



## REQUEST FDCH LICENSING WAIVER

Child Nutrition Programs are expected to be administered according to all statutory and regulatory requirements; waivers to the requirements are exceptions. However, Section 12(l) of the Richard B. Russell National School Lunch Act, 42 U.S.C. 1760(l), provides authority for USDA to waive requirements for State agencies or eligible service providers under certain circumstances. When requesting the waiver of statutory or regulatory requirements for the Child Nutrition Programs (CNPs), including the Child and Adult Care Food Program (CACFP), the Summer Food Service Program (SFSP), the National School Lunch Program (NSLP), the Fresh Fruit and Vegetable Program (FFVP), the Special Milk Program (SMP), and the School Breakfast Program (SBP), State agencies and eligible service providers should use this template. State agencies and eligible service providers should consult with their FNS Regional Offices when developing waiver requests to ensure a well-reasoned, thorough request is submitted. State agencies and eligible service providers are encouraged to submit complete waiver requests at least 60 calendar days prior to the anticipated implementation date. Requests submitted less than 60 calendar days prior to the anticipated implementation should be accompanied by an explanation of extenuating circumstances.

For more information on requests for waiving Program requirements, refer to SP XX-2018, CACFP XX-2018, SFSP XX-2018, *Child Nutrition Program Waiver Request Guidance and Protocol- Revised*, Month XX, 2018.

**1. State agency submitting waiver request and responsible State agency staff contact information:**

Utah State Board of Education (USBE)

Contact person - Jodi McGill, CACFP Coordinator:

[jodi.mcgill@schools.utah.gov](mailto:jodi.mcgill@schools.utah.gov); 801-538-7689

State agency authorizing official -Kathleen Britton, SNS, CNP State Director:

[kathleen.britton@schools.utah.gov](mailto:kathleen.britton@schools.utah.gov); 801-538-7513

**2. Region:**

Mountain Plains Region

**3. Eligible service providers participating in waiver and affirmation that they are in good standing:**

N/A. Request is from the state agency level and USBE Child Nutrition Programs will maintain monitoring requirements for non-licensed providers to ensure good standing just as if they were licensed.

**4. Description of the challenge the State agency is seeking to solve, the goal of the waiver to improve services under the Program, and the expected outcomes if the waiver is granted. [Section 12(l)(2)(A)(iii) and 12(l)(2)(A)(iv) of the NSLA]:**

*Utah Administrative Code Rule R430-8. Exemptions from Child Care Licensing* allows a family day care home to obtain a child care license if children are in care less than 4 hours per day or fewer than 5 children are in child care at any one time. However, family day care home providers are not required to obtain a license. Additionally, Utah Rule R430-8-6 further states, a child care provider who is not required to be certified under this rule may voluntarily receive a license and agrees to be subject to all terms and conditions of a license.

Due to the conditions in CACFP 226.6(d)(4) if a license is available, Alternate Approval is not permissible. Providers who choose not to be licensed are not eligible to participate in CACFP, therefore negatively impacting access and participation.

USBE believes that due to the limited number of children in child care and/or limited hours in daily care, combined with the associated licensing cost on average of \$500 annually, many providers are choosing not to be licensed. Although FDCH Sponsors may pay for some licensing costs for new tier 1 providers, it still leaves additional and reoccurring annual costs to the provider.

Some major cost barriers to the types of providers noted above are:

- Initial child care license cost
- Annual child care license renewal cost
- Annual city business license cost (required if licensed through child care licensing)
- Annual Health and Safety inspection cost
- First Aid training cost
- CPR training cost
- Initial background checks cost

USBE believes the implementation of the waiver will eliminate this significant cost barrier and increase access to participation in CACFP. The waiver allowing these providers to follow USBE Alternate Approval standards would allow for children in these homes to receive access to meals. Balanced nutritious meals help to improve health, establish healthy habits and increase the standard of care, thereby decreasing potential health risks in a childcare home.

Providers that would fall under this waiver would follow Alternate Approval standards set by the Department of Workforce Services (DWS) and accepted by Child Care Licensing for their Friend, Friends and Neighbor (FFN) program. (see Attachment 1)

**5. Specific Program requirements to be waived (include statutory and regulatory citations). [Section 12(I)(2)(A)(i) of the NSLA]:**

*(226.6)(d)(4) Alternate approval procedures. Each State agency shall establish procedures to review information submitted by institutions for centers or homes for which **licensing or approval is not available** in order to establish eligibility for the Program. Licensing or approval is not available when (i) no Federal, State, or local licensing/approval standards have been established for child care centers, or day care homes; or (ii) no mechanism exists to determine compliance with licensing/approval standards. In these situations, independent centers, and sponsoring organizations on behalf of their facilities, may choose to demonstrate compliance with either CACFP child care standards, applicable State child care standards, or applicable local child care standards. State agencies shall provide information about applicable State child care standards and CACFP child care standards to institutions, but may require institutions electing to demonstrate compliance with applicable local child care standards to identify and submit these standards. The State agency may permit independent centers, and sponsoring organizations on behalf of their facilities, to submit self-certification forms, and may grant approval without first conducting a compliance review at the center or facility. But the State agency shall require submission of health/sanitation and fire/safety permits or certificates for all independent centers and facilities seeking alternate child care standards approval. Compliance with applicable child care standards are subject to review in accordance with § 226.6(o).*

*Utah Administrative Code R430-8-3: License or Certificate and Background Check Not Required. (1) The following types of care do not require a child care license or certificate from, or the submission of background check documents to, the Department: (b) Care provided in the home of the provider for less than four hours per day, or for fewer than five children in the home at one time.*

*Utah Administrative Code R430-8-6 Voluntary Licensure (1) A child care provider who is not required to certified under this rule may voluntarily receive a license and agree to be subject to all of the terms and conditions of license, except for the following: a) relative care only as defined in R430-8-2 (17); and b) care provided in the home of the provider on a sporadic basis only.*

The above regulations, one from 7CFR 226(d)(4) and the others from Utah State Administrative Code demonstrate the need for a waiver. The waiver will allow providers in Utah who are not required to obtain a license the opportunity to have an Alternate Approval option, thereby allowing eligibility to participate in CACFP.

**6. Detailed description of alternative procedures and anticipated impact on Program operations, including technology, State systems, and monitoring:**

Alternative Approval procedures currently in place would continue to be followed with the implementation of the waiver.

Sponsor:

- The sponsor schedules an onsite visit to train a provider applying to be alternate approval on FFN requirements and regulations during the initial CACFP training.
- The provider must then submit a Provider Compliance Certification Form (*See Attachment 3*) to the sponsor.
- The sponsor then conducts an initial announced Health and Safety Home Inspection (*See Attachment 2*). The Relative/Alternate Care Health and Safety Home Inspection form has been adapted directly from the FFN Health and Safety Home Inspection form, which follows the same standards as the FFN Program (*See Attachment 2*). The completed inspection form ensures that all FFN requirements are met.
- The sponsor cannot approve the provider for alternate care if the provider is not there during the initial announced inspection or if non-compliance to FFN rules are found and the deadline to correct is not met.
- A second, unannounced, Health and Safety inspection will be conducted after the initial approval.
- Once the provider is approved two health and safety inspections will be conducted each year. These inspections will be in addition to the required CACFP provider monitoring reviews.
- The sponsor must ensure that all household members have a background check that is in “Cleared” status. “Cleared” status indicates the background check has been conducted and no history was found that would disqualify a provider from participating. If a person in the household has a background check in “Denied” status, then the sponsor must not approve a provider. Alternate approval providers get background checks the same way that FFN providers get them. Sponsors have access

to the database for background checks. All household members 12 and older must have a background check and those 18 and older must also have fingerprinting done.

