TITLE 89: SOCIAL SERVICES
CHAPTER III: DEPARTMENT OF CHILDREN AND FAMILY SERVICES
SUBCHAPTER e: REQUIREMENTS FOR LICENSURE

PART 406
LICENSING STANDARDS FOR DAY CARE HOMES

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AUTHORITY: Implementing and authorized by the Child Care Act of 1969 [225 ILCS 10], the Children's Product Safety Act [430 ILCS 125], Section 3 of the Abused and Neglected Child Reporting Act [325 ILCS 5/3], Sections 1 and 2 of the Facilities Requiring Smoke Detectors Act [425 ILCS 10/1 and 2], and Section 5 of the Missing Children Records Act [325 ILCS 50/5].


Section 406.1 Purpose

The purpose of this Part is to prescribe the standards for licensure as a day care home and to describe how to apply for a license.

Section 406.2 Definitions

"Access to children" means an employee's job duties require that the employee be present in a licensed child care facility during the hours that children are present in the facility. In addition, any person who is permitted to be alone outside the visual or auditory supervision of facility staff with children receiving care in a licensed child care facility is subject to the background check requirements of this Part.

"Adult" means any person who is 18 years of age or older.

"Applicant" means a person living in the residence to be licensed who will be the primary caregiver in the day care home.

"Approved smoke detector" or "detector" means a smoke detector of the ionization or photoelectric type which complies with all the requirements of the rules and regulations of the Illinois State Fire Marshal. (Section 2 of the Facilities Requiring Smoke Detectors Act [425 ILCS 10])
"Assistant" or "child care assistant" means a person (whether a volunteer or an employee) who assists a licensed home caregiver in the operation of the day care home.

"Attendance" means the total number of children under the age of 12 present at any one time.

"Authorized representative of the Department" means the licensing representative or any person acting on behalf of the Director of the Department.

"Background check" means:

- a criminal history check via fingerprints of persons age 18 and over that are submitted to the Illinois State Police and the Federal Bureau of Investigation (FBI) for comparison to their criminal history records, as appropriate; and

- a check of the Statewide Automated Child Welfare Information System (SACWIS) and other state child protection systems, as appropriate, to determine whether an individual is currently alleged or has been indicated as a perpetrator of child abuse or neglect; and

- a check of the Statewide Child Sex Offender Registry.

"Basement" means the story below the street floor where occupants must traverse a full set of stairs, 8 or more risers, to access the street floor.

"Behavior Support Plan" means a written, planned and culturally and linguistically appropriate schedule of action agreed upon by the program staff, parents/guardians, and qualified professional resources assigned:

- to assist a child, a family, caregivers, programs or teachers, and directors on how the program reflects on and modifies the program, classroom, and learning environment practices; and

- to address the identification of serious and repeated patterns of challenging behavior.

The behavior support plan must be fully implemented before initiating the program transition plan.

"CANTS" means the Child Abuse and Neglect Tracking System operated and maintained by the Department. This system is being replaced by the Statewide Automated Child Welfare Information System (SACWIS).

"Caregiver" means the individual directly responsible for child care.
"Challenging behavior" means any serious and repeated pattern of behavior, or perception of behavior, that interferes with a child's ability to engage in developmentally appropriate self-regulation and cognitive and prosocial engagement with peers or adults.

"Children with special needs" means children who exhibit one or more of the following characteristics, confirmed by clinical evaluation:

Visual impairment: the child's visual impairment is such that development to full potential without special services cannot be achieved.

Hearing impairment: the child's residual hearing is not sufficient to enable him or her to understand the spoken word and to develop language, thus causing extreme deprivation in learning and communication, or a hearing loss is exhibited that prevents full awareness of environmental sounds and spoken language, limiting normal language acquisition and learning.

Physical or health impairment: the child exhibits a physical or health impairment that requires adaptation of the physical plant.

Speech and/or language impairment: the child exhibits deviations of speech and/or language processes that are outside the range of acceptable variation within a given environment and prevent full social development.

Learning disability: the child exhibits one or more deficits in the essential processes of perception, conceptualization, language, memory, attention, impulse control or motor function.

Behavioral disability: the child exhibits an effective disability and/or maladaptive behavior that significantly interferes with learning and/or social functioning.

Mental impairment: the child's intellectual development, mental capacity, and/or adaptive behavior are markedly delayed. Such mental impairment may be mild, moderate, severe or profound.

"Consultants" means those individuals providing technical assistance or advice regarding any aspect of the operation of the day care home.

"Conviction" means a judgment of conviction or sentence entered upon a plea of guilty or upon a verdict or finding of guilty of an offense, rendered by a legally constituted jury or by a court of competent jurisdiction authorized to try the case without a jury. (Section 2-5 of the Criminal Code of 1961 [720 ILCS 5])

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"Corporal punishment" means hitting, spanking, swatting, beating, shaking, pinching, excessive exercise, exposure to extreme temperatures, and other measures that produce physical pain.

"Cot" means a comfortable, safe and child-sized alternative bed made of resilient, fire retardant, sanitizable fabric that is on legs or otherwise above the floor and can be stored to allow for air flow.

"Day care homes" means family homes which receive more than 3 up to a maximum of 12 children for less than 24 hours per day. The maximum of 12 children includes the family's natural, foster, or adopted children and all other persons under the age of 12. The term does not include facilities which receive only children from a single household. (Section 2.18 of the Child Care Act of 1969 [225 ILCS 10])

"Department" means the Illinois Department of Children and Family Services. (Section 2.02 of the Child Care Act of 1969)

"Department of Public Health" or "DPH" means the Illinois Department of Public Health.

"Discipline" means the process of helping children to develop inner controls so that they can manage their own behavior in socially acceptable ways.

"Disinfect" means to eliminate virtually all germs from inanimate surfaces through the use of chemicals or physical agents (e.g., heat). In the child care environment, a solution of ¼ cup household liquid chlorine bleach added to one gallon of water (or one tablespoon bleach to one quart water) and prepared fresh daily is an effective disinfectant for environmental surfaces and other objects. A weaker solution of 1 tablespoon bleach to 1 gallon of cool water is effective for use on toys, eating utensils, etc. Commercial products may also be used.

"Family home" or "family residence" means the location or portion of a location where the applicant and his or her family reside, and may include basements and attics. It does not include other structures that are separate from the home but are considered part of the overall premises, such as adjacent apartments, unattached basements in multi-unit buildings, unattached garages, and other unattached buildings.

"Firearm" means any device, by whatever name known, which is designed to expel a projectile or projectiles by the action of an explosion, expansion of gas or escape of gas; excluding, however:

- any pneumatic gun, spring gun, paint ball gun, or BB gun that expels a single globular projectile not exceeding .18 inch in diameter or that has a maximum muzzle velocity of less than 700 feet per second;
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any pneumatic gun, spring gun, paint ball gun, or BB gun that expels breakable paint balls containing washable marking colors;

any device used exclusively for signalling or safety and required or recommended by the United States Coast Guard or the Interstate Commerce Commission;

any device used exclusively for the firing of stud cartridges, explosive rivets or similar industrial ammunition; and

any antique firearm (other than a machine gun) that, although designed as a weapon, the Department of State Police finds by reason of the date of its manufacture, value, design, and other characteristics is primarily a collector's item and is not likely to be used as a weapon. [430 ILCS 65/1.1]

"Gateways to Opportunity Registry" means a program administered by the Department of Human Services to track and maintain education and training credentials of primary caregivers and assistants that allows them to establish a profile in the registry of their educational and training development.

"Ground level" means that a child can step directly from the exit onto the ground, a sidewalk, a patio, or any surface that is not above or below the ground.

"Guardian" means the guardian of the person of a minor. (Section 2.03 of the Child Care Act of 1969)

"Infant" means a child through 12 months of age.

"Initial background check" means fingerprints have been obtained for a criminal history check, and the individual has cleared a check of the Statewide Automated Child Welfare Information System (SACWIS) and the Illinois Sex Offender Registry.

"License" means a document issued by the Department that authorizes child care facilities to operate in accordance with applicable standards and the provisions of the Child Care Act of 1969.

"License applicant", for purposes of background checks, means the operator or persons with direct responsibility for daily operation of the facility to be licensed. (Section 4.4 of the Child Care Act of 1969)

"License study" means the review of an application for license, on-site visits, interviews, and the collection and review of supporting documents to determine compliance with the Child Care Act of 1969 and the standards prescribed by this Part.
"Licensed capacity" means the number of children the Department has determined the day care home can care for at any one time in addition to any children living in the home who are under the age of 12 years. Children age 12 and over on the premises are not considered in determining licensed capacity.

"Licensing representative" means a person authorized by the Department under Section 5 of the Child Care Act of 1969 to examine facilities for licensure.

"Licensing year" often called the anniversary year, means the period of time from the date a day care home license is issued until the same date of the following year.

"Member of the household" means a person who resides in a family home as evidenced by factors including, but not limited to, maintaining clothing and personal effects at the household address, or receiving mail at the household address, or using identification with the household address.

"Minor traffic violation" means a traffic violation under the laws of the State of Illinois or any municipal authority in Illinois or another state or municipal authority that is punishable solely as a petty offense. (See Section 6-601 of the Illinois Driver Licensing Law [625 ILCS 5/Ch. 6].)

"Mitigation" means those activities or processes undertaken to reduce the level of lead in water below 2.01 ppb (parts per billion).

"Mitigation plan" means a written document prepared by a license applicant or licensee that identifies drinking water sources that have tested at or above 2.01 ppb for lead and the strategies and interim measures the applicant/licensee will take to reduce the lead level to below 2.01 ppb.

"Parent" or "Parents", as used in this Part, means those persons assuming legal responsibility for care and protection of the child on a 24-hour basis; includes guardian or legal custodian.

"Permit" means a one-time only document issued by the Department for a 2-month period to allow the individuals to become eligible for a license.

"Person" means any individual, group of persons, agency, association, or organization.

"Persons subject to background checks" means:

the operators of the child care facility;

all current and conditional employees of the child care facility;
any person who is used to replace or supplement staff; and

any person who has access to children, as defined in this Section.

If the child care facility operates in a family home, the license applicants and all members of the household age 13 and over are subject to background checks, as appropriate, even if these members of the household are not usually present in the home during the hours the child care facility is in operation.

"Physician" means a person licensed to practice medicine in the State of Illinois or a contiguous state.

"Premises" means the location of the day care home wherein the family resides and includes the attached yard, garage, basement and any other outbuildings.

"Preschool age" means children under 5 years of age and children 5 years old who do not attend full day kindergarten.

"Program" means all activities provided for the children during their hours of attendance in the day care home.

"Program Transition Plan" means an individualized, written, and culturally and linguistically appropriate plan developed by the departing and receiving early childhood programs, detailing the individual responsibilities required to prepare for and then execute the child's move from the current program to a more appropriate arrangement with as little negative impact and disruption as possible.

