



Minimum Requirements

STATEWIDE CHILDREN'S CENTERS PROGRAM

New York State Office of Court Administration • Division of Court Operations
Office of Alternative Dispute Resolution & Court Improvement Programs



The Children's Centers must provide quality drop-in childcare for children who must be in court in connection with matters involving them or their caregivers and provide families with information, referrals and connections to health, education, child care and other community-based services. The Centers must be in separate, safe and enclosed environments in the court or courts to be served. All Children's Centers must comply with the minimum facility, program and staffing requirements set forth below. However, the program may be provided through a variety of different program models depending upon the needs of the locality, the size of the Center and the number of children to be served.

The minimum program requirements which all programs must meet are as follows:

A. Facility and Equipment

- 1) A minimum of 35 square feet of open activity space (**after** subtracting for furniture) per child shall be provided in the Children's Center. The **minimum** amount of **open** square feet for a new Children's Center will be 245 square feet, which can accommodate a maximum of 7 seven children. Larger spaces may accommodate more children. Areas used for administrative and ancillary purposes, such as staff offices, storage spaces, bathrooms and hallways, entryways and kitchen areas must **not** be used in calculating the 35 square foot per child requirement.
- 2) Unified Court System Statewide Children's Centers Program (hereafter referred to as SCCP) staff or their designees will work with the provider to determine the maximum capacity of the Center after it has been furnished.
- 3) Whenever changes, additions, or expansion are proposed which will affect, or reasonably may be expected to affect, those portions of the building designated for the Children's Center or their egress in case of an emergency, the provider must notify the SCCP Office and ensure that said office be part of all discussions and plans. The provider must receive written approval from the SCCP prior to initiations such changes, additions, or expansion may take place.
- 4) Provider shall ensure that the Children's Center is maintained in good repair and kept clean.

- 5) The Children's Center should be neatly arranged and well organized. Storage for toys, books and materials must be provided and must allow for appropriate access by children.
- 6) Provider shall ensure that the Children's Center, its toys, furnishings and equipment are safe, clean and age-appropriate for children.
- 7) Center staff must have a closet or area for their coats and personal items that maybe locked. All closet door latches must be constructed to enable children to open the door from the inside.
- 8) Toxic paints or finishes must not be used on room surfaces, furniture or any other equipment, materials, toys or furnishings with may be used by children or are within their reach.
- 9) Peeling or damaged paint or plaster and frayed carpeting must be repaired promptly.
- 10) Space occupied by children shall be a temperature of at least 68 degrees Fahrenheit, but not over 75 degrees, and must be well-lighted and well-ventilated.
- 11) Windows in Children's Centers on floors above the first floor should be protected by barriers or locking devices to prevent children from falling out of the windows.
- 12) Adequate and safe water supply and sewage facilities must be provided. Hot and cold running water must be available and accessible at all times.
- 13) Toilet facilities for children must be provided in the Children's Center whenever practicable or must otherwise be close by, and quickly and safely accessible. Bathroom door locks must be designed to permit opening of the locked door from the outside in an emergency. The opening device must be readily accessible to the caregivers.
- 14) Changing tables must be separate from eating and play areas and should be installed in the Children's Center whenever practicable or must otherwise be accessible in a nearby bathroom.
- 15) Centers will provide mats or cots for older children who would like to nap, or are feeling ill. Mats or cots must have washable surfaces and linens.
- 16) Cribs and playpens must: not block egress; be in a safe area; have washable surfaces and bedding materials.
- 17) Storage for children's personal belongings must be provided and there must be enough space between individual storage areas so that items do not touch.
- 18) An area of the Children's Center shall be designated, when necessary, for infants and toddlers so that they may be separated from older children for safe floor play.

- 19) New and renovated Children's Centers must have a kitchen area that includes adequate cabinets for the Center size, standard size sink, hot and cold running water, refrigerator and adequate counter space.
- 20) Renovated or new spaces must have an entry door with a vision panel, doorbell, and intercom/camera where necessary.
- 21) New or renovated spaces must have two means of egress.
- 22) Floors in new or renovated spaces must have both smooth surface flooring and carpeted areas or rugs.
- 23) Children's toilet facilities in new or renovated spaces must have a wall-mounted, pull-down changing table. Paper towel holders, soap dispensers and toilet paper holders all must be mounted at a height suitable for children's access.
- 24) All Centers will have a panic button or similar device that is tied in to the courthouse security. The working condition of the panic button or similar device must be periodically checked