- Once a sponsor has determined a provider has met all Alternate Approval requirements and CACFP requirements a provider information sheet must be submitted electronically to the USBE for approval. Providers submitted to the USBE for alternate approval will be identified by category, such as relative care, inability to receive a license because of lack of citizenship, having less than 5 children in care or caring for children less than 4 hours per day. A specific Certification Form will be developed to accommodate the addition of Alternate Approval for providers based on watching fewer than 5 children and/or watching children for less than 4 hours per day.
- An annual expiration date is identified by the sponsor for each alternate approval provider for renewal of alternate approval requirements.
- Once the waiver is approved each provider information sheet in CNPWeb, for Alternate Approval providers will include an attestation statement by the sponsor that all required Alternate Approval requirements have been met to meet FFN requirements.
- Providers who fail to comply with FFN requirements may be subject to the corrective action and serious deficiency process. This will be done after consultation with the sponsor and Child Care Licensing representative who oversees the FFN program.

State Agency (USBE):

- The CNPWeb software system alerts USBE staff when a new provider has been entered and is ready for approval. The USBE will review background checks by using the Utah Child Care Licensing database. All household members listed are reviewed to ensure they are in “Cleared” status.
- CNPWeb will have a mandatory business rule that the sponsor-provided attestation statements must be entered prior to completion and submission of the provider information sheet.
- The USBE then approves the provider information sheet after verifying the background check is in “cleared” status and the above information is complete and compliant with CACFP and FFN requirements.
- During administrative reviews, conducted at least every two years for an FDCH sponsor, the USBE will check alternate approval providers to

ensure the sponsor correctly monitored for FFN regulations and requirements.

The only anticipated impact on FDCH Program operations would be increased responsibility on the part of the sponsor to make sure providers are within the smaller child care limits and/or limited hours of care. All other responsibilities, such as background checks and home inspections, are already conducted with current alternate approval providers.

This will not impact current technology in use by the State or Sponsors. Sponsors will be able to conduct the additional monitoring requirements during the regular monitoring reviews. The additional alternate approval requirements will not affect the State Agency as they will be included in normal FDCH Sponsor reviews.

**7. Description of any steps the State has taken to address regulatory barriers at the State level. [Section 12(l)(2)(A)(ii) of the NSLA]:**

The USBE has worked with the Administrator of Utah Child Care Licensing on how the wording found in *Utah Administrative Code R430-8-3* is a barrier to providers who want to participate in CACFP. Providers who watch children less than 4 hours a day or have less than 5 children in care feel like the cost of becoming licensed is prohibitive and limits their access to CACFP if they are not licensed. Although Child Care Licensing prefers to leave the opportunity to become licensed available, they understand that not all smaller providers are able to afford the costs. These issues have been discussed with the Child Care Licensing Administrator and he is in favor of us pursuing alternate avenues, including this waiver.

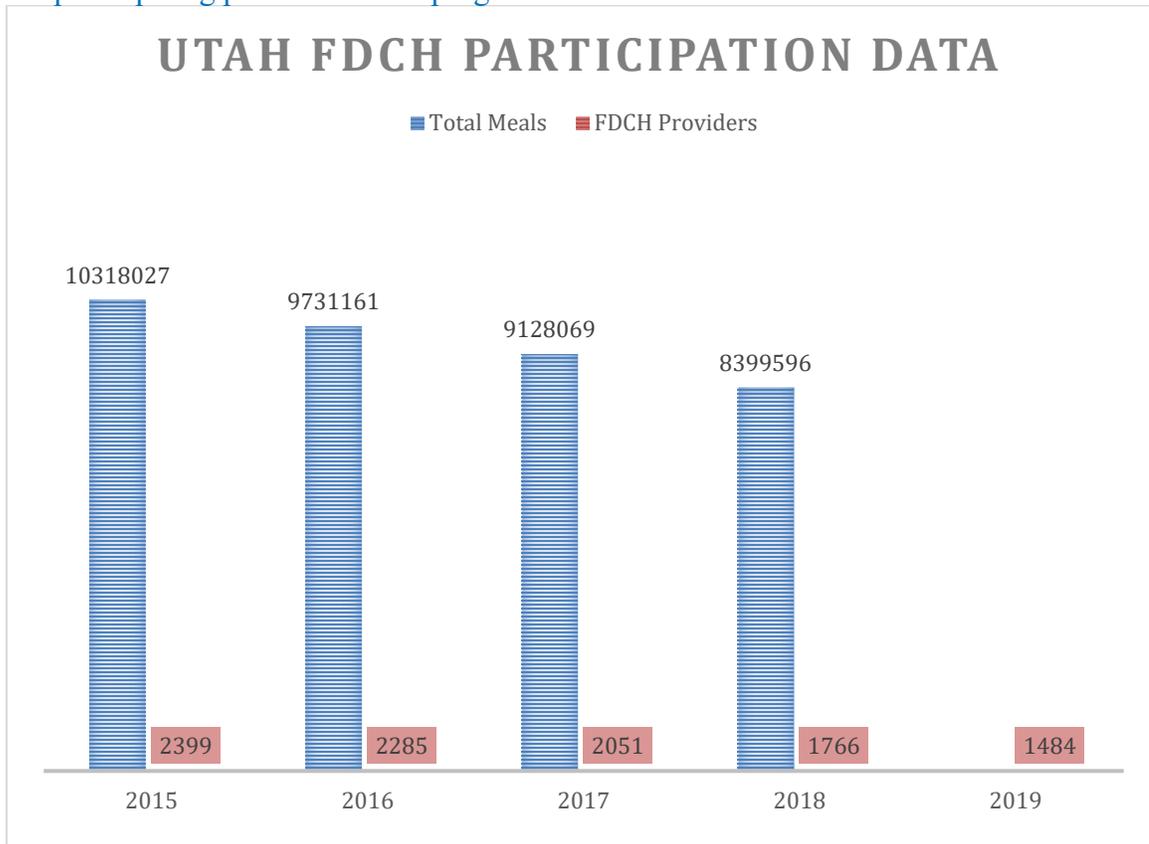
In addition, providers may be willing to have regular monitoring reviews because they see the benefit from the “food program.” We believe that providers who would normally operate outside of the CACFP would benefit from an alternate approval option and the oversight by the CACFP.

**8. Anticipated challenges State or eligible service providers may face with the waiver implementation:**

In collaborating with the Administrator of Utah Child Care Licensing there are no challenges with the implementation of the waiver that would not be addressed by monitoring visits conducted by a sponsor or through reviews conducted by the State Agency.

**9. Description of how the waiver will not increase the overall cost of the Program to the Federal Government. If there are anticipated increases, confirm that the costs will be paid from non-Federal funds. [Section 12(l)(1)(A)(iii) of the NSLA]:**

Sponsor administrative funds would increase due to more providers participating on the CACFP. There has been a significant decrease in providers in Utah over the past several years (data trend chart below). The implementation of this waiver will allow for an increase of healthy meals served to children and stabilization of participating providers in the program.



**10. Anticipated waiver implementation date and time period:**

June 1, 2019 and forward.

**11. Proposed monitoring and review procedures:**

Sponsor:

- Monitoring will be conducted at least 3 times per year
- Monitoring reviews and claim submissions will evaluate the number of children enrolled and in care. This process will ensure that if a provider has children in care for 4 hours or more per day or 5 or more children, the provider would be ineligible to claim. Also, the Minute Menu software, currently used by all Utah FDCH Sponsors,

will be set up to limit the capacity of children in care and to limit the total hours a provider can watch children in a day. This will ensure compliance with this waiver as the Minute Menu system will not allow meals to be claimed outside of this scope. The USBE anticipates Utah FDCH sponsors in the future will continue to use Minute Menu, but if that changes, our office will ensure that sponsors follow equivalent processes to ensure compliance.