"Protected exit from a basement" means an exit that is separated from the remainder of the day care home by barriers (such as walls, floors, or solid doors) providing one-hour fire resistance. The separation must be designed to limit the spread of fire and restrict the movement of smoke.

"Qualified professional" is an individual with a recognized title such as, but not limited to, a child's health provider, early childhood mental health consultant, licensed clinical social worker, speech pathologist, or behavioral therapist. This individual should have expertise in early childhood education practices, children's behaviors, inclusion, applied behavioral analysis, infant/early childhood mental health, or the impact of trauma.

"Related" means any of the following relationships by blood, marriage, civil union, or adoption: parent, grandparent, sibling, great-grandparent, great-uncle, great-aunt, brother, sister, stepparent, stepbrother, stepsister, uncle, aunt, nephew, niece, or first cousin. (Section 2.04 of the Child Care Act of 1969)
"Repeated pattern of challenging behavior" means behaviors that do not respond to repeated developmentally appropriate practice interventions and result in a disrupted learning environment for other children enrolled in the program. These behaviors can include, but are not limited to, extreme tantrums, physical and verbal aggression, property destruction, self-injury, injury to others, or withdrawal.

"SACWIS" means the Statewide Automated Child Welfare Information System operated by the Illinois Department of Children and Family Services that is replacing the Child Abuse and Neglect Tracking System (CANTS).

"School age" means children from 6 to 12 years of age and 5 year olds who are in full-day kindergarten.

"Serious safety threat" is a behavior that jeopardizes the physical safety of the child and/or his/her classmates or staff.

"Special use areas" means areas of the home that may not be included in the measurements of the area used for child care. Special use areas include, but are not limited to, laundry rooms, furnace rooms, bathrooms, hazardous areas, and areas off-limits to children.

"Story" means that level of a building included between the upper surface of a floor and the upper surface of the floor or roof next above.

"Street floor" means a story or floor level accessible from the street or from outside a building at ground level, with the floor level at the main entrance located not more than 4 risers above or below the ground level and arranged and utilized to qualify as the main floor.

"Substantiated violation" means that the licensing representative has determined, during a licensing complaint investigation or a monitoring or renewal visit, that the licensee has violated a licensing standard of this Part or the Child Care Act.

"Supervising agency", as used in this Part, means a licensed child welfare agency, a licensed day care agency, or the Department.

"Swimming pool" means any natural or artificial basin of water intended for public swimming or recreational bathing that exceeds 2'6" in depth as specified in the Illinois Swimming Pool and Bathing Beach Code (77 Ill. Adm. Code 820). The term includes bathing beaches and pools at private clubs, health clubs, or private residences when used for children enrolled in a child care facility.

"Temporary removals" means practices that involve removing the child from regular participation in the program as a result of a challenging behavior. A temporary removal should be developmentally appropriate and may only be used as a last resort...
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if there is a serious safety threat that cannot be reduced or eliminated by the provision of reasonable modifications. The program must help the child return to full participation in a group setting as soon as safety allows.

"Wading pool" means any natural or artificial basin of water less than 2'6" in depth that is intended for recreational bathing, water play or similar activity. The term includes recessed areas less than 2'6" in depth in swimming pools that are designated primarily for children.

"Water profile" means a building's water heater, source of water, and water supply lines.

"Water source" means any faucet used to obtain water for drinking or food preparation for day care operations. Water sources include, but are not limited to, sinks, bathtubs, hoses, drinking fountains, bubblers, and refrigerator or freezer water or ice dispensers.

(Source: Amended at 44 Ill. Reg. 16116, effective September 18, 2020)

Section 406.4 Application for License

a) A complete application shall be filed with the Department of Children and Family Services by the supervising agency on forms prescribed and provided by the Department.

b) Contents of Application

1) A complete application shall include:
   A) a completed, signed and dated Application for Home License;
   B) a list of persons who will be working in the day care home, including any substitutes and assistants, and members of the household age 13 and over;
   C) completed, signed and dated authorizations to conduct the background check for the applicants, each employee or person used to replace or supplement staff, and each member of the household age 13 and over;
   D) a completed, signed and dated Child Support Certification form;
   E) the names, addresses and telephone numbers of at least 3 adults not related to the applicants, nor living in the household, who can attest to their character and suitability to provide child care;
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F) a written hazard protection plan identifying potential hazards within the home and outdoor area accessible to the children in care. The written plan shall address the specific hazards and the adult supervision and physical means required to minimize the risks to children. Conditions to be addressed include, but are not limited to, traffic construction, bodies of water accessible to the children, open stairwells, and neighborhood dogs;

G) a copy of high school diploma, equivalent certificate, or degree from a regionally accredited institution of higher education or vocational institution;

H) proof of membership in the Gateways to Opportunity Registry by the primary caregiver and assistants in the home with all educational credentials and pre-service training entered into the Registry;

I) for an initial application effective January 1, 2014 or later, proof that the home has been tested within the last 3 years for radon, as established by rules of the Illinois Emergency Management Agency (32 Ill. Adm. Code 422) [225 ILCS 10/5.8]; and

J) lead testing results and mitigation plans when required by Section 406.8(e) and (f).

2) The applicants shall have completed, not more than one year prior to the application date, at least 15 hours of pre-service training listed in Appendix D, which shall include the following topics for applicants and assistants who will care for infants:

A) Sudden Infant Death Syndrome (SIDS);

B) Sudden Unexpected Infant Death (SUID);

C) Safe sleep recommendations from the American Academy of Pediatrics;

D) Shaken Baby Syndrome; and

E) Department approved Mandated Reporter Training for all licensees and assistants, regardless of the age of children in care.

3) Applicants shall submit with their initial application a certificate of completion of lead safety training consisting of instruction in the following topics:

A) Mitigation plan for test results of 2.01 ppb or above; and

B) Impact of lead exposure.
c) The supervising agency shall study each day care home under its supervision before recommending issuance of a license. The licensing study shall be conducted by a licensing representative and shall be reviewed and approved by his/her supervisor. Supervisory approval indicates recommendation for license or denial of a license and compliance or non-compliance with the standards prescribed by this Part. The study shall be in writing and shall be signed by the licensing representative performing the study and by his/her supervisor. A license may not be recommended without the receipt of at least 3 positive, written references, and a written study signed by the licensing representative and supervisor. The applicant shall receive a copy of the results of the on-site compliance review upon request.

d) Fire Safety Inspection

1) The Department shall request the Office of the State Fire Marshal (OSFM) to perform a fire safety inspection of homes when an initial application is being considered for licensure and when care will be provided on other than ground level and for homes in multi-housing units and submit a written recommendation of the inspection to the supervising agency of the day care home and to the applicant;

2) The fire safety inspection on single floor homes, at ground level with no unusual or complex code considerations, shall be completed following the list of items for fire safety inspection in Appendix E by a licensing representative trained by OSFM to conduct that fire prevention inspection;

3) Prior to the Department issuance of a permit or a license, the day care home shall have written approval by OSFM or staff trained by OSFM, indicating the home meets fire safety requirements.

e) Licensed day care homes that fail to comply with all applicable local, municipal and State regulations may be prohibited from operating.

f) New Applications

1) A new application shall be filed when any of the following occurs:

A) When an application for a license has been withdrawn, surrendered or denied and the applicant or licensee seeks to reapply;

B) When there is a failure to submit a completed application within 14 days after a change of the location of the day care home; or

C) Not sooner than 12 months after the Department has revoked or refused to renew a license, after the previous license has been surrendered with cause, or refused to issue a full license to a permit holder, and a new license is sought.
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2) For the application to be considered timely and sufficient, a new application shall be completed, signed by the licensee and submitted to the supervising agency within 30 days after the following changes:

A) When there is a change in the name of the licensee, the supervising agency or the legal status from a social security number to Federal Employer Identification Number (FEIN); or

B) When there is a change in the status of joint licensees, such as separation, divorce or death.

(Source: Amended at 43 Ill. Reg. 187, effective January 1, 2019)

Section 406.5 Application for Renewal of License

a) Application forms for license renewal shall be mailed to day care home licensees by the supervising agency 6 months prior to the expiration date of the license.

b) The completed application shall be signed by the licensees and submitted to the supervising agency at least 3 months prior to expiration of the current license, in order to be considered timely and sufficient.

c) When a licensed day care home seeks to change its name, location, or supervising agency, a new application reflecting the changes must be completed, signed by the licensees and submitted to the supervising agency 30 days prior to the effective date of the changes for the application to be considered timely and sufficient.

d) When a licensee has made timely and sufficient application for renewal of a license or a new license with reference to any activity of a continuing nature and the Department fails to render a decision on the application for renewal of the license prior to the expiration date of the license, the existing license shall continue in full force and effect for up to 30 days until the final Department decision has been made. The Department may further extend the period in which such decision must be made in individual cases for up 30 days, if good cause is shown. [225 ILCS 10/5(d)]

e) Prior to renewal, the licensee shall be current with the annual 15 hours of required training in accordance with Appendix D that, for applicants and assistants licensed to care for newborns and infants, shall include the following topics:

1) Sudden Infant Death Syndrome (SIDS), Sudden Unexpected Infant Death (SUID) and safe sleep recommendations from the American Academy of Pediatrics; and

2) Shaken Baby Syndrome.
f) At the time of license renewal, the supervising agency shall review the fire emergency, tornado/severe weather emergency, and hazard protection written plans. Any revision or enhancement shall be part of the licensing renewal process. Licensed homes that do not have a written hazard plan (see Section 406.4(1)(F) shall develop a plan and submit it to the supervising agency prior to renewal.

g) Fire Safety Inspection

1) Fire safety inspections of homes licensed for multi-housing unit or single family dwelling in which care will be provided on other than grade level shall be completed by OSFM or its designee;

2) Fire safety inspection of homes licensed for a single floor with no unusual or complex code considerations shall be completed by a licensing representative trained by OSFM;

3) The fire safety inspection shall be conducted in accordance with the requirements of Appendix E.

h) Upon receipt of the application for license renewal, the supervising agency shall conduct a license study in order to determine that the day care home continues to meet licensing standards. The licensing study shall be in writing and shall be reviewed and signed by the licensing supervisor and the licensing representative performing the study. The licensees shall receive a copy of the results of the on-site compliance review upon request.

i) For a renewal application effective January 1, 2014 or later, proof the home that has been tested within the last 3 years for radon, as established by rules of the Illinois Emergency Management Agency (32 Ill. Adm. Code 422) [225 ILCS 10/5.8].

