that caregivers shall respond promptly to infants and toddlers who are in emotional distress due to conditions such as hunger, fatigue, a wet or soiled diaper, fear, teething, or illness.
(6) For their healthy development, the provider shall ensure that enough safe toys are available and accessible for infants and toddlers. There shall be enough toys accessible to each infant and toddler in the group to engage in play.
(7) The provider shall ensure that mobile infants and toddlers have freedom of movement in a safe area.
(8) The provider shall ensure that an awake infant or toddler is not confined for more than 30 minutes in any piece of equipment, such as a swing, high chair, crib, playpen, or other similar piece of equipment.
(9) The provider shall ensure that only one infant or toddler occupies any one piece of equipment at any time, unless the equipment has individual seats for more than one child.
(10) **The provider shall ensure that** [I] infants and toddlers [shall] do not have access to objects made of styrofoam.

(11) **The provider shall ensure that** [E] each infant and toddler [shall be] is allowed to eat and sleep on their own schedule.

(12) **The provider shall ensure that** [B] baby food, formula, or breast milk that is brought from home for an individual child's use [shall be] is:
   
   (a) labeled with the child's name;
   (b) labeled with the date and time of preparation or opening of the container, such as a jar of baby food;
   (c) kept refrigerated if needed; and
   (d) discarded within 24 hours of preparation or opening, except for unprepared powdered formula or dry food.

(13) **The provider shall ensure that** [I] if an infant is unable to sit upright and hold their own bottle, a caregiver [shall] holds the infant during bottle feeding [x] and that [B] bottles [shall are] not be propped.

(14) **The provider shall ensure that** caregivers [shall] swirl and test warm bottles for temperature before feeding to children.

(15) **The provider shall ensure that** [F] formula and milk, including breast milk, [shall be] is discarded after feeding or within 2 hours of starting a feeding.

(16) **The provider shall ensure that** [C] caregivers [shall] cut solid foods for infants into pieces no larger than 1/4 inch in diameter, and [shall] cut solid foods for toddlers into pieces no larger than 1/2 inch in diameter.

(17) **The provider shall ensure that** [I] infants [shall] sleep in equipment designed for sleep such as a crib, bassinet, porta-crib or play pen. **The provider shall ensure that** [A] an infant [shall] is not [be] placed to sleep on a mat, cot, pillow, bouncer, swing, car seat, or other similar piece of equipment unless the provider has written permission from the infant's parent.

(18) **The provider shall ensure that** [I] infants [shall be] are placed on their backs for sleeping unless there is documentation from a health care provider requiring a different sleep position.

(19) **The provider shall ensure that** [C] soft toys, loose blankets, or other objects [shall are] not [be] placed in cribs while in use by sleeping infants.

(20) **The provider shall ensure that** [E] caregivers [shall] document each infant's eating and sleeping patterns each day [x] and that [T] the record [shall]:
   
   (a) [be] is completed within an hour of each feeding or nap, and
   (b) include[s] the infant's name, the food and beverages eaten, and the times the infant slept.

(21) **The provider shall ensure that** [W] within an hour of each infant or toddler's diaper change, caregivers [shall] record:
   
   (a) the infant or toddler's name,
   (b) the time of the diaper change, and
   (c) whether the diaper was dry, wet, soiled, or both.

(22) The provider shall maintain on-site for review by the Department a six-week record of:
   
   (a) the eating and sleeping patterns for each infant; and
   (b) the diaper changes for each infant and toddler.