- A minimum of two home inspections will be conducted in conjunction with normal monitoring to evaluate the health and safety of the home.
- Annually the sponsor requires an Alternate Approval provider to submit renewal documentation including CPR training, first aid training, and the completed Provider Compliance Certification form (See *Provider Compliance Certification Forms*). The annual renewal is tracked by the sponsor. By completing the Provider Compliance Certification Form the provider attests to meeting the specific Alternate Approval qualification requirements. Once this waiver is approved a specific standardized form will be developed by the USBE for providers caring for fewer than 5 children and/or caring for children for less than 4 hours per day. The Provider Compliance Certification Form requires a provider to list all household members. Once completed the sponsor compares the names on the form to the Child Care Licensing database to ensure background checks have been completed successfully.
- Sponsors will track all requirements mirroring the FFN Program including First Aid and CPR Certifications and training. If any of these are not up to date when the provider renews, then the provider cannot be approved until everything is up to date and appropriate documentation is submitted to the sponsor.

State Agency (USBE):

- The Sponsor will be reviewed by the USBE a minimum of every two years.
- During FDCH administrative reviews alternate approval providers are reviewed specifically to ensure that current certification forms are on file, background checks are completed, and health inspections are documented. By reviewing this documentation ensures that alternate approval providers are following the same requirements as FFN providers.
- The USBE/CNP CNPWeb software system currently has an expiration date for all providers including those with Alternate Approval status. The sponsor is required to update CNPWeb with the expiration date once all annual documentation is received. This must be done before the provider can claim.
- The site information sheet for all FDCH providers, including those with Alternate Approval status, must be updated by the sponsor after monitoring visits, Health

and Safety Home Inspection, background checks, Provider Compliance Certification Forms, etc. have been conducted and submitted. This information is all looked at during administrative reviews conducted by the USBE.

- Once the waiver is approved each provider information sheet in CNPWeb, for Alternate Approval providers, will include an attestation statement for Sponsors to certify, that all required Alternate Approval requirements have been met.

**12. Proposed reporting requirements (include type of data and due date(s) to FNS):**

N/A

**13. Link to or a copy of the public notice informing the public about the proposed waiver [Section 12(l)(1)(A)(ii) of the NSLA]:**

The following link to our webpage provides public notice about our proposed waiver and the submitted document for public information.

<https://www.schools.utah.gov/cnp/fdch?mid=1214&tid=5>

The following statement will be added to the USBE/CNP website <https://www.schools.utah.gov/cnp/fdch?mid=1214&tid=1> when the waiver is approved: "If your in-home child care is not currently licensed you may still qualify to participate with the Child and Adult Care Food Program. Please contact one of the Family Day Care Home sponsors below for additional information."

**14. Signature and title of requesting official :**

 4/15/19

Title: Director, Child Nutrition Programs

Requesting official's email address for transmission of response:

---

**TO BE COMPLETED BY FNS REGIONAL OFFICE:**

*FNS Regional Offices are requested to ensure the questions have been adequately addressed by the State agency and formulate an opinion and justification for a response to the waiver request based on their knowledge, experience and work with the State.*

**Date request was received at Regional Office:**

- Check this box to confirm that the State agency has provided public notice in accordance with Section 12(l)(1)(A)(ii) of the NSLA

**• Regional Office Analysis and Recommendations:**

**DEPARTMENT OF WORKFORCE SERVICES (DWS)  
FAMILY, FRIEND, & NEIGHBOR (FFN) APPROVAL REQUIREMENTS**

**Approvals**

- 1) To receive an initial DWS FFN Child Care Approval, providers must do all of the following:
  - a) Read the requirements.
  - b) Submit the following to the Utah Department of Health Child Care Licensing Program:
    - i) a completed Child Care Licensing Application,
    - ii) a completed Background Check form for each Covered Individual, and
    - iii) a fingerprint card and a fingerprint processing fee for each Covered Individual 18 years old and older.
  - c) Complete New Provider Training.
  - d) Have Covered Individuals who passed the CCL background check.
  - e) Have a home inspection and be in compliance with the health and safety regulations.
- 2) A DWS FFN Approval application will be denied when:
  - a) The provider does not submit all background check information and fees within 60 calendar days of submitting the application;
  - b) The provider does not complete New Provider Training within 60 calendar days of submitting the application;
  - c) All Covered Individuals do not pass the background check;
  - d) The provider is not there for the home inspection; and/or
  - e) The provider does not show compliance with the health and safety regulations within 60 calendar days of submitting the application.
- 3) To maintain a DWS FFN Approval, the provider must follow all child care requirements.
- 4) To renew a DWS FFN Approval, the provider must have an announced home inspection before the end date of the approval and be in compliance with the health and safety regulations.
- 5) A DWS FFN Approval will be not be renewed when:
  - a) The provider is not there for the announced home inspection; and/or
  - b) The provider does not show compliance with the health and safety regulations.
- 6) DWS FFN Approvals are active for one year.
- 7) DWS FFN Approvals are for the provider and the location and are not assignable or transferable. An application for a DWS FFN Approval is required for a different provider and for a different location.
- 8) DWS FFN Approvals will only be given for child care in the home of the provider and/or in the home of the child(ren) in care.
- 9) DWS FFN Approvals will not be given if there is an active approval at the same location.
- 10) A DWS FFN Approval is not a guarantee of payment from DWS. The DWS customer applying for child care assistance must be eligible and comply with the DWS eligibility processes. The DWS customer has specific application, review, and reporting time frames that may be different from the DWS FFN Approval process with Child Care Licensing. Late verifications may result in a loss of benefits and/or require the DWS customer to complete a new child care assistance application. The DWS customer is responsible for any costs not covered by DWS.

## Inspections

- 1) Before initial approval, the provider will have an announced home inspection to assess compliance with the health and safety regulations. When noncompliance to any regulation is found during this inspection, the provider will be given a date to come into compliance with the regulation(s). The application will be denied when:
  - a) The provider is not there for the home inspection.
  - b) The provider does not show compliance with the regulation(s) by the required date.
- 2) During the approval year, the provider will have an unannounced inspection to assess compliance with the health and safety regulations. Before this inspection, the provider will be contacted and asked the days and times he/she is providing child care. When noncompliance to any regulation is found during this inspection, the provider will be given a date to come into compliance with the regulation(s). The approval will be deactivated when:
  - a) The provider does not contact the licensor with the days and times he/she is providing child care.
  - b) The provider is not there for the inspection. (Several attempts will be made to complete the inspection.)
  - c) The provider does not show compliance with the regulation(s) by the required date.
- 3) Before the expiration date of the approval, the provider will have an announced inspection to assess compliance with the health and safety regulations. When noncompliance to any regulation is found during this inspection, the provider will be given a date to come into compliance with the regulation(s). The approval will be deactivated when:
  - a) The provider is not there for the inspection.
  - b) The provider does not show compliance with the regulation(s) by the required date.
- 4) When there are concerns with compliance, the providers will have an unannounced inspection to assess compliance with the health and safety regulations. When noncompliance to any regulation is found during this inspection, the provider will be given a date to come into compliance with the regulation(s). When the provider does not show compliance with regulations by the required date, the approval will be deactivated.

## Appeal Rights

Providers can appeal any action taken by the Child Care Licensing staff by submitting a Child Care Licensing Appeal Request Form. The form is submitted through the Child Care Licensing Portal.