B. Emergency Evacuation and Fire Protection

- 1) Provider shall take suitable precautions to eliminate conditions that create fire and safety hazards and must also provide at least one smoke detector and one fire extinguisher.
- 2) Provider, with assistance from the court, shall develop a full, written, step-by-step Emergency Evacuation Plan for use in the Children's Center. The written plan and map must be approved by the SCCP. Primary emphasis must be placed on the immediate evacuation of children. The emergency evacuation plan will include a primary and secondary exit route as well as an approved, indoor alternate meeting location for the Children's Center in case of inclement weather. The plan must also provide adequate escort assistance from others in order to safely evacuate the maximum capacity of children. The route & map must be posted conspicuously in the Children's Center.
- 3) There must be emergency evacuation drills four times a year held in conjunction with the courthouse. Records will be kept of the drills.
- 4) Center staff must be able to hear the fire alarm from within the Center at all times. Fire alarms and extinguishers must be maintained and checked as required by state fire regulations.
- 5) The Children's Center must have and maintain an emergency backpack which includes at least the following: fully stocked First-Aid kit (see C. *Safety* No. 3); battery powered flashlight or lantern; large plastic garbage bag(s), emergency heat blanket, sugar

packets. These items should be stored in a backpack with ease of access in emergency evacuations. The emergency backpack should also contain several bottles of water, several diapers and diapering supplies.

- 6) All staff and volunteers must know the location of the lanterns/flashlights and emergency backpack.
- 7) Provider shall develop a written guide that informs caregivers what to do in case of an emergency evacuation of the courthouse. This information must be verbally explained to the caregiver at intake as well as be printed and provided in writing to all caregivers.

C. Safety

- 1) A desk, telephone and list of emergency phone numbers shall be provided for staff.
- 2) Provider will furnish emergency phone numbers for its agency representatives to Center staff so that they may be reached when the Children's Center is open, but other agency programs are closed.
- 3) The Center will be equipped with a first aid kit that is accessible for emergency treatment. The first aid kit is stocked to treat a broad range of injuries and situations and will be restocked as necessary. The first aid kit and any other first aid supplies are kept in a clean, portable backpack not accessible to children.
- 4) An operable flashlight or battery powered lantern must be kept in each child care room. Equipment must be maintained with fresh batteries in the event of a power failure.
- 5) Protective caps, covers or permanently installed obstructive devices must be used on all electrical outlets. All outlets and sharp corners must be protected.
- 6) All matches, lighters, medicines, cleaning materials and any other toxic or poisonous materials must be stored in their original containers. They must be stored in a place that is inaccessible to children. All medicines, cleaning agents and any other toxic or poisonous material must not be stored above food, beverages, or eating utensils.
- 7) Plants that are hazardous to children may not be used in the Center.
- 8) Any pet or animal kept in a Children's Center must be in good health, show no evidence of carrying disease, and pose no threat to children.
- 9) The following items must be used and stored in such a manner that they are not accessible to children: handbags, backpacks or briefcases belonging to adults; plastic bags; and toys and objects small enough for children to swallow.

- 10) All closet door latches must be constructed to enable children to open the door from inside the closet. Every bathroom door lock must be designed to permit opening of the locked door from the outside in an emergency. The opening device must be readily available to Center staff.
- 11) Children using high chairs must be buckled in.
- 12) The Children's Center door will remain locked at all times while children are in the Center.
- 13) Provider shall operate with regard to the established maximum capacity for the Children's Center as defined under Facility Requirements. Capacity may be temporarily reduced by Center staff only in order to preserve the safety of the children enrolled.
- 14) Only one caregiver and the person they are designating as an alternate to pick-up the child(ren) may be allowed in the Center during intake and sign out procedures.
- 15) No visitors are allowed in the Center. No one may visit or question a child except the person that signed them in.
- 16) No interviews or questioning of children may take place within the Children's Center.
- 17) Provider shall obtain from caregivers upon their entering the Children's Center a written, signed intake statement on a form provided by SCCP.
- 18) A child may not be taken out of the Center for any reason, or length of time, unless the caregiver or other previously designated person signs the child out. Therefore attorneys, court appointed child advocates, Department of Social Service employees, or any others may not take a child out of the Center without the caregiver's (or other previously designated person's) signature.
- 19) Provider and staff shall ensure that a child is released to the proper caregiver who must be the person who brought the child to the Children's Center unless the caregiver designates another person in writing or there is a written and signed court order directing otherwise. If a child must be released to an emergency contact that was designated in writing by the caregiver upon intake, that named person must show photo ID when picking up the child.
- 20) Provider shall establish written security procedures with the court to ensure that the Center is immediately notified when there is a court-ordered change in custody, remand or removal. These procedures will outline how the Center staff will be contacted, which part representing the court will make the notification, and who will become responsible for signing the children in and out. A child shall only be released from a Children's Center to the custodian named in a written court order /short order or statement that has been signed by the judge and presented to the Children's Center staff for their records.