(Source: Amended at 40 Ill. Reg. 10769, effective July 29, 2016)

Section 406.6 Provisions Pertaining to the License

a) The licensees shall be a primary caregiver or caregivers who reside in the family home and meet the requirements of this Part. If there are joint licensees, they must be related and both must live in the family home.

b) A day care home license is valid for 3 years unless revoked by the Department or voluntarily surrendered by the licensee.

c) The number and age of children under age 12 cared for in the day care home at any one time shall be in compliance with provision in Section 406.13. Increases in the license capacity or the ages of children served shall be with written approval of the supervising agency.
d) The age limits specified on the license shall be observed, unless the licensee has submitted a transition plan to the Department in accordance with Section 406.13(h) in order to keep members of a sibling group together and the Department has approved the plan.

e) Child care may be provided only in those areas specified on the license.

f) The license is valid only for the family residence of the licensee and shall not be transferred to another person or other legal entity.

g) The license shall not be valid for a name or location other than the name and location on the license.

h) No day care home provider shall be licensed to provide care for more than 18 hours within a 24-hour period.

i) The license shall be prominently displayed in the home at all times.

j) There shall be no fee or charge for the license.

k) By September 1, 2012, the primary caregivers and assistants employed by the day care home shall become members of and participate in the Gateways to Opportunity Registry, with all educational and training credentials entered into the registry verified in accordance with procedures and requirements adopted by the Department of Human Services (see 89 Ill. Adm. Code 50.Subpart G). Newly hired staff serving children shall be members of the Gateways to Opportunity Registry within 30 days after hire.

(Source: Amended at 36 Ill. Reg. 13057, effective August 15, 2012)

Section 406.7 Provisions Pertaining to Permits

a) A permit shall not be issued until:

1) The application for licensure has been completed and signed by the applicants and all parts of the initial application requirements have been submitted to the Department;

2) The background checks required by Section 406.9 have been completed and the results of the background check have been received for the operator of the day care home;

3) Medical reports as required in Section 406.24(i) have been received by the Department for all caregivers and assistants;

4) The applicant who is the primary caregiver has been certified in first aid, the Heimlich maneuver, and infant/child cardiopulmonary resuscitation (CPR) in accordance with Section 406.9(n);
Character references have been requested, and at least two favorable references have been received and the results of the background check have been received for the operator of the day care home;

A personal visit to the home by a licensing representative has been completed. The purpose of this visit is to determine compliance with all the licensing requirements except the requirements for remaining character references, medical examination reports, and well water tests compliance that may be complied with within the 2 month period covered by the permit. However, when well water tests are required, applicants must agree to boil all drinking and cooking water and to provide only bottled water for children under 15 months of age until the test results are received;

A written plan has been submitted to the licensing representative that indicates that requirements for a license shall be met within the 2 month permit period; and

A written fire safety inspection and approval of the home has been completed in accordance with Section 406.4(d).

b) A permit shall not be issued retroactively.

c) Permits shall not be transferred to another person or other legal entity.

d) Permits shall not be valid for a name or location different from the name and location shown on the issued permit.

e) Permits shall not be renewable.

f) A current permit shall be prominently displayed in the day care home at all times while the home is operating under a permit.

g) A license shall be issued at any time within the 2 month period covered by the permit provided that the day care home achieves and maintains compliance with the Department's licensing standards.

h) The day care home shall adhere to the provisions or restrictions specified on the permit.

i) There shall be no fee or charge for the permit.

(Source: Amended at 40 Ill. Reg. 10769, effective July 29, 2016)
Section 406.8 General Requirements for Day Care Homes

a) The physical facilities of the home, both indoors and outdoors, shall meet the following requirements for safety to children.

1) The home shall have a first aid kit consisting of adhesive bandages, scissors, thermometer, non-permeable gloves, Poison Control Center telephone number (1-800-222-1222 or 1-800-942-5969), sterile gauze pads, adhesive tape, tweezers and mild soap.

2) The kitchen shall be equipped with a readily accessible and operable fire extinguisher rated for Class A, B, and C fires and a flashlight in working order.

3) All electrical outlets that are in areas used by the day care children shall have protective coverings. There shall be no exposed or uninsulated wiring.

4) The home shall be equipped with a minimum of one approved smoke detector in operating condition on every floor level, including basements and occupied attics.

A) A smoke detector in operating condition shall be within each room where children nap or sleep. The detector shall be installed on the ceiling and at least 6 inches from any wall, or on a wall located between 4 and 6 inches from the ceiling. In addition, there shall be at least one detector at the beginning and end of each separate corridor or hallway 200 feet or more in length in any occupied story.

B) In any facility constructed after December 31, 1987, or which undergoes substantial remodeling of its structure or wiring system after that date, the smoke detectors shall be permanently wired into the structure’s AC power line, and, if more than one detector is required to be installed, the detectors shall be wired so that the activation of one detector will activate all the detectors in the facility unit. For purposes of this subsection (a)(4), “substantial remodeling” represents more than 15% of the replacement cost of the day care home. For homes that did not have wired installation of smoke detectors in each room prior to December 15, 2011, the Department may allow the installation of a battery-operated smoke detector in each room where children nap or sleep and deem the home to be in compliance.

C) Compliance with any applicable federal, State or local law, rule or building code which requires the installation and maintenance of smoke detectors in a manner different from this Section, but...
providing a level of safety for occupants which is equal to or greater than that provided by this Section, shall be deemed to be compliance with this Section. (Section 2 of the Facilities Requiring Smoke Detectors Act [425 ILCS 10/2])

D) For homes constructed after December 15, 2011, or that underwent substantial remodeling of structure or wiring systems after December 15, 2011, the smoke detectors shall be permanently wired into the structure's AC power line and, if more than one detector is required to be installed, the detectors shall be wired so that the activation of one detector will activate all the detectors in the facility unit.

5) Carbon Monoxide Detector

A) A home that has an attached garage and/or relies on combustion of fossil fuel for heating, ventilation, or hot water shall be equipped with a minimum of one approved carbon monoxide detector in operating condition within 15 feet of rooms where children nap or sleep.

B) The carbon monoxide detector may be combined with smoke detector devices, provided that the combined unit complies with subsection (a)(4) and this subsection (a)(5). [430 ILCS 135/10]

6) The home and indoor space shall be maintained in good repair and shall provide a safe, comfortable environment for the children.

7) A draft-free temperature of 65°F to 75°F shall be maintained during the winter months or heating season. For infants and toddlers, a temperature of 68°F to 82°F shall be maintained during the summer or air-conditioning months. When the temperature in the home exceeds 78°F, measures shall be taken to cool the children. Temperatures shall be measured at least 3 feet above the floor.

8) Fixed space heaters, fireplaces, radiators, and other heating sources in areas occupied by children shall be separated by partitions or a sturdy barrier to prevent contact. Portable space heaters may not be used in a day care home during the hours that child care is provided.

9) Facilities in which a wood-burning stove or fireplace has been installed and which is used during the hours that child care is provided shall provide a written plan of how the stove or fireplace will be used and what actions will be taken to ensure the children's safety when in use.
When the basement area may be used for child care, 2 exits shall be provided.

A) At least one exit shall be a basement exit via a door directly to the outside (without traversing any other level of the home) or a protected exit from a basement via a door or stairway that allows unobstructed travel directly to the outside of the building at street or ground level. The stairway may not be more than 8 feet high.

B) A second exit may be a window.

   i) The window shall be operable from the inside without the use of tools and provide a clear opening not less than 20 inches in width, 24 inches in height, and 5.7 square feet in area.

   ii) If the window is used as a second exit, the bottom of the window opening shall be no more than 44 inches above the floor.

   iii) When the bottom of the window opening used as a second exit is greater than 24 inches above the floor, there shall be a permanently affixed, sturdy ramp or stairs located below the window to allow speedy access in the event of an emergency.

C) If the basement area does not meet the requirements in subsections (a)(10)(A) and (B), the basement may be used for child care only with the prior written approval of OSFM.

11) All walls and surfaces shall be maintained free from lead paint and from chipped or peeling paint.

12) Walls of rooms that children use shall be maintained free of carpeting, fabric or plastic products. Inflammable or combustible artwork attached to the walls shall not exceed 20% of any wall.

13) Furniture and equipment shall be kept in safe repair.

14) First aid supplies, medication, cleaning materials, poisons, sharp scissors, plastic bags, sharp knives, cigarettes, matches, lighters, flammable liquids, and other hazardous materials shall be stored in places inaccessible to children. Hazardous items for infants and toddlers also include items that can cause choking, including but not limited to: coins, balloons, safety pins, marbles, Styrofoam™ and similar products, and sponge, soft rubber or soft plastic toys that can be bitten or broken into small pieces.

15) Tools and gardening equipment shall be stored in locked cabinets, if possible, or in places inaccessible to all children.
16) An operable telephone shall be available on the premises of the licensee. The number of the Poison Control Center (1-800-222-1222 or 1-800-942-5969) and other emergency numbers shall be posted in an area that is readily available in an emergency.

17) **Handguns are prohibited on the premises of the day care home except in the possession of peace officers or other adults who must possess a handgun as a condition of employment and who reside in the day care home.** The licensee shall post a "no firearms" sign, as described in Section 65(d) of the Firearm Concealed Carry Act [430 ILCS 66/65(d)], in a visible location where parents pick up children.

18) Any firearm, other than a handgun in the possession of a peace officer or other person as provided in subsection (a)(17), shall be kept in a disassembled state, without ammunition, in locked storage in a closet, cabinet, or other locked storage facility inaccessible to children.

   A) Ammunition for such firearms shall be kept in locked storage separate from that of the disassembled firearms, inaccessible to children.

   B) The operator of the home shall notify the parents or guardian of any child accepted for care that firearms and ammunition are stored on the premises. The operator shall also notify the parents or guardian that such firearms and ammunition are locked in storage inaccessible to children. (Section 7 of the Child Care Act of 1969 [225 ILCS 10/7]) The notification need not disclose the location where the firearms and ammunition are stored.

19) Written emergency preparedness plans shall be developed and shall specify the actions to be taken in the event of a fire, tornado or other emergency. Caregivers and assistants in the home shall be familiar with these plans. The emergency preparedness plans shall include, but are not limited to:

   A) A fire evacuation plan identifying exits from each area used for child care and specifying the evacuation route;

   B) A fire evacuation plan identifying a safe assembly area outside of the home. It shall also identify a nearby indoor location for post-evacuation holding if needed;

   C) A fire evacuation plan requiring that the home be evacuated immediately and the children's safety insured before calling the local emergency number 911 or attempting to combat the fire;
D) A tornado plan specifying actions that will be taken in the event of tornado or other severe weather warning, including designation of those areas of the home to be used as safe spots;

E) Specific procedures for notifying parents if evacuation is necessary and how they will be reunited with their children;

F) Specific procedures for evacuating children who are less than 30 months of age and/or for evacuating special needs children when applicable;

G) Monthly fire drills to be conducted for the purpose of removing children from the home as quickly as possible; and

H) Monthly tornado drills to be conducted for the purpose of getting children accustomed to moving to a position of safety in the event of a tornado.