## Health and Safety Regulations

### 1) Providers

- a) Providers must:
  - i) be at least 18 years old; and
  - ii) have knowledge of and comply with all applicable federal, state, and local laws and rules, including fire requirements.
- b) Providers can only live in the same home as the child(ren) in care for payment when one or more of the children have special needs. When care is in the home of the provider, a parent of the child(ren) in care for payment cannot live in that home.
- c) Providers cannot be siblings who live in the same home as the children in care for payment.
- d) Providers cannot be parents, specified relatives, or legal guardians of the children in care for payment. This includes divorced spouses, step-parents, spouses of specified relatives, and spouses of legal guardians.
- e) Providers cannot provide care when there is a parent of the child(ren) in the home, including when a DWS customer works from home.
- f) In an unforeseen emergency and for up to 24 hours, the provider may use an emergency provider for the children in care. The emergency provider must be at least 18 years old and cannot have a felony or misdemeanor conviction or a substantiated case of abuse or neglect.
- g) Providers must have a Health and Safety Plan on the Department form that is approved by Child Care Licensing staff.
- h) At least 30 calendar days before the expiration date of their approval, providers must complete and document at least 5 hours of ongoing child care training.
  - i) The training must include at least the following topics:
    - (1) recognizing the signs and symptoms of child abuse and neglect and the legal reporting requirements of suspected child abuse and neglect;
    - (2) recognizing the signs of homelessness and what assistance is available;
    - (3) the prevention of Sudden Infant Death Syndrome and safe sleeping practices;
    - (4) the prevention of Shaken Baby Syndrome and Abusive Head Trauma;
    - (5) a review and, when needed, update of the Health and Safety Plan; and
    - (6) a review of the Health and Safety Regulations.
  - ii) The documentation of the training must include:
    - (1) the date of the training;
    - (2) the training topic; and
    - (3) the length of the training.

## 2) Background Checks

- a) All Covered Individuals must pass current Child Care Licensing background checks. Providers must associate Covered Individuals with current CCL background checks with their facility or submit background check forms, required fingerprints, and required fees for new Covered Individuals and new Covered Individuals must pass background checks before moving into the home. Background checks must be renewed each year and providers must submit new background check forms before the expiration date of current background checks. Covered Individuals will not pass background checks when they have any of the following:
  - i) any felony conviction,
  - ii) any Class A misdemeanor conviction within the last 10 years,
  - iii) certain Class A misdemeanor convictions older than 10 years,
  - iv) certain Class B and Class C misdemeanor convictions such as:
    - (1) public assistance or unemployment fraud,
    - (2) offenses against the family,
    - (3) offenses against a person,
    - (4) pornography,
    - (5) prostitution or any type of sexual offense,
    - (6) simple assault,
    - (7) domestic violence,
    - (8) lewdness,
    - (9) child abuse, and
    - (10) contribution to the delinquency of a minor.
  - v) any supported finding of child abuse or neglect as determined by DCFS,
  - vi) a pending indictment, a plea of no contest to, a plea in abeyance, or a diversion agreement to any charges whose conviction would result in the Covered Individual not passing,
  - vii) a juvenile record comparable to anything that would result in the Covered Individual not passing if on an adult record, or
  - viii) a registered sex offender in the home.
- b) Before moving in the home in the home, new Covered Individuals must pass a Child Care Licensing background check. Providers must associate Covered Individuals with current CCL background checks with their facility or submit background check forms, required fingerprints, and required fees for new Covered Individuals and new Covered Individuals must pass background checks before moving into the home.
- c) Before arriving at the home, Covered Individuals staying in the home for more than 2 weeks must pass a Child Care Licensing background check. Providers must associate Covered Individuals with current CCL background checks with their facility or submit background check forms, required fingerprints, and required fees for new Covered Individuals and new Covered Individuals must pass background checks before arriving at the home.
- d) The provider must submit Background Check forms for children who live in the home where care is provided when the children turn 12 years old. These forms must be submitted within 10 working days of the children's 12<sup>th</sup> birthday.
- e) Individuals who failed to pass the background check may not be on the premises of the home where care is provided.

- 3) Number of Children in Care – Children in care are all children younger than 13 years old, including the provider’s children and any children who are in the home when care is provided.
- a) When care is in the home of the provider:
    - i) When the children in care are all siblings who are related to the provider and there are no other children in care, there is no limit to the number of children in care.
    - ii) When there are children in care who are not siblings who are related to the provider, there can be no more than 8 children in care and no more than 2 of those children can be younger than 2 years old. When there are more than 4 children in care who are not related to the provider, the provider must (by statute) have a Child Care Family License or Residential Certificate.
  - b) When care is in the home of the child(ren) in care, only the child(ren) living in the home can be in care, and:
    - i) When the children in care are all siblings and there are no other children in care, there is no limit to the number of children in care.
    - ii) When there are children in care who are not siblings, there can be no more than 8 children in care and no more than 2 of those children can be younger than 2 years old.
- 4) Supervision
- a) The provider, not other individuals in the home or outdoor area, must be awake, physically onsite, and actively supervising children in care at all times. Actively supervising children in care means being inside the home when children in care are inside the home, being outside when children in care younger than 5 years old are outside, knowing the number of children in care at all times, and focusing on the children and not on personal interests.
  - b) The provider, not other individuals in the home or outdoor area, must supervise sleeping infants by:
    - i) having the infants sleep in a location where they are within sight and hearing of the provider or
    - ii) an in-person observation of the sleeping infants at least once every 15 minutes.
  - c) When a wading pool is used by children in care, the provider, not other individuals in the home or outdoor area, must be at the pool supervising the children in care whenever there is water in the pool.
  - d) When there is a swimming pool that is not emptied after each use on the premises, the provider, not other individuals in the home or outdoor area, must be at the pool supervising children in care whenever they are using the pool or have access to the pool.
  - e) When there is a trampoline on the premises, the provider, not other individuals in the home or outdoor area, must be next to the trampoline supervising the children in care whenever the children in care are on the trampoline.
- 5) Child Safety and Injury Prevention
- a) The provider must take all reasonable measures to protect the safety of children in care and must not engage in or allow conduct that unreasonably endangers children in care or is adverse to the health, morals, welfare, and safety of children in care.
  - b) The home, outdoor play area, toys, and equipment must be maintained in a safe manner to prevent injury to children in care.
  - c) The provider must have a working telephone.
  - d) The provider must have a working fire extinguisher.
  - e) The provider must have a working smoke detector on each floor of the home.
  - f) When there are firearms on the premises, the firearms cannot be loaded and must be in a cabinet, safe, or area that is locked with a key, combination, or fingerprint lock, unless their use is in accordance with the Utah Concealed Weapons Act or as otherwise allowed by law.
  - g) When there are infants in care:
    - i) The provider must ensure that infants sleep in equipment designed for sleep, such as a crib, bassinet, porta-crib, or playpen unless the provider has written instructions from the parent to have the infant sleep in other equipment. Equipment designed for sleep does not include mats, cots, bouncers, swings, or car seats.
    - ii) The provider must place infants on their backs for sleeping, unless the provider has written instructions from a health care provider for a different sleep position.