- 21) If a removal, remand, or change of custody has been ordered, the only parties that will be allowed into the Center are: whomever has been appointed as having custody/guardianship of the child; or the designated person/agency to whom the child(ren) will be released to; the child's attorney; and any accompanying court officers. In a remand that results in the caregiver being unable to sign the child out, the other previously designated person will be first contacted. If that is unsuccessful, the emergency contact will be contacted, and if that fails, CPS will be contacted to pick up the child.
- 22) Any communications or goodbyes between the children and the caregiver that signed them in must take place somewhere other than the Children's Center.
- 23) The Children's Center Staff/volunteers shall complete an **Incident/Accident Report** (see C. *Safety* Subsections 23a. & b. for definitions) on a format provided by SCCP for any injury or illness that occurs in the Children's Center which requires first aid or medical attention, or for an incident that requires the involvement or notification of court officers, security personnel, provider agency, court staff or Child Protective Services. The Incident/Accident Report shall be sent by fax and by mail **within 24 hours** to SCCP. Any serious injury or illness, or the death of a child, must be reported **immediately**, by phone, to the Children's Center office, **and** followed up with the written report. If such an instance occurs, media representatives may not interview Children's Center Staff and/or volunteers until the UCS and Provider Agency grant approval. A serious injury is one in which professional medical attention is necessary or recommended.
- a) An "Incident" includes any unusual situation or serious conflict or threat in which your court officers are called to respond/assist in person or on the telephone. "Incident" includes any CPS reports. An "Incident also includes any instance in which it is discovered that a child who attended a center had a contagious illness. Complaints made against the Children's Center by caregivers; court personnel; and/or other stakeholder should be considered an "incident."
- b) An "Accident" includes any injury or illness which occurs in the Children's Center and that requires First Aid and/or medical attention.
- 24) Caregivers may receive a copy of their intake sheet if they make a verbal request by the end of the day in question. Requests by caregivers at any time thereafter must be made in writing and signed by the caregiver.
- 25) Staff must have the ability to directly contact the SCCP by phone from the Children's Center.

D. Operations

- 1) The program shall provide, at a minimum, a separate, safe, supervised and enclosed environment for children who must be in court in connection with matters involving them or their caregivers.
- 2) The Children's Center shall serve children from six weeks thru twelve years of age.
- 3) The Center shall be open when the court is open for general daytime court hours.
- 4) The Children's Center shall be open and staffed by paid employees and volunteers, as needed, according to the UCS court calendar. There must be a minimum of two staff persons present and able to accommodate children, for the Center to operate.
- 5) If the Children's Center must be closed when Court is open, the provider shall immediately notify the Chief Clerk of their court(s) and SCCP.
- 6) Children's Centers may close for one hour for lunch, but remain open through lunch if a caregiver's case is still before a judge.
- 7) Provider shall establish a procedure with the court so that Center staff may determine if a caregiver is currently before a judge at the lunch hour.
- 8) Children's Center hours, maximum capacity and Center Rules/Caregiver Responsibilities must be conspicuously posted.
- 9) Children's Center staff shall complete the SCCP intake for each visit a caregiver makes to the Center according to SCCP office instructions.
- 10) Any and all information relating to an individual child or caregiver is confidential and cannot be disclosed without the caregiver's written permission to anyone other than:
 - a) UCS Statewide Children's Center Program staff and it's designees
 - b) co-workers and Center supervisors who are employed in the Children's Center
 - c) to find the caregiver in an emergency
 - d) to reach an "other designated person" or emergency contact
 - e) to verify if a caregiver is in front of a judge
- 11) Information relating to an individual child may be disclosed to a Child Protective Service staff person where the child has been named in a report of alleged child abuse or maltreatment.
- 12) All Children's Center records must be kept confidential and in a secure cabinet.
- 13) Children's Center intake forms may not leave the Center except to be mailed to the SCCP.

- 14) Non-original copies of Children's Centers records kept for operational purposes in the Center should be retained and destroyed according to the provider's confidential records management procedures.
- 15) Provider shall establish written confidentiality procedures meeting, at minimum the requirements outlined above. Confidentiality procedures must be submitted for approval to the SCCP.
- 16) All caregivers must be notified verbally and in writing of Center Rules/Caregiver Responsibilities, and Center Emergency Evacuation Procedures. The rules, written at least in English and Spanish (and other languages as appropriate), must be explained verbally to caregivers when they register their children, and a written copy must be provided to caregivers.
- 17) Caregivers will be offered the opportunity to give written feeding instructions for their infant.
- 18) Provider must develop a procedure for notification of caregivers who have been turned away from the Center due to capacity when space becomes available. This policy should be in writing and must have approval from the court and the SCCP.

E. Program

- 1) Provider shall implement a program that follows current National Association for the Education of Young Children (NAEYC) standards for developmentally appropriate practice.
- 2) Staff and volunteers shall treat all children and caregivers with respect.
- 3) The Children's Center's appearance/decorations should appeal to a broad age group.
- 4) There will be an area that is designed to be welcoming to older children thru the use of decorating, furniture and the activities offered.
- 5) The Children's Center must have a sufficient quantity and variety of furniture, toys, books and materials appropriate to the age and developmental level of the children served. Toys, books and materials must be selected to promote positive images of different ethnic, racial, cultural, gender, ability groups and families.
- 6) Children's Center staff must prepare developmentally appropriate activities including choices from the following: art expression; movement; language (stories, songs, rhymes, poetry and verbal story-telling); small motor development; and snack times. These plans should be prepared and changed at least on a monthly basis.