20) The licensee shall hold monthly fire safety inspections of the day care home and maintain documentation on file for a period of 1 year.

21) Fire and tornado drills shall be documented and that documentation shall be maintained on file for a period of 3 years.

22) Escape routes from the home shall be designed and maintained for swift and safe exiting in the event of an emergency.

A) All corridors and escape routes from the home shall be kept clear of obstructions.

B) Dead-end paths or corridors within the home shall be a maximum of 20 feet in length.

C) All escape routes from the home shall have operable lighting. The lighting shall be activated during any hours of operation when natural lighting is reduced to a level that prohibits visibility within the escape route.

D) Bathroom doors in areas accessible to day care children shall allow a caregiver to open the door from outside of the bathroom if necessary.

E) All closet doors accessible to children shall be able to be opened from inside of the closet without the use of a key.

F) There shall be no more than 2 releasing devices (door knobs, hand-operated deadbolts, thumb-turn locks, etc.) on any exit door or exit window.
G) Exit doors and exit windows shall be operable without the use of a key, a tool or special knowledge to open for exit to the outside.

H) Exit doors and exit windows shall be kept clear of equipment and debris at all times.

23) The licensee shall inspect the home daily, prior to arrival of children, ensuring that escape routes are clear and that exit doors and exit windows are operable. A log of these daily inspections shall be maintained for at least one year, and shall be available for review. The log shall reflect, at minimum, the date and time of each inspection and the full name of the person who conducted it.

24) All in-ground swimming pools located in areas accessible to children shall be fenced. The fence shall be at least 5 feet in height and secured by a locked gate. Day care homes that have a license or a permit on April 1, 2001 and are in compliance with the requirement for a 3½ foot fence shall be considered in compliance with the fence requirement.

25) All above-ground pools shall have non-climbable sidewalls that are at least 4 feet high or shall be enclosed with a 5 foot fence that is at least 36 inches away from the pool's side wall and secured with a locked gate. When the pool is not in use, steps shall be removed from the pool or otherwise protected to insure the pool cannot be accessed. Day care homes that have a license or a permit on April 1, 2001 and are in compliance with the requirement for a 3½ foot fence shall be considered in compliance with the fence requirement.

26) Portable wading pools shall be emptied daily and disinfected before being air-dried.

27) All hot tubs shall have securely locked covers or otherwise be inaccessible to children.

28) Free hanging cords on blinds, shades and drapes shall be tied or otherwise kept out of reach of children.

29) Radon Test

Effective January 1, 2013, the home shall be tested for radon at least once every 3 years. The most current radon measurements shall be posted next to the license in the home, on a form provided by the Department containing the required informative statement from Section 5.8(d) of the Child Care Act of 1969 [225 ILCS 10].

b) The kitchen shall be clean, equipped for the preservation, storage, preparation and serving of food, and reasonably safe from hazards.
c) Garbage and refuse containers used to discard diapering supplies, food products or disposable meal service supplies in areas for child care shall be disinfected daily unless plastic liners are used and disposed of daily.

d) A safe and sanitary water supply shall be maintained. If a private water supply is used instead of an approved public water supply, the applicant shall supply written records of current test results indicating the water supply is safe for drinking. New test results must be provided prior to renewal of license. If nitrate content exceeds 10 ppm, bottled water must be used for children under 15 months of age.

e) Any day care home currently licensed as of January 1, 2019 shall submit a survey provided by its day care licensing office that includes the construction date of the home. The construction date for new day care home applicants is captured on the CFS 597-DCI form.

f) Any day care home serving children under 6 years of age and housed in a building constructed on or before January 1, 2000 shall be subject to lead in water testing by an IEPA laboratory or an IEPA-certified laboratory. A current list of certified laboratories can be obtained by contacting the Day Care Information Line at 1-877-746-0829, or can be accessed online through https://sunshine.dcfs.illinois.gov/Content/Licensing/LeadTesting.aspx. Water sampling guidelines followed by certified laboratories may also be accessed through this link. Test results and mitigation plans, when required, shall be submitted to the local licensing office within 120 days after notification of test results of 2.01 ppb or above.

1) All lead in water test results (at, above or below 2.01 ppb) shall be posted in the home in a visible location and submitted by the applicant or licensee directly to his or her local licensing office.

2) A mitigation plan shall be made available to parents and submitted to the local licensing office if test results indicate the presence of lead for each drinking water source with a result of 2.01 ppb or above and shall specify:

   A) Interim measures the applicant/licensee will take to ensure a safe drinking water supply during mitigation;

   B) Mitigation plan start and planned completion dates;

   C) Retesting dates, to include one test to occur no later than six months following the completion of a mitigation plan and a second test no later than one year after the completion of a mitigation plan;

   D) Each drinking water source that tested at 2.01 ppb or higher and the planned mitigation activity for each source. Examples of acceptable mitigation strategies include, but are not limited to, installation of mechanical flushing devices, replacement of lead-based lines or fixtures, or reverse osmosis filters installed at affected drinking water fixtures; and
E)  In extenuating circumstances in which mitigation cannot be readily undertaken (e.g., lead in the municipal water source), alternative external sources of water that tests below 2.01 ppb, such as bottled water with that test result, may be used subject to Department approval.

3)  Following successful mitigation that results in two consecutive tests of lower than 2.01 ppb, further testing is only required if there has been any change to the water profile of the building, including, but not limited to, replacement of the hot water heater, change in the water source, or change to, or replacement of, the water service lines.

4)  The Department reserves the right to require testing upon suspicion of the day care home misrepresenting the construction date of the building, submitting false or altered testing results, failing to follow mitigation remedies, or committing other actions that may compromise the health and welfare of children. Any day care home that fails to insure testing and reasonable mitigation actions when necessary may be subject to enforcement action, up to and including revocation of, or refusal to renew, the license.

g)  Hot and cold running water shall be provided. When children under age 10 or who are developmentally disabled are cared for, the maximum hot water temperature from all faucets of sinks designated for children washing hands shall be no more than 115°F Fahrenheit. Caregivers shall always test the hot water before allowing children less than 5 years of age to use the water.

h)  Insect and rodent control shall be maintained.

1)  All outside doors except those with operable self-closing devices, operable windows, and other openings used for ventilation shall be screened.

2)  Chemicals for insect and rodent control shall be applied in minimum amounts and shall not be used when children are present. Over-the-counter products may be used only according to package instructions. Commercial chemicals, if used, shall be applied by a licensed pest control operator and shall meet all standards of the Department of Public Health (Structural Pest Control Code, 77 Ill. Adm. Code 830). A record of any pesticides used shall be maintained.

i)  Healthy household pets that present no danger to children are permitted.

1)  A licensed veterinarian shall certify that the animals are free of diseases that could endanger the children's health and that dogs and cats have been inoculated for rabies.

2)  If certification is not available, animals shall be confined at all times in an area inaccessible to children.
3) There shall be careful supervision of children who are permitted to handle and care for the animals.

4) Immediate treatment shall be available to any child who is bitten or scratched by an animal.

5) The presence of monkeys, ferrets, turtles, iguanas, psittacine birds (birds of the parrot family) or any wild or dangerous animal is prohibited in areas accessible to children during the hours the day care home is in operation. Wild and dangerous animals include, but are not limited to, venomous and constricting snakes, undomesticated cats and dogs, raccoons, and other animals determined to be dangerous by local public health authorities.

j) Indoor space shall consist of a clean, comfortable environment for children.

1) The day care home shall be well-ventilated, free from observable hazards, properly lighted and heated, and free of fire hazards.

2) The dwelling shall be kept clean, sanitary, and in good repair.

3) There shall be provision for isolating a child who becomes ill or who is suspected of having a contagious disease.

4) When used for child care, floors shall have protective covering such as, but not limited to, tile, carpet or linoleum. Paint or sealer alone is not acceptable as a protective covering.

5) When children under 30 months of age are in care, stairs leading to second levels, attics or basements shall be fitted with a sturdy gate, door or other barrier to prevent the children's access to stairs without adult supervision. Such a barrier shall be moveable enough so as not to impede evacuation, if necessary.

k) The licensee shall identify those areas in the home used for child care. The identified areas minus any special use areas shall be measured to calculate the square footage available for child care. When the licensed capacity of the home exceeds 8 children, there shall be:

1) A minimum of 35 square feet of floor space per each child in care; and

2) An additional 20 square feet of floor space for each child under 30 months of age when the play area is the same as the sleep area. However, if portable bedding is used for napping, then removed, the licensing representative shall approve the use of only 35 square feet of space for each child if the applicant/licensee has adequate storage for the bedding materials and the bedding materials are removed before and after naptime.
l) No person may smoke tobacco in any area of the day care home in which day care services are being provided to children, while those children are present on the premises. In addition, no person may smoke tobacco while providing transportation, in either an open or enclosed motor vehicle, to children who are receiving child care services. Nothing in this subsection prohibits smoking in the home in the presence of a person's own children or in the presence of children to whom day care services are not then being provided. [225 ILCS 10/5.5]

m) There shall be safe outdoor space for active play.

1) Space shall be provided for play in yards, nearby parks or playgrounds under adult supervision.

2) Space shall be protected by physical means (e.g., fence, tree line, chairs, ropes, etc.) against all water hazards, including, but not limited to, pools, ponds, standing water, ornamental bodies of water, and retention ponds, regardless of the depth of the water, and by adult caregiver supervision at times when children in care are present. Other hazards, such as, but not limited to, heavy traffic and construction, shall be inaccessible to children in care through a physical barrier and adult supervision.

3) Play areas shall be well drained and safely maintained.

4) All pieces of outdoor equipment used by children 5 years of age and younger on the day care home premises that is purchased or installed on or after April 1, 2001 shall meet the following standards to guard against entrapment or situations that may cause strangulation.

A) Openings in exercise rings shall be smaller than 4½ inches or larger than 9 inches in diameter.

B) There shall be no openings in a play structure with a dimension between 3½ inches and 9 inches (except for exercise rings). Side railings, stairs and other locations that a child might slip or climb through shall be checked for appropriate dimensions.

C) Distances between vertical slats or poles, where used, must be 3½ inches or less (to prevent head entrapment).

D) No opening shall form an angle of less than 55 degrees unless one leg of the angle is horizontal or slopes downward.

E) No openings shall be between ⅜ inch and one inch in size (to prevent finger entrapment).
5) The use of a trampoline by children in care is prohibited.

6) Children shall be closely supervised by the caregiver when public parks or playgrounds are used for play, during play and while traveling to and from the area.