- h) The following must be inaccessible:
    - i) prescription medications, over the counter medications, vitamins, and herbal supplements;
    - ii) empty refrigerators and freezers;
    - iii) exposed live electrical wires;
    - iv) open containers of alcohol;
    - v) illegal substances;
    - vi) when in use, portable space heaters, fireplaces, and wood burning stoves;
    - vii) toxic substances;
    - viii) poisonous plants; and
    - ix) open flames.
  - i) There can be no accessible animal that has a history of dangerous, attacking, or aggressive behavior.
  - j) When there is an outdoor area used by children in care:
    - i) The following must be inaccessible:
      - (1) unanchored swings and large metal slides,
      - (2) raised decks or balconies and open stairwells 5 feet or higher without protective barriers or with protective barriers with gaps greater than 5 by 5 inches,
      - (3) motor vehicles on blocks, and
      - (4) rebar or metal rods less than 36 inches long sticking up from the ground or out of walls.
    - ii) Stationary play equipment accessible to children in care cannot be over hard surfaces such as cement or asphalt.
    - iii) Equipment in the outdoor area must be used in a safe manner to prevent injury to children in care.
  - k) The provider must ensure that children in care are protected from unintended access to:
    - i) pools that are not emptied after each use;
    - ii) hot tubs with water in them; and
    - iii) water hazards such as ponds, streams and fountains with more than 2 inches of water in them.
  - l) While transporting children in care, the provider must:
    - i) ensure that children in care are wearing appropriate individual safety restraints;
    - ii) never leave the children in care unattended in the vehicle; and
    - iii) not be intoxicated or impaired.
- 6) Child Health
- a) There must be a clean and sanitary environment for the children in care.
  - b) There must be a flushing toilet and a working hand washing sink accessible to non-diapered children in care.
  - c) The provider must ensure that children in care are not subjected to physical, emotional, or sexual abuse while in care.
  - d) The provider must follow the reporting requirements for the witnessing or suspicion of abuse, neglect, and exploitation found in Section 62A-4a-403 and 62A of the Utah Code.
  - e) The provider must not do any of the following to children in care:
    - i) use any form of corporal punishment that produces pain or discomfort such as hitting, spanking, shaking, biting, or pinching;
    - ii) restrain their movement by binding, tying, or other form of restraint;
    - iii) shout at them;
    - iv) inflict any form of emotional abuse;
    - v) force or withhold food, rest, or toileting; or
    - vi) confine them in a closet, locked room, or other enclosure such as a box, cupboard, or cage.
- 7) Parents
- a) Providers must ensure parents have access to all areas of the home used for care.
  - b) Providers must ensure parents are aware that they:
    - i) take children in care off the premises, such as to run errands or go to a park; and/or
    - ii) allow children in care to leave the premises, such as to go to a neighbor's house or ride their bikes on the street.

8) Notifications and Reportable Changes

- a) In the case of a life threatening incident or injury or an incident or injury that poses a threat of the loss of vision, hearing, or a limb, the provider must contact emergency personnel immediately and before contacting the parent.
- b) The provider must report any adverse reaction to a medication or any error in the administration of a medication to the parent immediately upon recognizing the error or reaction.
- c) Within 24 hours of its occurrence, the provider must notify the Department of Health, Child Care Licensing staff of any fatality, hospitalization, emergency medical response, or injury that requires attention from a health care provider, except for emergency medical transport that was part of the child's medical treatment plan. The provider must submit documentation of the incident to the Child Care Licensing staff within five working days of the incident.
- d) Within 48 hours of becoming aware of the conviction, the provider must notify the Department of Health, Child Care Licensing Staff of any felony or misdemeanor conviction of a Covered Individual.
- e) Within 10 calendar days of the change, the provider must notify the Department of Health, Child Care Licensing staff of changes in any of the following:
  - i) his/her name;
  - ii) his/her telephone number or email address;
  - iii) his/her child care schedule;
  - iv) the number of children of DWS customers in care; and/or
  - v) the DWS customer(s) whose child(ren) are in care and their DWS case number(s).
- f) By the last day of care at the present address, the provider must notify the Department of Health, Child Care Licensing staff of changes of location by submitting an Child Care Licensing Application for the new location.

9) Emergency Preparedness

- a) The provider must have current Red Cross, American Heart Association, or equivalent certification in First Aid.
- b) The provider must have current Red Cross, American Heart Association, or equivalent certification in infant and child CPR from a class that included hands-on testing.
- c) The provider must have an emergency preparedness plan that is reviewed annually and updated when needed. (This is part of the Health and Safety Plan.)
- d) The provider must conduct fire evacuation drills at least quarterly and document the date and time of each drill.
- e) The provider must conduct disaster (other than fire) drills at least yearly and document the date and time of each drill.

10) Documentation

- a) The provider must keep the following records at the home where care is being provided and available for review by Department of Health, Child Care Licensing staff:
  - i) current First Aid and CPR certifications,
  - ii) a three-year record of the dates and times each child was in care,
  - iii) documentation of current immunizations for each child in care who does not attend school,
  - iv) the Health and Safety Plan on the Department form,
  - v) documentation of fire and disaster drills, and
  - vi) documentation of ongoing child care training.

## Definitions

- 1) "Children in Care" are those children for whom the provider receives direct or indirect compensation for their care and all other children younger than 13 years old who are in the home when care is provided.
  - 2) "Covered Individual" means:
    - a) When care is being provided in the home of the provider: Everyone 12 years old and older who lives (stays continuously for 2 weeks or longer) in the same home as the provider.
    - b) When care is being provided in the home of the child(ren) in care: Everyone 12 years old and older who lives (stays continuously for 2 weeks or longer) in the same home as the child(ren) in care, except the parents or guardians, requesting DWS child care assistance and siblings younger than 18 years old.
  - 3) "Emotional abuse" means behavior that could impair a child's emotional development, such as threatening, intimidating, humiliating, or demeaning a child, constant criticism, rejection, profane language, and inappropriate physical restraint.
  - 4) "Health care provider" means a licensed professional with prescriptive authority, such as a physician, nurse practitioner, or physician's assistant.
  - 5) "Inaccessible" means:
    - a) locked, such as in a locked room, cupboard, or drawer;
    - b) secured with a child safety device, such as a child safety cupboard lock or doorknob device;
    - c) behind a properly secured child safety gate;
    - d) located in a cupboard or on a shelf at least 36 inches above the floor; or
    - e) located in a bathroom cupboard or on a bathroom shelf at least 36 inches above a surface on which a child could stand or climb.
  - 6) "Infant" means a child age birth through 11 months.
  - 7) "Living in the same home" means the person:
    - a) shares any of the following with the provider:
      - i) a kitchen
      - ii) a bathroom
      - iii) a living area (the living room and/or bedroom)
      - iv) an entrance
        - (1) The person shares the entrance when, for example, he/she must walk through the living room to access the stairs to his/her basement apartment.
        - (2) The person has a separate entrance when, for example, he/she uses a common door from the outside but can access the stairs to his/her basement apartment without going through any area of the main home and there is not an interior doorway (inside the home) between the living areas.
    - v) an address – the person does not have a separate residential/physical address recognized by the post office (a PO Box is not a separate mailing address; or
  - b) lives in a separate structure with running water and electricity that is on the same property as the provider (such as an apartment over the garage or a camper in the yard) but shares the kitchen and/or bathroom with the provider; or
  - c) could have unsupervised contact with the children in care.
- 8) "Parent" means the parent or legal guardian of a child in care.
- 9) "Provider" means the person approved to provide child care.
- 10) "Related children" mean the children for whom the provider is the parent, legal guardian, stepparent, grandparent, step grandparent, great grandparent, sibling, halfsibling, stepsibling, aunt, step aunt, great aunt, uncle, step uncle, or great uncle.
- 11) "School age" means 5 years old and older.
- 12) "Sexual abuse" means abuse as described in Utah Code, Section 76-5-404-1.
- 13) "Stationary play equipment" means equipment such as a climber, slide, swing, merry-go-round, or spring rocker, which is meant to stay in one location when in use.