- 7) Children's Centers must provide a sufficient quantity and variety of materials and play equipment appropriate to the ages of the children and their developmental levels and interests that promote the children's cognitive, educational, social, cultural, physical, emotional, language and recreational development.
- 8) As age and development permit, children must be allowed freedom of movement and must be provided with an environment designed to develop such skill as crawling, standing and walking.
- 9) Children must always have a choice of open-ended art activities when closed-end activities are offered.
- 10) Children must always be provided an opportunity to choose between quiet activities and active play.
- 11) Television, video viewing, or video gaming is not recommended. In those instances when all other resources have been exhausted, or if an educational video or game is pertinent to the current theme or lesson plan, it may be utilized for no longer than 20 minutes for young children, and no more than 45 minutes for school age children. At no time will children be required to view the program, play the game, or remain seated. Other choices for children will always be available concurrently. At no time shall adult shows (including news, game shows, talk shows, soap operas, religious shows, etc.), violent or adult games be watched or played in the Center.
- 12) No child shall remain in a high chair over fifteen minutes, unless the child is eating.
- 13) No child may be left in a crib or playpen for more than 30 minutes unless they are sleeping.
- 14) Suitable arrangements shall be made for children to sleep and rest comfortably. Children shall not be allowed to rest or sleep directly on the floor.
- 15) Infants must be placed on their backs for sleep unless a medical condition indicates otherwise.
- 16) Sleeping infants/children will be checked on every fifteen minutes.
- 17) Every effort will be made by staff to appropriately comfort, engage and or distract a child that cries due to transition to the Center. A caregiver will be informed that their child is crying **only** if the child has **repeatedly** vomited or is in real danger of seriously harming themselves or others – or if the caregiver requests to be notified if their child cries for a proscribed amount of time.
- 18) Provider shall establish a community outreach program for the purpose of maximizing center usage. Outreach strategies shall include: ongoing orientation of appropriate court and non-court personnel; regular distribution of approved brochures and fliers that outline the services of the Children's Center; sponsorship of, or participation in, at least

one community event at which the Children's Center is highlighted. Outreach also encompasses informational sessions provided to various outside agencies and groups.

- 19) Provider shall ensure that staff/volunteers perform site-based outreach of waiting rooms and other applicable areas in the courthouse at least twice per day. Site-based outreach includes walking through court hallways and waiting areas to verbally encourage caregivers to utilize the Children's Center, as well as distributing informational pamphlets/brochures about the Center to people in the building.
- 20) Written materials regarding the Children's Center and/or its services must be approved by SCCP before distribution.
- 21) Provider will establish a means of ensuring that all Center staff and volunteers have a clear understanding of all Children's Center policies and procedures.
- 22) Provider is responsible for ensuring that all Children's' Center policy and procedures have been communicated to judges, court personnel and court security in the courthouse(s) that the Children's Center serves.
- 23) All Children's Center written policies, procedures, guidelines, including the Minimum Requirements and all appendices, must be kept together in a binder in a readily accessible location within the Center. All staff and volunteers must be aware of the location of the binder.
- 24) Children's Centers must admit inspectors, staff (and their designees) of the SCCP at any time and they must be given full access to the premise and any records of the Center or relating to the Center.

F. Service Connections

- 1) Providers shall ensure that Centers provide an environment that is information-rich with a ready supply of visible posters, brochures and other information on federal, state and local services and entitlement programs for children and families.
- 2) Providers shall identify and make available for referral, entitlement and service programs reflective of the specific needs of the children and families in their locality.
- 3) Staff must be able to provide caregivers with referral information that is current and directly relates to specific needs of children.
- 4) Children's Center staff shall identify needs of specific children by reviewing intake information while the caregiver is in court and through the observation of children in the Center.

- 5) Children's Center staff shall connect children and families to services or programs to needs identified at intake.
- 6) Children's Center staff may contact caregivers to provide further assistance with services or enrollments if the caregiver has given written permission on a form designed by the provider agency and approved by the SCCP that includes the method, address and/or phone number that shall be used for additional contact. Follow-up should take place within 7-14 days.