7) Supervision shall be provided during outdoor play by caregivers who meet the requirements of Section 406.9.

n) Operation of other business on the premises must not interfere with the care of children.

o) A day care home may not house bedridden or chronically ill persons except by permission of the supervising agency. The supervising agency shall grant such permission unless the person has a contagious or a reportable communicable disease or requires care that adversely affects the ability of the caregiver to supervise children.

p) A day care home shall have certification that all cribs used by the home meet or exceed the federal safety standards in 16 CFR 1219 or 1220 (2011). This certification from the manufacturer shall be available for inspection by the licensing representative. In the absence of a manufacturer's certificate, proof that the crib was manufactured on or after June 28, 2011 will meet the required standard.

(Source: Amended at 43 Ill. Reg. 187, effective January 1, 2019)
Section 406.9 Characteristics and Qualifications of the Day Care Family

a) No individual may receive a license from the Department when the applicant, a member of the household age 13 and over, or any individual who has access to the children cared for in a day care home, or any employee of the day care home, has not authorized the background check required by 89 Ill. Adm. Code 385 (Background Checks) and been cleared in accordance with the requirements of Part 385.

b) Employees subject to background checks may begin employment on a conditional basis while awaiting the results of the background check. The employees may not be alone with children until the results of the initial background check have been received.

c) Persons who have been the perpetrator of certain types of child abuse or neglect or who have committed or attempted to commit certain crimes may not be licensed to operate a day care home, be a member of the household of a family home in which a day care home operates, or be an employee or volunteer in a day care home. These allegations/criminal convictions are listed in Appendix C of this Part.

d) Day care homes shall be responsible for ensuring that persons subject to criminal background checks make themselves available for fingerprinting when scheduled by the Department or its authorized representatives. Failure of a person subject to criminal background checks to appear for scheduled fingerprinting may result in the denial of a license application or refusal to renew or revocation of an existing license unless the child care facility can demonstrate that it took reasonable measures to insure cooperation with the fingerprinting process. Adequate cause for failure to appear for fingerprinting includes, but is not limited to:

1) death in the family of the person;

2) serious illness of the person or illness in the person's immediate family; or

3) weather or transportation emergencies.

e) As a condition of licensure, each licensee or license applicant must certify under penalty of perjury that he or she is current or not more than 30 days delinquent in complying with a child support order. Failure to so certify may result in a denial of the license application, refusal to renew the license, or revocation of the license. (Section 10-65(c) of the Illinois Administrative Procedure Act [5 ILCS 100/10-65(c)])

f) If the licensees or license applicants acknowledge that they are more than 30 days delinquent in complying with an order for child support or, upon completion of the background check, the licensees or license applicants are found to be delinquent despite their certification, the Department shall deny the application for license, refuse to renew the license, or revoke the license unless the licensees or license applicants arrange for payment of past due and current child support and pay child support in accordance with that agreement.
g) Members of the household who have contact with the children in care shall treat them with respect, courtesy, and patience.

h) The caregiver is responsible for the day-to-day operation of the day care home in accordance with the standards prescribed in this Part.

i) The licensee shall be present in the home when day care children are in attendance unless a qualified substitute caregiver per Section 406.11 is present.

j) The licensee and other adult members of the household in contact with day care children shall be stable, law abiding, responsible, mature individuals.

k) The caregivers in a day care home shall be at least 18 years of age.

l) Caregivers licensed after January 1, 2011 shall have proof of a high school diploma, equivalent certificate, or degree from a regionally accredited institution of higher education or vocational institution.

m) The caregivers and all members of the household shall provide medical evidence as required by Section 406.24(i) that they are free of reportable communicable disease, and, in the case of caregivers, free of physical or mental conditions that could interfere with the child care responsibilities.

n) The licensee who is the primary caregiver shall be certified in first aid, the Heimlich maneuver and infant/child cardiopulmonary resuscitation (CPR) by the American Red Cross, the American Heart Association or other entity approved by the Illinois Department of Public Health.

o) During the hours of operation of the day care home, there shall be at least one person on the premises certified in first aid, the Heimlich maneuver and infant/child cardiopulmonary resuscitation (CPR) by the American Red Cross or the American Heart Association, or other entity approved by the Illinois Department of Public Health. The caregivers shall have on file current certificates attesting to the training.

p) The caregiver shall successfully complete a Department approved basic training course of 6 or more clock hours in providing care to children with disabilities. Refer to Appendix D for basic course requirements. The licensee shall have on file a certificate attesting to the successful completion of the training.

1) New licensee shall complete this training within 36 months from the issue date of the initial license.

2) A licensee who has completed training prior to November 15, 2003 may have that training approved as meeting the provisions of this Section. A certificate of training completion and a description of the course content must be submitted to the Department for approval.
q) Through interaction with the licensing representative, children, parents or guardian of children in care and operation of the day care home in accordance with standards prescribed by this Part, caregivers shall exhibit competence in the following specific areas:

1) Knowledge of basic hygiene, safety, and nutrition.

2) The ability to relate comfortably with parents and to communicate with them on differences in caregiving methods, values, and goals.

3) The ability to communicate with children.

4) The ability to set realistic controls for children and to enforce these without harshness or physical abuse.

5) Knowledge of the child's need to explore and manipulate and the willingness to provide and maintain a home where children can enjoy living and learning.

6) Using developmentally appropriate behavior management techniques that do not constitute corporal punishment of children.

r) The caregivers may not work or be employed outside the home during the hours the day care home is licensed. Outside employment during hours that child care is not being provided shall not interfere with child care.

s) The caregiver shall be awake, alert, and able to supervise the children when providing care, except as allowed by Section 406.23(h).

t) The caregivers shall complete 15 clock hours of in-service training per licensing year in accordance with the requirements in Appendix D.

1) The training may be derived from programs offered by any of the entities identified in Appendix D.

2) Courses or workshops to meet this requirement include, but are not limited to, those listed in Appendix D.

3) The records of the day care home shall document the training in which the caregiver has participated, and these records shall be available for review by the Department.

4) Caregivers obtaining clock hours in excess of the required 15 clock hours per year may apply up to 5 clock hours to the next year's training requirements.
5) Licensees shall submit to the local licensing office a certificate of completion of lead safety training consisting of instruction in the following topics:

   A) Mitigation plan strategies for test results of 2.01 ppb or above; and

   B) Impact of lead exposure.

u) Licensees or applicants shall not provide false or misleading information regarding their compliance with the applicable regulations.

(Source: Amended at 43 Ill. Reg. 187, effective January 1, 2019)

Section 406.10 Qualifications for Assistants

a) Assistants shall have passed the background check in Section 406.9(a).

b) Assistants shall be at least 14 years of age and at least 5 years older than the oldest child they supervise. Minor assistants shall be employed in accordance with 56 Ill. Adm. Code 250 (Illinois Child Labor Law).

c) Assistants under age 18 shall work under the direct personal supervision of the caregiver at all times. Direct personal supervision means the caregiver maintains audible or visual contact with the assistant and children on the premises at all times.

d) An assistant 18 years of age or older may accompany children playing outdoors, and may transport children, if the assistant possesses a valid driver's license for the vehicle classification that is being used to transport children and insurance.

e) Assistants shall provide medical evidence as required by Section 406.24(i) that they are free of reportable communicable disease and physical or mental conditions that could interfere with child care responsibilities.

f) The assistant shall be compatible with the caregiver, capable of following directions, and responsive to supervision.

g) The child care assistant shall be able to relate well with children.

(Source: Amended at 40 Ill. Reg. 10769, effective July 29, 2016)
Section 406.11 Substitutes

a) A substitute caregiver may be used in the home up to 25 child care hours per month and for an additional period of up to 2 weeks in a 12 month period. The supervising agency may approve additional time for family emergencies, medical reasons, and continuing education, when the substitute to be used during these periods meets the qualifications for the caregiver in Section 406.9. The substitute caregiver’s work time shall be documented.

b) A substitute caregiver shall be at least 18 years of age.

c) A person who functions as a substitute caregiver on a regular or scheduled basis shall be qualified as a caregiver in accordance with Section 406.9.

d) The parents of children in care and the supervising agency shall be notified of any substitution which occurs on a regular or scheduled basis or wherein the caregiver is absent from the home for more than 24 consecutive hours during which children are in care.

e) The caregiver shall have on file the names, addresses, and telephone numbers of additional adults who would be available to assist in the home in an emergency.

f) The caregiver shall have a plan worked out and understood by the parents in case the caregiver is ill or absent from the home due to an emergency.

(Source: Amended at 27 Ill. Reg. 19180, effective December 15, 2003)

Section 406.12 Enrollment and Discharge Procedures

a) No child served in a day care home shall remain on the premises for more than 12 hours in any 24-hour period, unless the parent's employment schedule requires more than 12 hours of day care. Regardless of the parent's work or training schedule, at no time shall children cared for in a day care facility remain on the premises for more than 18 consecutive hours.

b) Prior to acceptance of a child for care:

1) The caregiver shall require that the parent accompany the child to the home to become acquainted with the caregiver and with the service to be provided.

2) No child under 6 years of age may be admitted to the day care home unless the health examination, complete with lead risk assessment if the child resides in an area defined as low risk by the Department of Public Health, or a screening for lead poisoning if the child resides in an area defined as high risk by DPH (see 77 Ill. Adm. Code 845 (Lead Poisoning Prevention Code)), has been completed as required by DPH rules at 77 Ill. Adm. Code 665 (Child Health Examination Code).
3) The caregiver shall require that the parent provide a certified copy of the child's birth certificate. The caregiver:

A) Shall provide a written notice to the parent of a child to be enrolled for the first time that within 30 days after enrollment the parent shall provide a certified copy of the child's birth certificate or other reliable proof of identity and age of the child.

i) The caregiver shall promptly make a copy of the certified copy and return the original certified copy to the parent.

ii) If a certified copy of the birth certificate is not available, the parent must submit a passport, visa or other governmental documentation as proof of the child's identity and age and an affidavit or notarized letter explaining the inability to produce a certified copy of the birth certificate [325 ILCS 50/5].

iii) The notice to parent shall also indicate that the caregiver is required by law to notify the Illinois State Police or local law enforcement agency if the parent fails to submit proof of the child's identity within the 30 day time frame;

B) Shall notify the Illinois State Police or local law enforcement agency of the parent's or guardian's failure to submit a certified copy of the child's birth certificate or other reliable proof of identity. The caregiver shall also notify the parent in writing that the Illinois State Police or local law enforcement has been notified as required by law and that the parent has 10 additional days to comply by submitting the required documentation; [325 ILCS 50/5]

C) Shall report to the Illinois State Police or local law enforcement agency any affidavit received which appears inaccurate or suspicious in form or content; [325 ILCS 50/5]