## INITIAL Relative/Alternate Care Health and Safety Home Inspection

Provider ID:	Provider name:	Phone Number:			
Address where care is done:		___ Provider Home	___ Child(ren)'s Home		
Monitor Name:	Date:	Start Time:	End Time:		
Type of care: ___ Relative care ___ Alternate					
Times care is provided (if different than FDCH application):					
Indicate which rooms in the house children have access to:					
List everyone 12 years or older living in the household. If there is a helper not living in the home they are also to be listed. <b>(FFN Interpretation Manual (2)(a))</b>					
Last Name First Name	Relationship to provider	Date of Birth	Is there a BCI attached (12 and older)?		
			Yes	No	N/A
<p><b>*Any individual 18 years old or older living in the home must also submit an Informed Consent and Release of Liability form to DCFS and 10-finger fingerprints one time to Child Care Licensing.</b></p> <p>A relative care provider is someone is caring for a related child. Related is defined as: a sibling or step-sibling under 13 from a separate household, aunt, uncle, grandparent, step-aunt/uncle, step-grandparent, great aunt/uncle, or great grandparent.</p> <p><b>NOTE: cousins or children of cousins are not eligible to be on the program under Relative Care.</b></p> <p>List the name(s) of the child(ren) in care, including your own, and the relationship to the child(ren). For example, niece, nephew, grandchild, sibling, etc. Circle yes or no to tell us if you live with the child(ren).</p>					
				<b>Live with Provider</b>	
Child name: _____	Relationship: _____	Yes	No		
Child name: _____	Relationship: _____	Yes	No		
Child name: _____	Relationship: _____	Yes	No		
Child name: _____	Relationship: _____	Yes	No		
Child name: _____	Relationship: _____	Yes	No		
Child name: _____	Relationship: _____	Yes	No		
Child name: _____	Relationship: _____	Yes	No		
Child name: _____	Relationship: _____	Yes	No		
Child name: _____	Relationship: _____	Yes	No		
Child name: _____	Relationship: _____	Yes	No		
Child name: _____	Relationship: _____	Yes	No		
<p><i>Initial: _____</i> I certify that I am related to the children I care for as defined above. I care for ___ child(ren).</p>					

### EVALUATION

**\*Any question answered no requires a plan to correct listed on the summary sheet**

#### COVERED INDIVIDUALS

Explain	The Provider must submit a BCI for anyone moving into the home within 10 working days <b>(FFN Interpretation Manual (2)(b))</b>	Yes	No*	N/A
---------	---------------------------------------------------------------------------------------------------------------------------------	-----	-----	-----

Explain	The provider understands that a BCI must be submitted within 10 working days of their arrival for any individuals who stays in the home for 2 weeks or more <b>(FFN Interpretation Manual (2)(c))</b>	Yes	No*	N/A
<b>NUMBER OF CHILDREN IN CARE</b>				
Observe	<b>Relative Care:</b> The maximum capacity is 8 children in care*. No more than 2 can be younger than 2 years old. OR with 6 or fewer children in care there can be no more than 3 children under the age of 2. All children must be related to the provider and own children under 4 count towards capacity. (*If ALL outside children are siblings to each other then there is no limit to the number of children in care) <b>Alternate Care:</b> The maximum capacity is 4 children with no more than 2 children under the age of 2. The children do not need to be related. Is provider within capacity? <b>(FFN Interpretation Manual (3)(a)(i-ii))</b>	Yes	No*	N/A
<b>SUPERVISION</b>				
<b>Note: The provider must be awake, physically present and directly supervising children in care at all times</b>				
Observe	The provider must be present and properly supervising children when they are indoors and/or outdoors. Provider must be able to hear school age children <b>(FFN Interpretation Manual (4)(a))</b>	Yes	No*	N/A
Observe	<b>The Provider must supervise sleeping infants</b> - Infants sleep in a location where they are within sight and hearing, or the provider does an in-person observation once every 15 minutes, or the provider uses a monitoring device that detects and sounds an alarm if the infant stops breathing. <b>(FFN Interpretation Manual (4)(b)(i-ii))</b>	Yes	No*	N/A
Observe	The provider supervises children (be close enough to see the bottom of the pool)) when there is water in a wading pool and/or a swimming pool that has not been emptied. <b>(FFN Interpretation Manual (4)(c-d))</b>	Yes	No*	N/A
Observe	The provider is next to the trampoline supervising the children if and when any child is on it. <b>(FFN Interpretation Manual (4)(e))</b>	Yes	No*	N/A
<b>CHILD SAFETY AND INJURY PREVENTION</b> <b>(the provider must take all reasonable measures to protect the safety of the children and must not allow conduct that endangers the children)</b>				
Observe	The home, outdoor areas, toys and equipment are maintained in a safe manner to prevent injury. <b>(FFN Interpretation Manual (5)(b))</b>	Yes	No*	N/A
Observe	There is a working phone, fire extinguisher and smoke detector. (A smoke detector must be on each floor of the home). <b>(FFN Interpretation Manual (5)(c-e))</b>	Yes	No*	N/A
Observe	There are firearms on the premises. They are <b>not</b> loaded and are secured in a cabinet, safe or area that is locked with a key or combination lock. <b>(FFN Interpretation Manual (5)(f))</b>	Yes	No*	N/A
Observe	Infants sleep in equipment designed for sleep such as a crib, bassinet, porta crib or playpen. Infants are not placed on their stomach for sleeping. <b>(FFN Interpretation Manual (5)(g)(i-ii))</b>	Yes	No*	N/A
Observe	Children <b>do not</b> have access to the following: a) Toxic / Cleaning chemicals b) Prescription medications, c) over-the counter vitamins or herbal supplements; d) empty refrigerators or freezers; e) exposed live electrical wires; f) open containers of alcohol; g) any illegal substances; h) space heaters, fireplaces, wood burning stove (when in use) or any open flames; i) Poisonous plants. <b>(FFN Interpretation Manual (5)(h)(i-ix)) Leave handout listing poisonous plants &amp; toxic substances</b>	Yes	No*	N/A
Observe	Provider understands that animals the children have access to must not have a history of dangerous, attacking or aggressive behavior <b>(FFN Interpretation Manual (5)(i))</b>	Yes	No*	N/A
Observe	When outdoor areas are being used by children these items must be inaccessible to the children in care: a) Unanchored swing and large metal slides; b) Raised decks or balconies and open stair wells 5 feet or higher without protective barriers with gaps	Yes	No*	N/A