G. Advisory Committee

- 1) Provider shall establish an Advisory Committee for the Children's Center that will be appointed every two years to provide recommendations on programmatic and fiscal operations and to maximize linkages with available community services and entitlement programs.
- 2) The Advisory Committee shall:
 - a) be co-chaired by a representative of the provider agency and an individual elected by the Committee; be comprised of **at least** one parent from the community, a local lawyer or law guardian, and representatives from the county Departments of Social Services, Mental Health, and Health, the court or courts served by the Children's Center, a court officer or rep. from the appropriate security division, the local Head Start Program or local Child Care Resource and Referral Agency. Additional recommended member sources are: local library; area college or university; area hospital; pediatrician; school districts; commercial merchants/bankers;
 - b) meet quarterly and provide the SCCP with a written summary of the meeting within ten (10) business days;
 - c) assist Center staff in determining how best to provide caregivers with information, referrals and connections to needed services; and
 - d) be presented with the provider agency's annual Children's Center Budget proposal before it is approved by the SCCP, so that they may provide recommendations and ideas as to meeting the financial and resource needs of the Center.
 - e) assist Center staff in implementing special UCS initiatives such as literacy initiatives at the Children's Center.
- 3) Provider agency may also seek to establish a separate "Friends of the Children's Center" committee that may function separately as a fund-raising unit in order to benefit the Children's Center.

H. Supervision of Children

- 1) Competent, sufficient and direct supervision of children in the Children's Center must be provided at all times by persons 18 years of age or older.

- 2) Children cannot be left without competent direct supervision at any time unless a child is independently using the toilet.
- 3) Staff shall accompany children to and from toilets located outside the Children's Center. Bathrooms used by children must not be able to be locked from the inside.
- 4) Children's Centers design and furnishings must be arranged to give teachers a clear line of sight. Mirrors should be used to increase the line of sight where the structure interferes with a safe view.
- 5) If children are napping or sleeping in a separate room, the door must be open at all times as well as doors to any other rooms. If an adult is unable to stay in the room where a child is sleeping, the room must have a viewing window and a functioning and easily heard electronic monitor. Sleeping children must be checked every fifteen minutes.

I. Discipline

- 1) Engagement of children and positive discipline (as referenced by OCFS and NAEYC) are the preferred methods of discipline.
- 2) Provider shall prohibit the use of corporal punishment and shall implement personnel policies that prevent the abuse or maltreatment of children.
- 3) Provider must establish written disciplinary guidelines and provide copies of these guidelines to all staff and volunteers. Staff must use acceptable techniques and approaches to help children solve problems.
- 4) Isolating a child in a closet or darkened area is prohibited.
- 5) Methods of discipline, interaction or toilet training which frighten, demean or humiliate a child are prohibited.
- 6) Withholding or using food or rest is prohibited.

J. Child Abuse and Maltreatment

- 1) Any abuse or maltreatment of a child, either as an incident of discipline or otherwise, is prohibited. Provider agencies and Children's Centers must prohibit and may not tolerate, in any manner condone, an act of abuse or maltreatment by an employee, volunteer or any other person under the provider's control. An abused child or maltreated child means a child defined as an abused child or maltreated child pursuant to section 412 of the Social Services Law.

- 2) All Children's Center staff are Mandated Reporters and in accordance with the provisions of sections 413 and 415 of the Social Services Law, child day care center staff must report any suspected incidents of child abuse or maltreatment concerning a child that has been enrolled in the Center to the Statewide Central Register of Child Abuse and maltreatment, when such staff have reasonable cause to suspect that a child coming before them in their capacity as child day care workers is an abused or maltreated child. Reports will be made according to current Social Services Law. A copy of the report, together with a copy of the Intake Form and an Incident Report, will be sent to the SCCP within 48 hours of the occurrence.
- 3) Provider shall ensure that any suspected incidents of child abuse or maltreatment are reported by Center staff to the Statewide Central Register of Child Abuse and Maltreatment.
- 4) Staff must also cooperate with the local Child Protective Services' staff that is conducting an investigation of alleged child abuse or maltreatment. Before entering the Center and before staff speaks with CPS staff, CPS must show proper identification and proof of the investigation.

K. Health

- 1) The Children's Center must be clean and free of odors and vermin.
- 2) Emergency CPR and choking instructions should be placed above or near cribs and in the kitchen area.
- 3) Posters/flyers displaying correct hand-washing technique must be posted at all sink areas.
- 4) Safety precautions relating to blood must be observed by all staff coming into contact with blood, according to OCFS specifications.
- 5) Children's Centers must maintain an adequate supply of gloves at all times, including non-latex gloves.
- 6) Providers shall post and staff shall follow written diapering procedures, including the proper use of plastic gloves. Procedures should be posted clearly in the diaper changing area.
- 7) Soiled diapers must be disposed of in a tightly covered garbage container.
- 8) Infants must be kept clean and comfortable at all times. Diapers must be changed whenever wet or soiled. The diaper changing area must be as close to a sink as possible. It must not be a sink that is used for food preparation.