D) Shall flag the record of a child enrolled at the day care who is reported by the Illinois State Police as a missing person, and shall immediately report to the Illinois State Police any request concerning flagged records or knowledge as to the whereabouts of any missing child. [325 ILCS 50/5]

c) The parents shall be permitted to visit the home, without prior notice, during the hours their children are in care.
d) A child shall be discharged from the facility only to the child's parents or to a person designated in writing by the parents to receive the child.

e) The caregiver shall refuse to release a child to any person, whether related or unrelated to the child, who has not been authorized in writing by the parents to receive the child. Persons not known to the caregiver shall be required to provide a driver's license (with photo) or photo identification card issued by the Illinois Secretary of State to establish their identity prior to a child's release to them.

f) The facility shall maintain a list of persons designated, in writing, by the parents, or guardian to whom the facility can be expected to discharge the child at least once per week. These persons, in addition to the parents, shall constitute the primary list of persons to whom the child may be released. In addition, the facility shall maintain a contingency list of persons, designated in writing by the parents, to whom the child may be released less frequently than once per week. When the child is released to a person on the contingency list, the facility shall maintain a record of the person to whom the child was released, the date and time that the child was released, and the manner that the child left the facility (whether on foot, by passenger car, by taxicab, or by other means of transportation).

g) Other discharge provisions of this Section notwithstanding, a child leaving the day care home to attend school shall be released in accordance with the written authorization of the parents. The authorization shall include the time that the child is to be released and the means of transportation the child is to use.

h) All day care homes shall have a written policy that explains the actions the provider will take if a parent does not retrieve, or arrange to have someone retrieve, his or her child at the designated, agreed upon time. The policy shall consist of the provider's expectations, clearly presented to the parent, in the form of a written agreement that shall be signed by the parent, and shall include at least the following elements:

1) The consequences of not picking up the child on time, including:

   A) Amount of late fee, if any, and when those fees begin to accrue;

   B) The degree of diligence the provider will use to reach emergency contacts, e.g., number of attempted phone calls to parents and emergency contacts, requests for police assistance in finding emergency contacts; and

   C) Length of time the facility will keep the child beyond the pick-up time before contacting outside authorities, such as the child abuse hotline or police.

2) Emphasis on the importance of having up-to-date emergency contact numbers on file.
3) Acknowledgement of the provider's responsibility for the child's protection and well-being until the parent or outside authorities arrive.

4) A reminder to the day care provider that the child is not responsible for the situation. All discussions regarding these situations shall be with the parent, never the child.

i) The daily list of children in care shall be readily accessible in case of emergency evacuations and fire drills.

j) All day care homes providing care to infants, toddlers or preschool age children shall maintain, and notify parents of, written behavior support and transition policies, in compliance with 23 Ill. Adm. Code 235.320 (Behavior Support Plans).

k) Providers of child care to infants or preschool age children shall maintain documentation regarding:

1) Steps taken to ensure that the child can participate safely in the program, in accordance with the plan and program transition policy.

2) This shall include attempts to utilize qualified professional resources, including when parental consent is attempted and whether it is obtained. Early intervention services received by children shall be documented in the behavior support plan. Providers shall also document whether children are evaluated by the Early Intervention Program and/or the school district, and with regard to those children evaluated, whether they are found eligible or ineligible to receive services.

l) Providers shall communicate with parents for several reasons, including to better understand the child's strengths and needs, and to share any initial/ongoing observations by provider or staff of challenging behaviors.

m) Infants, toddlers and preschool age children who, after documented attempts have been made to meet the child's individual needs, demonstrate inability to benefit from the type of care offered by the day care home, or whose presence is detrimental to the group, shall be transitioned to a different program.

n) For infants, toddlers and preschool age children, in all instances when a licensee decides that it is in the best interest of the child to transition to a different program, the child's and parents' needs shall be considered by planning with the parents to identify the new program and working with the parents and pending program on a transition plan designed to ensure continuity of services to meet the child's needs. Licensees shall adhere to the following requirements regarding program transition plans:
1) All day care homes shall have written transition policies that outline:

A) Circumstances in which children may transition out of the program; and

B) What the transition process entails;

2) Providers shall notify the Department of transition plans;

3) Nothing shall preclude a parent's or legal guardian's right to withdraw his or her child from a day care home. A written statement from the parent or guardian shall be requested by the provider and kept on file stating the reason for the decision to withdraw the child; and

4) If parents/guardians are unable to provide a letter, the licensee shall maintain documentation that includes the requestor's name and relationship to the child, along with the withdrawal date. The licensee must also sign and date the documentation.

(o) Providers shall collect, and report annually to the Illinois State Board of Education, information on children transitioning out of the day care home, in compliance with 23 Ill. Adm. Code 235.340 (Reporting).

(Source: Amended at 44 Ill. Reg.16116, effective September 18, 2020)
Section 406.13 Number and Ages of Children Served

a) The maximum number of children under the age of 12 cared for in a day care home by a caregiver alone shall be 8. The maximum number includes the caregiver's own children, related children and unrelated children under age 12 living in the home.

b) A Caregiver Alone. A caregiver alone may care for:

1) A mixed age group consisting of:
   A) Up to 8 children under the age of 12, of which
   B) Up to 5 children may be under the age of 5, of which
   C) Up to 3 children may be under 24 months of age.

2) A mixed age group consisting of:
   A) Up to 8 children under the age of 12, of which
   B) Up to 6 children may be under the age of 5, of which
   C) Up to 2 children may be under 30 months of age.

3) A school age group consisting of 8 school age children, as defined in Section 406.2.

c) Caregiver and an Assistant under 18 Years of Age

1) A caregiver and an assistant under age 18 may care for:
   A) One of the groupings in subsection (b) and 4 additional children who are attending school full-time; or
   B) A total of 8 children under 5 years of age, of which up to 5 children may be under 24 months of age.

2) When a licensee or permit holder has been granted the extended 4 school-age capacity addendum in writing, a caregiver's own full-time school age children may be counted in the additional 4 school-age children provided that when there are more than 8 children in care, a qualified assistant is present.

3) Care provided for the additional before and after school children is limited to children who attend school full-time and to before and/or after school, holidays, weekends, during unforeseen school closings, when the provider's own children come home sick, and during the summer.
d) A Caregiver and an Assistant 18 Years of Age or Older

1) A caregiver and an assistant 18 years of age or older may care for:

   A) The groupings in subsection (b), and 4 additional children who are
      attending school full-time; or

   B) Eight children under 5 years of age, of which up to 5 children may be
      under 24 months of age, and 4 additional children who are attending
      school full-time.

2) When a licensee or permit holder has been granted the extended 4 school-age
   capacity addendum in writing, a caregiver's own full-time school age children
   shall be counted in the additional 4 school-age children provided that, when
   there are more than 8 children in care, a qualified assistant is present.

3) Care provided for the additional before and after school children is limited to
   children who attend school full-time and to before and/or after school,
   holidays, weekends, during unforeseen school closings, when the provider's
   own children come home sick, and during the summer.

e) The maximum number of children receiving night care shall be 8 children and the
   groupings shall be consistent with subsections (b) and (c).

f) Any children under age 12 living in the home who are receiving home schooling
   shall be counted in the maximum of 8 children in subsections (b), (c), and (d), unless
   another parent or caregiver is providing the schooling apart from the day care area
   and the caregiver has no responsibility for care or supervision or schooling of the
   children during the hours home day care is provided.

g) In the event of a brief unforeseen school closing, the caregiver may accept one
   additional school-age child and still be considered in compliance with the capacity
   requirements, as long as the total number of children under age 12 in the home does
   not exceed the maximum of 12 children. The caregiver shall maintain a record of the
   dates, names and ages of the children for whom this care was provided.

h) When the acceptance of siblings of children who are already in care will place the
   licensee out of compliance with the established age groupings, the licensee may
   develop a transition plan that shall be submitted to the licensing representative for
   review and approval. The plan may be approved when:

   1) The licensee is not currently operating under a transition plan and is in full
      compliance with all the licensing standards;

   2) At least one of the siblings has been in care for 30 days or more; and

   3) The transition plan will bring the home back into compliance with the
      established age groupings within 6 months after the date the plan is approved.

(Source: Amended at 37 Ill. Reg. 19127, effective November 30, 2013)
Section 406.14 Health, Medical Care and Safety

a) The caregiver shall conduct a daily, pre-admissions screening to determine if the child has obvious symptoms of illness. If symptoms of illness are present, the caregiver shall determine whether to provide care for the child, depending upon the apparent degree of illness, other children present, and facilities available to provide care for the ill child.

b) Children with diarrhea and those with a rash combined with fever (oral temperature of 101 degrees Fahrenheit or higher or under the arm temperature of 100 degrees Fahrenheit or higher) shall not be admitted to the day care home while these symptoms persist, and shall be removed as soon as possible should these symptoms develop while the child is in care.

c) A medical report, on forms prescribed by the Department, shall be on file for each child, on the first day of care, and shall be dated no earlier than 6 months prior to enrollment.

1) The medical report shall be valid for 2 years, except that subsequent examinations for school-age children shall be in accordance with the requirements of Section 27.8-1 of the School Code [105 ILCS 5/27-8.1], provided copies of the exam are on file at the facility.

2) If the child is in a high risk group, as determined by the examining physician, a tuberculin skin test by the Mantoux method and the results of that test shall be included in the initial examination for all children who have attained one year of age, or at the age of one year for children who are enrolled before their first birthday. The tuberculin skin test by the Mantoux method shall be repeated when the children in high-risk groups begin elementary and secondary school.

3) The initial examination shall show that children from 6 months through 6 years of age have been screened for lead poisoning for children residing in an area defined as high risk by the Illinois Department of Public Health in its Lead Poisoning Prevention Code (77 Ill. Adm. Code 845) or that a lead risk assessment has been completed for children residing in an area defined as low risk by the Illinois Department of Public Health.

4) The report shall indicate that the child has been immunized as required by the rules of the Illinois Department of Public Health for immunizations (77 Ill. Adm. Code 695). These required immunizations are poliomyelitis, measles, rubella, diphtheria, mumps, pertussis, tetanus, hepatitis B, haemophilus influenza B, and varicella (chickenpox) or provide proof of immunity according to requirements in Part 695.50 of the Department of Public Health.
5) In accordance with the Child Care Act of 1969, a parent may request that immunizations, physical examinations, and/or medical treatment be waived on religious grounds. A request for such waiver shall be in writing, signed by the parent, and kept in the child's record.

6) Exceptions made for children who for medical reasons should not be subjected to immunizations or tuberculin tests shall be so indicated by the physician on the child's medical form.

d) A child suspected of having or diagnosed as having a reportable infectious, contagious, or communicable disease for which isolation is required by the Illinois Department of Public Health's General Procedures for the Control of Communicable Diseases (77 Ill. Adm. Code 690.1000) shall be excluded from the home until the Illinois Department of Public Health or local health department authorized by it states, in writing, that the communicable, contagious or infectious stage of the disease has passed and that the child may be re-admitted to the day care home.

e) Necessary medications shall be administered according to specific written instructions provided by the child’s parents or guardians.