	greater than 5" by 5"; c) Motor vehicles on blocks; d) Rebar or metal rods less than 36 inches long sticking up from the ground or out of walls. Stationary play equipment cannot be over hard surfaces such as cement or asphalt; Equipment must be used in a safe manner to prevent injury <b>(FFN Interpretation Manual (5)(j)(i-iii))</b>			
Observe	The provider ensures that children do not have access to hot tubs, or other water hazards like ponds and streams with more than 2 inches of water. Children are protected from unintended access to the above. <b>(FFN Interpretation Manual (5)(k)(i-iii))</b>	Yes	No*	N/A
Explain	While transporting children in care the provider must ensure that each child is wearing appropriate safety restraints, s/he must never leave children in the car unattended, and must not be intoxicated or impaired <b>(FFN Interpretation Manual (5)(l)(i-iii))</b>	Yes	No*	N/A
<b>CHILD CARE HEALTH</b>				
Observe	The environment is clean and sanitary for children. There is a flushing toilet and working hand washing sink. Children in care are not subject to physical, emotional or sexual abuse (and show no signs of this). Provider must report suspected abuse, neglect or exploitation of child to Child Protective Services. <b>(FFN Interpretation Manual (6)(a-e))</b>	Yes	No*	N/A
Explain	The provider understands they cannot discipline: a) by using punishment that produces pain or discomfort such as hitting, spanking, shaking, biting, or pinching; b) by binding, tying, or other forms of restraint; c) by shouting or any other emotional abuse; d) by forcing or withholding food, rest, toileting; e) by confining them to a closet, locked room or other enclosures of any kind <b>(FFN Interpretation Manual (6)(e)(i-vi))</b>	Yes	No*	N/A
<b>PARENTS</b>				
Explain	Provider ensures that parents have access to areas of the home used for care and are aware and have approved that the children may be taken off of the premises – go to park or to run errands. Parental permission is needed to allow children to go to a neighbor's house, ride bikes on street etc. <b>(FFN Interpretation Manual (7)(a-b))</b>	Yes	No*	N/A
<b>NOTIFICATION AND REPORTABLE CHANGES</b>				
Explain	Provider understands: a) that in the case of a life threatening incident or injury that may pose a threat of the loss of vision, hearing, or a limb, emergency personnel must be contacted immediately, even before contacting the parent. b) When giving medication, any adverse reaction or any error in the administration of the medication must be reported to the parent immediately upon recognition of the error or reaction. <b>(FFN Interpretation Manual (8)(a-e))</b>	Yes	No*	N/A
Explain	Within 24 hours of its occurrence the provider has notified her food sponsor: a) of any fatality, hospitalization, emergency medical response, or injury requiring immediate attention from a health care provider, b) when a member living in the home was convicted of a felony or misdemeanor, c) (within 10 days) if any of the following changed: name, telephone number or daycare schedule <b>(FFN Interpretation Manual (8)(a-e))</b>	Yes	No*	N/A
<b>EMERGENCY PREPAREDNESS</b>				
Observe	The provider has a current certification in First Aid and has an infant and child CPR certificate with hands-on-testing. <b>(FFN Interpretation Manual (9)(a-c))</b>	Yes	No*	N/A
Observe	The provider has, and understands, an emergency and disaster plan that includes procedures for a) Fire in the home, b) Earthquake, c) evacuation and re-location. All plans must include notifying the parent. <b>(FFN Interpretation Manual (9)(a-c))</b>	Yes	No*	N/A
<b>DOCUMENTATION</b>				
Observe	Parent attestation statement of current immunization records for children in care <b>(FFN Interpretation Manual (10))</b>	Yes	No*	N/A

- Announced  
 Unannounced

## Relative/Alternate Care Health and Safety Home Inspection

To be used for either announced or unannounced inspections. One must be completed annually at least 90 days prior to renewal.

Provider ID	Provider name:	Phone No:		
Complete only if inspection is conducted independent of a home review:				
Address where care is done:		___ Provider's Home	___ Child(ren)'s Home	
Monitor Name:		Date:	Start Time:	End Time:
Type of care: ___ Relative Care ___ Alternate Care				
Times care is provided (if different than FDCH application):				
Indicate which rooms in the house children have access to:				
<b>EVALUATION</b>				
<b>*Any question answered no requires a plan to correct listed on the summary sheet</b>				
<b>NUMBER OF CHILDREN IN CARE</b>				
Observe	<p><b>Relative Care:</b> The maximum capacity is 8 children in care*. No more than 2 can be younger than 2 years old. OR with 6 or fewer children in care there can be no more than 3 children under the age of 2. All children must be related to the provider and own children under 4 count towards capacity. (*If ALL outside children are siblings to each other then there is no limit to the number of children in care)</p> <p><b>Alternate Care:</b> The maximum capacity is 4 children with no more than 2 children under the age of 2. The children do not need to be related.</p> <p>Is provider within capacity? <b>(FFN Interpretation Manual (3)(a)(i-ii))</b></p>	Yes	No*	N/A
<b>SUPERVISION</b>				
<b>Note: The provider must be awake, physically present and directly supervising children in care at all times</b>				
Observe	The provider must be present and properly supervising children when they are indoors and/or outdoors. Provider must be able to hear school age children. <b>(FFN Interpretation Manual (4)(a))</b>	Yes	No*	N/A
Observe	<b>Provider must supervise sleeping infants</b> - Infants sleep in a location where they are within sight and hearing, or the provider does an in-person observation once every 15 minutes, or the provider uses a monitoring device that detects and sounds an alarm if the infant stops breathing. <b>(FFN Interpretation Manual (4)(b)(i-ii))</b>	Yes	No*	N/A
Observe	The provider supervises children (be close enough to see the bottom of the pool)) when there is water in a wading pool and/or a swimming pool that has not been emptied. <b>(FFN Interpretation Manual (4)(c-d))</b>	Yes	No*	N/A
Observe	The provider is next to the trampoline supervising the children if and when any child is on it. <b>(FFN Interpretation Manual (4)(e))</b>	Yes	No*	N/A
<b>CHILD SAFETY AND INJURY PREVENTION</b>				
Observe	The home, outdoor areas, toys and equipment are maintained in a safe manner to prevent injury. <b>(FFN Interpretation Manual (5)(b))</b>	Yes	No*	N/A
Observe	There is a working phone, fire extinguisher and smoke detector. (A smoke detector must be on each floor of the home). <b>(FFN Interpretation Manual (5)(c-e))</b>	Yes	No	N/A
Observe	There are firearms on the premises. They are <b>not</b> loaded and are secured in a cabinet, safe or area that is locked with a key or combination lock. <b>(FFN Interpretation Manual (5)(f))</b>	Yes	No*	N/A
Observe	Infants sleep in equipment designed for sleep such as a crib, bassinet, porta crib or playpen. Infants are not placed on their stomach for sleeping. <b>(FFN Interpretation Manual (5)(g)(i-ii))</b>	Yes	No*	N/A

Observe	Children <b>do not</b> have access to the following: a) Toxic / Cleaning chemicals b) Prescription medications, c) over-the counter vitamins or herbal supplements; d) empty refrigerators or freezers; e) exposed live electrical wires; f) open containers of alcohol; g) any illegal substances; h) space heaters, fireplaces, wood burning stove (when in use) or any open flames; i) Poisonous plants. <b>(FFN Interpretation Manual (5)(h)(i-ix)) Refer to poisonous plants &amp; toxic substances reference sheet</b>	Yes	No*	N/A
Observe	Provider understands that animals the children have access to must not have a history of dangerous, attacking or aggressive behavior <b>(FFN Interpretation Manual (5)(i))</b>	Yes	No*	N/A
Observe	When outdoor areas are being used by children these items must be inaccessible to the children in care: a) Unanchored swing and large metal slides; b) Raised decks or balconies and open stair wells 5 feet or higher without protective barriers with gaps greater than 5" by 5"; c) Motor vehicles on blocks; d) Rebar or metal rods less than 36 inches long sticking up from the ground or out of walls. Stationary play equipment cannot be over hard surfaces such as cement or asphalt; Equipment must be used in a safe manner to prevent injury <b>(FFN Interpretation Manual (5)(j)(i-iii))</b>	Yes	No*	N/A
Observe	The provider ensures that children do not have access to hot tubs, or other water hazards like ponds and streams with more than 2 inches of water. Children are protected from unintended access to the above. <b>(FFN Interpretation Manual (5)(k)(i-iii))</b>	Yes	No*	N/A
Explain	While transporting children in care the provider must ensure that each child is wearing appropriate safety restraints, she must never leave children in the car unattended, and must not be intoxicated or impaired <b>(FFN Interpretation Manual (5)(l)(i-iii))</b>	Yes	No*	N/A
<b>CHILD CARE HEALTH</b>				
Observe	The environment is a clean and sanitary for children. There is a flushing toilet and working hand washing sink. Children in care are not subject to physical, emotional or sexual abuse (and show no signs of this). Provider must report suspected abuse, neglect or exploitation of child to Child Protective Services. <b>(FFN Interpretation Manual (6)(a-e))</b>	Yes	No*	N/A
Explain	The provider understands they cannot discipline: a) by using punishment that produces pain or discomfort such as hitting, spanking, shaking, biting, or pinching; b) by binding, tying, or other forms of restraint; c) by shouting or any other emotional abuse; d) by forcing or withholding food, rest, toileting; e) by confining them to a closet, locked room or other enclosures of any kind <b>(FFN Interpretation Manual (6)(e)(i-vi))</b>	Yes	No*	N/A
<b>PARENTS</b>				
Explain	Provider ensures that parents have access to AREAS of the home used for care and are aware and have approved that the children may be taken off of the premises (i.e., go to park or to run errands). Parental permission is needed to allow children to go to a neighbor's house, ride bikes on street, etc. <b>(FFN Interpretation Manual (7)(a-b))</b>	Yes	No*	N/A
<b>NOTIFICATION AND REPORTABLE CHANGES</b>				
Explain	Provider understands: a) that in the case of a life threatening incident or injury that may pose a threat of the loss of vision, hearing, or a limb, emergency personnel must be contacted immediately, even before contacting the parent. b) When giving medication, any adverse reaction or any error in the administration of the medication must be reported to the parent immediately upon recognition of the error or reaction. <b>(FFN Interpretation Manual (8)(a-e))</b>	Yes	No*	N/A