- 9) All linens, blankets, bedding, and cloth bibs must be cleaned at least weekly and before use by another child. Organic materials are preferred when possible.
- 10) Children's cots and/or cribs must be spaced at least two feet apart when in use.
- 11) Any toy that a child has mouthed or drooled on must be washed and disinfected before use by another child.
- 12) Sufficient and suitable clothing must be available in the Center so that children who dirty or soil their clothing may be changed. All such clothing must be returned to caregivers in a plastic bag.
- 13) Staff will perform a basic health check on any child entering the Center to check for indications of illness, injury, abuse or maltreatment.
- 14) Medications may not be administered to children by Center staff or volunteers. Center staff/volunteers may not administer emergency medication such as epi-pens or inhaler treatments. Caregivers may return to the Center to administer medication. Center staff may, however, apply any over-the-counter diaper cream, etc., that the caregiver has provided.
- 15) A white board, chalk board, or pad will be displayed on the wall in the snack and/or kitchen area to record any the name and age of any child with allergies or medical conditions that may impact the child while in the Center, such as Asthma, seizures, diabetes, etc.
- 16) Children's Centers are not required to accept a child who is ill with a contagious disease. However, a child who is accepted into the Children's Center who has, or develops, symptoms of illness shall be provided with a separate place to rest until the child departs from the Children's Center. If a child becomes ill while in the Center, the caregivers may be notified, but they should not be encouraged or required to pick up their child until their court business is finished. However, if a child becomes seriously ill the caregivers will be notified as soon as possible.
- 17) Provider shall ensure that emergency medical care is obtained and that caregivers are promptly notified of a medical emergency involving their child.
- 18) In an emergency, a child's well-being must take priority. A bleeding child must not be denied care because gloves are not immediately available.

L. Attendance of Children with Certain Disease/Illness/Pests

- 1) Children may attend the Center if they have symptoms of head lice.

- 2) Children may attend the Center if they may appear to be carrying bedbugs or live in a bedbug infested home.
- 3) Children without fever who have mild symptoms associated with the common cold, sore throat, croup, bronchitis, rhinitis (runny nose), or ear infection shall NOT be denied admission to childcare, sent home from child care, or separated from other children in the facility.
- 4) Children who have or develop Fifth disease shall be allowed to attend childcare because they are no longer contagious when signs and symptoms appear.

M. Child Exclusion/Inclusion Criteria

- 1) A child shall be excluded if their illness results in a greater need for care than the childcare staff can provide without compromising the health and safety of the other children as determined by the childcare provider.
- 2) A child shall be excluded if they have diarrhea that is not contained by the child's ability to use the toilet, or if in diapers, if it cannot be contained within the diaper (not the result of a nursed baby):
 - a) Control of Diarrhea: After the ill child leaves, all surfaces and toys that a child came in contact with must be disinfected.
- 3) A child shall be excluded if they have vomited more than twice and have other symptoms of illness, i.e. fever, stomach pain, extreme lethargy: Fever is defined as axillary (armpit) temperatures over 100 degrees.
- 4) A child shall be excluded if they have mouth sores with drooling, unless a health care provider or health department official determines that the child is noninfectious.
- 5) A child shall be excluded if they have purulent conjunctivitis (defined as pink or red conjunctiva with white or yellow eye discharge), until after treatment has been initiated.), often with eye pain or redness of the eyelids or skin surrounding the eye.
- 6) A child shall be excluded if they have Chickenpox until all sores have dried and crusted.
- 7) A child shall be excluded if they have Scabies, until after treatment has been completed.
- 8) A child shall be excluded if they have Tuberculosis, until a health care provider or health official state that the child is on appropriate therapy and may attend child care.

- 9) A child shall be excluded if they have Impetigo, until 24 hours after treatment has been initiated.
- 10) Strep throat or other streptococcal infection, until 24 hours after initial antibiotic treatment and cessation of fever.
- 11) Pertussis, until 5 days of appropriate antibiotic treatment.
- 12) Mumps, until 9 days after onset of parotid gland swelling.
- 13) Measles, until 4 days after onset of rash.
- 14) Rubella, until 6 days after onset of rash.
- 15) Hepatitis A, until 1 week after onset of illness, jaundice or as directed by the department of health.

N. Staff Exclusion for Illness:

- 1) Staff exclusions are the same as for children, but child care providers who have herpes cold sores shall: not touch their lesions; carefully observe hand washing policies; refrain from kissing or nuzzling infants or children, especially children with dermatitis.

O. Cleanliness/Infection Control

- 1) Provider shall provide Children's Center staff and volunteers with written procedures explaining how, what, and when to clean/sanitize/disinfect to ensure that all rooms, equipment, supplies, toys and furnishings, including cribs and sleeping mats, are kept clean at all times. The provider shall keep the premises free from dampness, odors, vermin and the accumulation of trash.
- 2) All trash must be disposed of in covered containers that are inaccessible to children.
- 3) Staff must thoroughly cleanse their hands at the beginning of each day, when they are dirty, after toileting, before and after food handling, after contact with any bodily secretion or fluid and following the changing of any child's diaper.
- 4) Children's Center staff shall be responsible for children's hygiene and toileting needs and shall ensure that children wash their hands when they are dirty, after toileting, before and after food handling, after contact with any bodily secretion or fluid and, for diapered children, after change of diaper.