1) Prescription medicine labels must bear the child's name, the physician's name, the name of the drug store or pharmacy, prescription number, date of the prescription, and directions for administering.

2) Non-prescription medication may be administered upon written parental permission that specifies the duration and frequency of medication. Such medication shall be administered in accordance with package instructions, and, except for aspirin and aspirin substitutes, shall be labeled with the child's name and dated.

3) There shall be a signed statement by the child's parent or guardian giving permission to the caregiver to administer medication to the child.

4) The caregiver shall maintain a record of the dates, hours and dosages that are given.

5) Medication shall be returned to the parents when it is no longer required. Additionally, medication provided for a child no longer cared for in the facility and medication that has reached its expiration date shall be destroyed.

6) Medical services, such as direct medical care to the child, shall be administered as required by a physician, subject to the receipt of appropriate releases from parents.
f) In order to reduce the risk of infection or contagion to others, space must be provided in the day care home for the isolation and observation of a child who becomes ill. An ill child shall be provided a bed or cot away from other children and a caregiver or assistant shall supervise the child at all times he/she is in the home.

g) When a day care home admits ill or injured children, a plan for the care of such children must be agreed upon with the parents to assure that the needs of the children for rest, attention, personal care and administration of prescribed medication are met. No child requiring exclusion from the home in accordance with 77 Ill. Adm. Code 690 may be admitted.

h) Personal hygiene standards, such as the following, shall be observed:

1) Each child shall be provided with an individual towel, washcloth, and drinking cup. Single-use, disposable articles are acceptable.

2) A separate sleeping arrangement, such as a bed, cot, crib, or playpen, with individual bedding, shall be provided for each child who naps or sleeps while in care. A twin size bed may be used for 2 children under age 4, provided each child shall have individual sheets.

   A) The bed shall be kept in a clean and sanitary condition at all times, and bedding shall be suitable for the season.

   B) Family beds may be used for children if separate linens are used.

   C) Rubber sheets shall be used when necessary.

3) The caregiver shall require parents to supply clothing suitable to weather conditions, as well as a complete change of clothing in case of need.

4) Caregivers and children shall use soap and running water to wash their hands before meals, after toileting, after diaper changing, and after contact with respiratory secretions. Hand sanitizers or diaper wipes are not an acceptable substitute for soap and running water. Caregivers shall always supervise children’s hand washing to ensure that children are not scalded by hot water.

5) Open cuts, sores or lesions on caregivers or children shall be covered.

6) Caregivers shall wash their hands with soap and water prior to food preparation and after any physical contact with a child during food preparation. Hands shall be dried using single-use towels.

7) Sheets shall be changed when soiled and at least weekly.

8) Clothing soiled due to toilet accidents shall be changed immediately.
i) Caregivers shall take reasonable measures to reduce the spread of communicable disease among children in the facility by observing such procedures as:

1) Using only washable toys with diapered children;
2) Washing washable toys at least once per day;
3) Cleaning facility-provided stuffed toys;
4) Washing toys mouthed by one child before they are used by another child; and
5) Washing pacifiers and other items placed in the mouth if dropped to the floor or ground.

j) There shall be an emergency plan for each child in case of accident or sudden illness.

1) The caregiver shall have available at all times the name, address, and telephone number where the child's parents or guardian, relative, friend, or physician, and the Department can be reached.
2) There shall be a planned source of readily available emergency medical care: a hospital emergency medical room, clinic, or the child's physician.
3) When the caregiver accompanies a child to the source of emergency care, an adult who meets the standards prescribed by Section 406.11 must assume supervision of other children in the home.
4) In case of illness or accident, the parent, guardian, or supervising agency responsible for the child shall be notified immediately, and the child shall be removed from the home as soon as possible.

k) Children shall be supervised at all times. All children in the home shall be protected from exploitation, neglect, and abuse.

(Source: Amended at 30 Ill. Reg. 18280, effective November 13, 2006)
Section 406.15 Guidance and Discipline

a) The caregiver shall use disciplinary measures designed and carried out in such a way as to help individual children develop self-control and assume responsibility for their own acts.

1) The caregiver shall establish simple, understandable rules so that expectations and limitations are clear to the child.

2) Discipline shall not be out of proportion to the particular inappropriate behavior.

3) Discipline shall be related to the child's act and shall be handled immediately by the adult involved so the child is aware of the relationship between acts and consequences.

4) Removal from the group to help a child gain control shall not exceed one minute per year of age. Removal from the group shall not be used for children less than 24 months of age.

b) No child shall be subjected to extreme punishment.

1) No child shall be subjected to physical punishment, nor can shaming, frightening, or humiliating methods be used.

2) There shall be no verbal abuse, threats, or derogatory remarks about the child or the child's family.

3) Depriving a child of meals or any part of meals shall never be used as punishment.

4) No child shall be punished for toilet accidents.

c) Expulsion due to a child's repeated pattern of challenging behavior is prohibited. Planned transitions to settings better able to meet the child's needs are not considered expulsions.

(Source: Amended at 44 Ill. Reg. 16116, effective September 18, 2020)
LICENSING STANDARDS FOR DAY CARE HOMES
October 25, 2020 – Updated pursuant to 2021.11 IT

Section 406.16  Activity Requirements

a) The caregiver and parent shall discuss the child's health, development, behavior and activities to ensure consistency in planning for the child.

b) The daily activities shall be well-balanced and geared to the needs of the children served.

1) The activities shall be informal, providing a family atmosphere that promotes the physical and emotional well-being of the individual.

2) Children shall be encouraged to participate in age appropriate household routines such as preparing food, setting tables, and cleaning up.

3) Regularity in routines such as, but not limited to, eating, napping, and toileting, with sufficient flexibility to respond to the needs of the individual shall be provided.

4) A balance of active and quiet play shall be provided.

5) There shall be activities, both indoors and outdoors, in which children make use of both large and small muscles.

6) There shall be a variety of chores and activities at the child's developmental level.

7) Each child's individuality shall be respected and a sense of self and development of self esteem shall be encouraged.

8) Children shall not be left unattended and supervision shall be provided at all times.

c) The materials and equipment and their arrangements and use must be appropriate to the developmental needs of the children in care. The day care home may not use or have on the premises any unsafe children's product as described in the Children's Product Safety Act and 89 Ill. Adm. Code 386 (Children's Product Safety).

1) Simple play equipment, suitable to the age and developmental needs of the children, shall be available for use indoors and outdoors.

2) Materials and toys shall be kept clean, orderly, attractive, and accessible to the children.

3) There shall be stimulating play and learning materials; these may include household items used creatively.

4) Materials and equipment must be of sufficient quantity to provide for a variety of experiences and to appeal to the individual interests of the children under care.

(Source Amended at 34 Ill. Reg. 18358, effective December 15, 2010)
Section 406.17 Nutrition and Meals

a) Food requirements for children between birth and the age of eating table food shall be geared to the individual needs of the child and determined by consultation with the parents. The facility shall provide one-third to two-thirds of the daily nutritional requirements, depending on the length and time of day of the child’s stay. The main meal shall be nutritionally balanced conforming to age appropriate portions and variety as reflected in the Meal Pattern Charts, Appendices A and B.

b) Children one year of age and older in attendance for more than 2 but less than 5 hours shall be served a mid-session snack consisting of one-half cup of pure fruit juice or full-strength canned or frozen fruit juice that contains at least 30 milligrams of Vitamin C per serving, or one to one-half cup of pasteurized milk, or one serving of citrus fruit.

c) Children one year of age and older in attendance 5 to 10 hours shall be served at least one-third of their daily food requirements, which shall include a well-balanced, nutritive meal. Occasional picnic-type meals may be substituted for a main meal. Mid-morning and mid-afternoon snacks consisting of fruit, fruit juice, or pasteurized milk (as prescribed under subsection (c)) shall be included. Children in attendance for over 10 hours shall be served food to provide at least two-thirds of their daily food requirements. Two meals and the supplemental snacks will meet this requirement. One of the meals may be breakfast or supper, depending on the time the child arrives or departs.

d) Children under one year of age who are no longer drinking formula or breast milk shall be served whole milk unless low-fat milk is requested by the child’s physician.

e) Children shall be served small servings of bite-size pieces.

f) All meals shall be suitable for children and prepared by methods designed to conserve nutritive value, flavor, and appearance.

g) Children under 2 years of age shall not be fed whole berries, hard candies, raisins, corn kernels, raw carrots, whole grapes, hot dogs, nuts, seeds, popcorn, or raw peas, as these foods may cause choking.

h) Cooked carrots, corn, peas and bananas may be served to infants only if mashed, grated or pureed.
i) Hot dogs and raw carrots may be served to children between 2 and 3 years of age only if cut into short, thin strips. Up to 3 tbsp. of peanut butter may be served to children ages 3 through 5 if thinly spread on bread, crackers or other foods or if mixed with other foods.

j) The caregiver may allow meals and snacks to be provided by the parent or legal guardian upon written agreement between the parent and caregiver.

1) Food brought into the facility shall have a label showing the child's name, the date, and the type of food.

2) Potentially hazardous and perishable foods shall be refrigerated properly, and all foods shall be protected against contamination.

3) Meals and snacks provided by the parent or legal guardian for his or her own children shall not be shared with other children.

4) The caregiver shall inform the parent or legal guardian of the nutritional requirements of this Part.

5) The caregiver shall have food available to supplement a child's food brought from home if that food is deficient in meeting the nutrient requirements of this Part.

k) Drinking water shall be readily available to the children at all times.

l) Mealtimes shall be pleasurable experiences for the child.

1) There shall be enough time allowed for meals so the children can eat in an unhurried atmosphere.

2) Children shall be encouraged but not forced to try new foods.

3) Information provided by parents concerning the child's eating habits, food preferences, or special needs should be considered in planning menus.

4) Food preferences and eating habits shall not be permitted to become a source of friction at mealtimes.

5) Mealtimes should occur in a social atmosphere and afford children the close presence of an attentive adult.

(Source: Amended at 32 Ill. Reg. 9137, effective June 20, 2008)
Section 406.18 Transportation of Children By Day Care Home

a) Children may be transported only when the child/adult ratios in accordance with Section 406.13 are maintained and the person transporting is 18 years of age or older and has a valid driver’s license for the vehicle classification being used.

b) Caregivers shall be responsible for assuring the safe transport of children.

c) Each child shall be individually fastened into a suitable infant or child restraint device whenever the vehicle is in motion. The restraint shall be federally approved and labeled as such and used in accordance with the manufacturer’s instructions. This requirement shall not apply to a child for whom a physician has certified, in writing, that the child has a physical handicap that prevents wearing an appropriate restraint device.

d) While transporting children, the driver shall be responsible for seeing that:

1) Each child shall board or leave the vehicle from the curb side of the street, and shall be safely conducted to the home or facility.