**RELATIVE CARE PROVIDER COMPLIANCE CERTIFICATION FORM**  
**SPONSOR IDENTIFICATION**

**COMPLETE ALL INFORMATION**

Provider Name: \_\_\_\_\_

Provider Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Street

City

State

Zip

Address where child care is provided: \_\_\_\_\_

Street

City

State Zip

A relative care provider is someone who meets the definition of relationship, i.e. sibling or step-sibling 18 or over providing care for sibling(s) 12 or under from a separate household, aunt, uncle, grandparent, step-aunt, step-uncle, step-grandparent, great aunt, great uncle, or great grandparent.

List the name(s) of the child(ren) in your care, including your own, and the relationship to the child(ren). For example, niece, nephew, grandchild, sibling, etc. Circle yes or no to tell us if you live with the child(ren).

		Live with Provider	
Child name:	Relationship:	Yes	No
Child name: _____	Relationship: _____	Yes	No
Child name: _____	Relationship: _____	Yes	No
Child name: _____	Relationship: _____	Yes	No
Child name: _____	Relationship: _____	Yes	No
Child name: _____	Relationship: _____	Yes	No
Child name: _____	Relationship: _____	Yes	No
Child name: _____	Relationship: _____	Yes	No
Child name: _____	Relationship: _____	Yes	No
Child name: _____	Relationship: _____	Yes	No
Child name: _____	Relationship: _____	Yes	No
Child name: _____	Relationship: _____	Yes	No
Child name: _____	Relationship: _____	Yes	No
Child name: _____	Relationship: _____	Yes	No
Child name: _____	Relationship: _____	Yes	No

\_\_\_\_\_ I am related to the children I care for as defined above. I care for \_\_\_\_\_ child(ren).

**BACKGROUND CHECK**

- All applicable household members have received a background check based on the rules set by Child Care Licensing.
- In my absence, (unless it is an emergency) the substitute or volunteer left in charge is at least 18 years of age and has a current background check.
- If I, or any of the residents of my household are arrested, charged, or convicted of a crime, I will inform my Sponsor within 48 hours of knowing about it.

List all names and date of birth of residents of the home

Name	Date of birth

I attest that the above list containing the names and birthdates of all residents of the home is true and correct.

**HEALTH AND SAFETY CERTIFICATION**

- I am at least 18 years of age, and physically and mentally capable of providing care to children.
- My home is equipped with hot and cold running water, toilet facilities and is clean and safe.
- Outdoor areas are free from hazardous items which could cause injury to a child or adult.
- There are working smoke detectors and fire extinguishers on all floors where care is provided.
- I will maintain a telephone in operating condition and have a list of emergency numbers available, including poison control.

6. I will maintain phone numbers and contact information for parents of children in care.
7. Food will be provided to children as required by the USDA Child and Adult Care Program (CACFP) regulations.
8. Food supplies will be maintained to prevent spoilage or contamination.
9. A statement from a medical authority will be obtained and kept on hand for any child who requires a diet modified from CACFP requirements.
10. Child(ren) in care will be immunized as required by the Utah Immunization Act.
11. Good hand washing practices will be maintained to discourage infection and contamination.

*By signing I CERTIFY that I agree to follow all the above information and attest it is true and correct. I understand that this information is being given in connection with the receipt of federal funds; that information may be verified; and that deliberate misrepresentation will subject me to prosecution under applicable state and federal criminal status (CFDA 10:558), including placement on the National Disqualified List which will bar me from participating with the federal food program for seven year (CACFP226.16 (I)).*

Provider signature:

Date:

This Institution is an equal opportunity provider.

# ALTERNATE CARE COMPLIANCE CERTIFICATION FORM

## SPONSOR IDENTIFICATION

### COMPLETE ALL INFORMATION

Provider Name: _____	Phone #: _____
Provider Address: _____	
Address where care is provided: _____	

### GENERAL STANDARDS

1. I am at least 18 years of age, and physically and mentally capable of providing care to children.
2. I am not eligible to be licensed by Utah Child Care Licensing.
3. Any agreements between the parent and I will be in writing (examples include permission to give medicine, transportation, injury reporting, parent contact if the child becomes ill, releasing the child to someone other than the parent(s)/guardian, etc.).
4. Child(ren) will be immunized as required by the Utah Immunization Act.

### SUITABILITY/SAFETY OF FACILITY STANDARDS

1. My home is clean and safe and equipped with hot and cold running water and toilet facilities.
2. All hazardous material such as medications, cleaning supplies, flammable material, matches, aerosol sprays, fire arms, plastic bags and any other potential hazards are inaccessible to children and kept away from food.
3. I will maintain a telephone in my home which is in operating condition. I will have an emergency phone list which includes poison control, fire, police, etc., and which also includes my phone number and address.
4. I have a current approved local health/sanitation inspection that is kept on site.
5. I have a current approved local fire/building safety inspection that is kept on site.
6. I conduct fire drills during day care hours.
7. I have a current American Heart Association, or equivalent first aid and CPR certification.
8. I have a basic first aid kit in my home which includes such items as band aids, antiseptic or topical antibiotic cream/ointment, tweezers, gauze, tape scissors, etc.
9. Good hand washing practices will be maintained to discourage infection and contamination.
10. I will take all reasonable measures to protect the safety of each child in my care and report any suspected incidence of neglect or abuse to proper authorities.

### MEAL SERVICE STANDARDS

1. I will offer a meal/snack at least once every three hours to children in care.
2. I have a current approved food handler's permit.

### BACKGROUND CHECK

1. All applicable household members have received a background check based on the rules set by Child Care Licensing.
2. In my absence, (unless it is an emergency) the substitute or volunteer left in charge is at least 18 years of age and has a current background screening check.
3. If I, or any of the residents of my household are arrested, charged, or convicted of a crime, I will inform my Sponsor within 48 hours of knowing about it.

List all names and date of birth of the residents of the home	
Name	Date of birth

I attest that the above list containing the names and birthdates of all residents of the home is true and correct.

*By signing I CERTIFY that I agree to follow By signing I CERTIFY that I agree to follow all the above information and attest it is true and correct. I understand that this information is being given in connection with the receipt of federal funds; that information may be verified; and that deliberate misrepresentation will subject me to prosecution under applicable state and federal criminal status (CFDA 10:558), including placement on the National Disqualified List which will bar me from participating with the federal food program for seven year (CACFP226.16 (I)).*

Provider signature:

Date:

This institution is an equal opportunity provider.

Link to USBE CNP's FDCH page: <https://schools.utah.gov/cnp/fdch>