- 5) Children's Center Staff and volunteers must be free from odor and wear clothing that projects a professional manner and the decorum of the courthouse environment.
- 6) All staff and volunteers that interact with children will maintain clean and reasonable, professional length fingernails to protect children's health and safety.
- 7) Children's Center staff shall keep infants clean and comfortable at all times. Diapers shall be disposed of in a clean manner promptly into a tightly lidded garbage container.
- 8) Provider shall ensure that universal blood precautions will be observed in the Children's Center.

P. Nutrition and Snacks

- 1) Provider will ensure that all snacks are prepared and stored in a safe and clean manner and that all eating plates, cups and utensils are disposable and safe for children.
- 2) No Styrofoam cups, bowls or plates may be used for children.
- 3) Provider will ensure that staff shall ask caregivers with an infant if they would like to leave written feeding instructions.
- 4) Heating formula, breast milk and other food items for infants in a microwave oven is prohibited.
- 5) Infants younger than six months must be held while being bottle-fed. All other infants must be held while being bottle fed until the infant demonstrates the ability to hold the bottle and take enough formula. Propping of bottles is prohibited.
- 6) All bottles/sippy cups and jars of infant foods must be labeled with the child's first and last name on removable masking tape or labels.
- 7) Nutritious snacks shall be provided for children at least at mid-morning and mid-afternoon. All children should be offered healthy snacks and beverages. Fruits and vegetables should be available on a regular basis.
- 8) There must be adequate food and beverage to permit at least two servings if a child wishes.
- 9) Emergency food should be available for children who must be in the Center thru lunch, or who have not had breakfast before arriving in the Center. Emergency formula and infant food must be available for use with caregiver's permission.
- 10) Safe drinking water must be available to children at all times and must be offered at intervals that are responsive to the needs of the individual children.

- 11) Sufficient time, based on age and individual needs, must be allowed for meals and snacks so that children will not be hurried.
- 12) Perishable foods, prepared formula and milk that is provided by caregivers must be refrigerated.
- 13) All opened and/or refrigerated food and beverages must be checked before use for expiration.
- 14) All stored food and beverages must be checked before use for expiration.
- 15) Breastfeeding is welcome in all Children's Centers. Mothers who have not registered a child in the Center may still use the Center to breastfeed their child. Children's Center staff should make breastfeeding mothers as comfortable as possible in the Center.

Q. Staffing

- 1) A minimum of two **staff** (see Q. *Staffing* Subsection 1a. for definitions) persons shall be on-site at the Children's Center at all times when the Children's Center is open.
 - a) Definition of "Staff" as it pertains to operations in a Children's Center: A staff person must be a minimum of 18 years old. A volunteer may be utilized as a "second staff" person only if he/she has been properly trained and knows and will follow our Policies and Procedures which includes the Minimum Requirements as well as all Center Policies and Emergency Procedures. This volunteer must be able to complete both intake and sign out process, change diapers, complete and send Incident/Accident Reports, and answer the door and phone. They must be able to perform the same primary job requirements as a paid assistant teacher; such as cleaning, assisting with general care and activities for children, change diapers, take children to the bathroom and assist regular staff as needed. It is imperative the use of any person to fulfill the "second person" requirement will not negatively impact the number of children that the Center would have been able to accommodate if the regular, paid staff person were present.
- 2) At least one full-time staff person at the Children's Center must have a minimum of two years of training and/or experience in early childhood.
- 3) Provider shall ensure that staff members are adequately trained and supervised.
- 4) Competent, sufficient and direct supervision of children in the Children's Center must be provided at all times by persons 18 years of age or older.
- 5) Volunteers and interns must be appropriately placed; supervised; and used in an effective manner.

- 6) Minimum age for a volunteer is 16.
- 7) All staff, including volunteers, must be courteous and respectful of caregivers and children at all times.
- 8) All staff, including volunteers must use developmentally appropriate language when children are in the Center.
- 9) While working in the Children's Center, neither staff nor volunteers may promote themselves to caregivers for the purpose of soliciting outside work.
- 10) Consumption of, or being under the influence of, alcohol or controlled substances by staff or volunteers during working hours in the Children's Center is prohibited.
- 11) Provider shall establish written policies to ensure that all staff, which shall include both paid employees and volunteers, when hired and during association with the Children's Center, are responsible, in good physical and mental health, of good character and possess suitable personal qualifications for the care of children. Staff must have the energy and emotional stability necessary to fulfill the responsibilities of their job. Staff should be able to communicate clearly both verbally and in writing.
- 12) All staff, substitutes and regular volunteers must submit an "Applicant Medical Statement" from a health care provider prior to beginning employment in a UCS Children's Center, and every three years thereafter. The initial statement must be completed within the 12 months prior to the individual's start date in the Children's Center and updated at least once every five years. Such statement must give satisfactory evidence that the individual is physically fit to provide child day care, has no diagnosed psychiatric or emotional disorder which would preclude the individual from providing child care, and is free from communicable disease that do not pose a risk to the health and safety of the children in care. The medical statement also must include the results of a Mantoux tuberculin test which has been performed within the 12 months preceding the date of the statement.
- 13) All potential and current staff, substitute, and regular volunteer applicants must be cleared through the Statewide Central Register of Child Abuse and Maltreatment in accordance with any applicable provisions of law. Applicants must provide the names, addresses and day-time phone numbers of at least three references, other than relatives, who can attest to the applicant's character, habits and personal qualifications; and the applicant must complete a criminal history review and provide a sworn statement indicating whether he or she has ever been convicted of a misdemeanor or felony in New York State or any other jurisdiction, and complete fingerprint cards as required to comply with the requirements of section 413.4 of this Article. The results of these inquiries must be considered in determining whether to hire an applicant or use an applicant as a volunteer.

- a) If the provider has not received a response from the Statewide Central Register of Child Abuse and Maltreatment to the provider's request for information regarding the applicant, the applicant may be hired or used as a volunteer on an interim basis pending the receipt of a response from the Statewide Central Register. Under no circumstance shall the applicant be left alone with any child or group of children until the response has been received. However, no person may be a staff member or volunteer who has been convicted of a misdemeanor or felony against children.
- 14) Provider shall ensure that no employee, substitute or volunteer that will work in the Center is listed on the New York State Sex Offender Registry maintained by the New York State Division of Criminal Justice Services.

R. Training

- 1) Provider is responsible for ensuring that all Children's Center staff receives NYS Education Department approved training for professionals: Mandated Reporter Training in Child Abuse and Neglect/Maltreatment Identification before beginning work in the Center.
- 2) Provider is responsible for ensuring that all staff, volunteers and interns have received training on the use of developmentally appropriate language with children before actually beginning to work in the Center with children.
- 3) Provider is responsible for ensuring that all Children's Center staff receives CPR and First Aid training within three months of beginning work in the Center, and that thereafter, certifications are kept up to date.
- 4) Provider is responsible for ensuring that all staff and volunteers have received training in Center emergency and security procedures.
- 5) Provider is responsible for ensuring that all paid Children's Center staff receives eight hours of additional child-care training beyond Training items 1-4, on an annual basis. A schedule of both required and supplemental staff trainings for each Children's Center staff person shall be submitted to the SCCP office annually.
- 6) Staff training shall be kept current and up-to-date and must include full attendance at any SCCP sponsored conferences.

S. Management and Administration

- 1) Children's Center staff must be supervised on a regular and ongoing basis by appropriate and qualified management/administration from the provider organization. This shall include at a minimum, monthly half-day on-site visits and weekly telephone contacts. Supervision must ensure that Children's Centers Minimum Requirements and

Regulations are being upheld. The provider organization is responsible for staff observations at least annually.

- 2) Provider shall establish and provide to SCCP for approval a comprehensive staffing plan that shall include provisions regarding paid employees, vacation and sick day coverage, volunteers, substitute care and description of ongoing supervision. Any changes in staff or supervisory positions will be reported to SCCP when they occur.
- 3) Provider shall establish a written policy for substitute care and a chain of agency notifications in the event of staff illness or emergency.
- 4) Provider shall establish a procedure, such as judicial representation on the CC Advisory Committee, or by the use of a mediary designated by the court, thru which judges, court personnel, and the Children's Center parties shall communicate concerns or questions regarding the operations of the Center.
- 5) In accordance with Incident/Accident reporting requirements, the provider must forward to SCCP any complaints received from caregivers who either utilized the Center or sought to utilize the Center as well as any notification of complaints by judges or court personnel or other stakeholders.
- 6) Provider must provide the SCCP with a copy of all forms used by the provider agency and Children's Center regarding any operations and record keeping of the Children's Center.
- 7) Provider must maintain on file in the Children's Center, available for inspection by the SCCP or its designees at any time, copies of the following records in a current and accurate manner:
 - a) a list of substitutes for Center staff;
 - b) documentation of training sessions/hours attended by staff in accordance with UCS Children's Centers Minimum Requirements;
 - c) Applicant Medical Statements for all current Children's Center staff, volunteers and substitutes completed within the previous five years.

T. Waivers

- 1) A written waiver on one or more requirements may be issued by the SCCP to a provider. Providers who have been issued a waiver must operate in full compliance of all other requirements and regulations.
- 2) A request for a waiver must be submitted to the SCCP in writing and must include: the specific requirement for which a waiver is sought; the reason the waiver is necessary; a description of what will be done achieve or maintain the intended purpose of the requirement to protect the health, safety and well-being of children.

- 3) Written approval for a waiver will be granted only upon a determination by the SCCP. Waivers may be time limited, at the discretion of the SCCP.
- 4) Waivers must be kept in the Children's Center Minimum Requirement binder.