2) A responsible person as designated by the child's parents or guardian shall receive the child when delivered to the home or the facility.

e) No child shall be left unattended in a vehicle.

f) The vehicle shall be safely equipped and the caregiver shall comply with State and local laws pertaining to vehicles.

1) The vehicle shall be equipped in accordance with requirements of the Illinois Vehicle Equipment Law [625 ILCS 5/Ch. 12] and local vehicle safety ordinances.

2) Evidence of compliance regarding vehicle liability and medical insurance shall be on file with the home records. Evidence may consist of, but is not limited to, a copy of an insurance policy, binder or certificate, or a letter from the insurance carrier.

3) The vehicle shall be equipped with safety locking devices on doors and shall be maintained in a mechanically safe condition at all times.

(Source: Amended at 25 Ill. Reg. 5714, effective April 1, 2001)
Section 406.19  Swimming

a) Swimming activities shall be supervised for safety.

b) All children must be directly supervised (caregiver physically present with the children) at all times when children are wading or swimming.

c) A second adult shall be available to supervise any children not swimming.

Section 406.20  Children with Special Needs

a) Children identified as having special needs shall have activities relating to those needs that are planned with parents and/or consultants.

b) There shall be suitable space and equipment so that the child can function as safely and independently as possible.

   1) Areas of the home shall be adapted as necessary if special devices are required for the child to function independently.

   2) Space needs shall be determined by considering such factors as age and size of the child, activity recommendation, and ambulation problems.

c) In determining license capacity, children who have special needs due to physical, mental, and/or emotional disabilities shall be considered at the age level at which they function. The age level at which the child functions for purposes of determining child/staff ratios shall be determined by the supervising agency in consultation with personnel involved in providing care or services for the child.

Section 406.21  School Age Children

a) A day care home receiving children within the school age range shall comply with the standards for day care homes except when inconsistent with the special requirements in this Section.

b) Programs and activities that meet the developmental needs of school age children shall be provided.

   1) Outdoor and indoor activities shall be provided.

   2) Children who have been in school all day shall have time set aside for relaxation and recreation.

   3) There shall be opportunity for study in a quiet area.
4) Children shall be able to participate in after school activities sponsored by the school upon written permission from the parent(s).

5) Age appropriate materials shall be provided, including, but not limited to: puzzles, games, books, art supplies.

c) Nutritional needs shall be fulfilled.

1) A snack shall be served when children arrive at the home after school in accordance with Section 406.17(c).

2) Children who come to the home from school for lunch shall be served a nutritionally balanced meal in accordance with Section 406.17(c).

d) Areas of responsibility shall be clearly established and agreed to in writing between parent, school, and caregiver including, but not limited to:

1) Children leaving the day care home to go to school.

2) Children leaving school to go home.

3) Children leaving the day care home for any reason.

4) Children participating in after school activities or visiting friends.

Section 406.22 Children Under 30 Months of Age

a) Children under 30 months of age shall not be permitted in bathrooms, kitchens, or other hazardous areas without the caregiver or assistant present.

b) To minimize the risk of Sudden Infant Death Syndrome, children shall be placed on their backs when put down to sleep.

1) When the infant cannot rest or sleep on his/her back due to a disability or illness, the caregiver shall have written instructions, signed by a physician, detailing an alternative safe sleep position and/or special sleeping arrangements for the infant. The caregiver shall put the infant to sleep in accordance with a physician's written instructions.

2) When an infant can easily turn over from the back to tummy position, the infant shall be put down to sleep on his/her back, but allowed to adopt whatever sleeping position the infant prefers.

3) Infants unable to roll from their stomachs to their backs, and from their backs to their stomachs, when found facedown, shall be placed on their backs.
4) No infant shall be put to sleep on a sofa, soft mattress, car seat or swing.

5) When an infant is awake, the infant shall be placed on his/her tummy part of the time and observed at all times.

c) Children under 30 months of age shall be provided a daily program that is designed to meet their needs.

1) The caregiver shall demonstrate warm, positive feelings toward each child through actions such as hugging, patting, smiling, and cuddling.

2) Routines such as naps and feedings shall be discussed with the parents and shall be consistent with the child's routine at home.

3) Non-mobile children who are awake shall be moved to different positions and shall be held, rocked, and carried about.

4) The caregiver shall frequently change the place, position, and toys available for children who cannot move about the room.

5) Consistent toilet training shall be undertaken at a time mutually agreed upon by parent and caregiver in accordance with the child's age and/or stage of development.

6) Children shall be taken outdoors for a portion of every day, when weather permits, except when the child is ill or unless indicated otherwise by parent or physician.

d) Feeding schedules and procedures shall meet the developmental needs of the children.

1) Flexible feeding schedules of children shall be established to coordinate with parents' schedules at home and to allow for nursing.

2) Infants shall either be held or be fed sitting up for bottle feeding. Infants unable to sit shall always be held for bottle feeding. When infants are able to hold their own non-glass bottles, they may feed themselves without being held. The bottle must be removed when the child has fallen asleep. Bottle propping and carrying of bottles by young children throughout the day/night shall not be permitted.

3) Bottles shall never be warmed or defrosted in a microwave oven.

4) Children shall be allowed and encouraged to feed themselves when they indicate a readiness to do so.

5) Safe finger foods such as those that dissolve in the mouth may be provided.
Proper standards of hygiene shall be observed in the home.

1) Hands shall be washed with soap and running water and dried before the feeding of each child.

2) Formula brought in by the parent shall be labeled and placed in the refrigerator.

3) All utensils shall be washed after each use.

4) Foods stored or prepared in jars shall be served from a separate dish for each child. Any leftovers from the serving dish shall be discarded. Leftovers in the jar shall be labeled with the child's name, dated, refrigerated, and served within 24 hours or discarded.

5) A toilet shall be easily accessible so that the contents of reusable diapers may be disposed of before placing the diapers in the diaper pail. Disposable diapers and their contents shall be disposed of in accordance with the manufacturer's instructions.

6) Persons changing diapers shall wash hands under running water with soap after each change of diaper. Hands shall be dried with single-use towels. Additionally, disposable, non-permeable gloves shall be worn when changing a child who has watery or bloody stools.

7) The child whose diaper is being changed is to be washed on the hands and anal area if there has been defecation or if irritation is present.

8) Children who are not toilet trained shall be diapered in their own cribs, at a central diapering area on a surface that is disinfected after each use, or on a disposable paper sheet that is disposed of after each diapering.

9) The toilet seat, if soiled, or potty shall be cleaned with germicidal solution (see subsection (f)) after every use.

10) Soiled diapers shall be changed promptly.

11) Sheets shall be changed when soiled, and all sheets shall be changed routinely 2 times per week.

12) All beds shall be wiped clean as often as necessary.

13) Toys and equipment shall be kept clean.
f) A germicidal solution of ¼ cup household chlorine bleach to one gallon of water (or one tablespoon bleach to one quart of water) or other germicidal solution approved by the Centers for Disease Control and Prevention shall be used to clean surfaces soiled by blood or body fluids. The bleach solution shall be made fresh daily.

g) The equipment must be appropriate to the developmental needs of the children in care.

1) Safe, sturdy, well-constructed individual cribs, playpens, or port-a-cribs for infants shall be equipped with good firm, fitting mattresses made of waterproof materials that can be washed. Washable cots may be used for children 15 months of age and over.

2) Sleeping equipment for children under 15 months must have protection to prevent falls.

3) There shall be no more than 1½ inches of space between the mattress and bed frame when the mattress is pushed flush at one corner of the crib.

4) No positioning device that restricts movement within the child's bed shall be used without written instructions from the child's physician. Soft bedding, bumpers, pillows, quilts, comforters, sheepskins, stuffed toys, laundry and other soft products shall be removed from the crib when children are napping or sleeping. If using a blanket, put the child with feet at the foot of the crib. Tuck a thin blanket around the crib mattress, reaching only as far as the child's chest.

5) Bed linens used on the cots, cribs, or playpens shall be safe, tightly fitting, and washable.

6) Conveniently located, washable, plastic-lined covered receptacles shall be provided for soiled diapers and linens.

7) A toilet seat or potty shall be provided.

h) The materials must be appropriate to the developmental needs of the child in care.

1) Provision shall be made for an adequate supply of individual diapers, clothing, powder, oil, etc.

2) There shall be a variety of toys and art materials for children under 30 months of age to observe, grasp, pick up, and manipulate.

3) Pull toys, pounding toys, large hollow blocks, or large balls shall be available for development of large muscles.

4) Mobile walkers are prohibited. Stationary exercisers may be used.
i) Equipment and play materials shall be durable and free from characteristics that may be hazardous or injurious to children under 30 months of age. Hazardous or injurious characteristics include sharp, rough edges; toxic paint; and objects small enough to be swallowed.

(Source: Amended at 32 Ill. Reg. 9137, effective June 20, 2008)

Section 406.23 Night Care

a) A day care home receiving children for night care shall comply with the standards prescribed for day care homes in addition to the special requirements prescribed in this Section.

b) A child is considered enrolled in evening and/or night care when a majority of his or her time at the day care home occurs between 6:00 p.m. and 6:00 a.m.

c) The child shall be bathed, if needed.

d) No child under 5 years of age is to be left unattended while in the bathtub.

e) Each child must have individual sleeping garments that are clean and comfortable.

f) An individual bed, crib, or cot and individual linen and bedding shall be provided for each child except as provided in this subsection (f):

1) A double bed shall be the minimum size for sleeping 2 non-enuretic children of the same sex.

2) Rubber sheets or suitable substitutes shall be supplied when necessary.

3) If a crib is used there shall be no more than 1½ inches of space between the mattress and bed frame when the mattress is pushed flush at one corner of the crib.

4) Unrelated children over 4 years of age may not share a bedroom over night with children of the opposite sex.

g) Caregivers and children receiving night care shall sleep on the same floor (level) of the residence.

h) If the day care home receives children for night-time care, the caregiver may sleep while children are present if the caregiver and the children sleep on the same floor (level) of the residence and the children’s bedrooms are within hearing distance of the caregiver’s bedroom to provide for the needs of the children and to respond immediately in an emergency.

i) A basement area may be used for sleeping or napping if it has been approved in accordance with Section 406.8(a)(7).
j) A room above the first floor may be used for sleeping or napping if the room has 2 exits with one exit leading directly to the outside with means to safely reach the ground level.

k) There shall be a night light or other mechanism to illuminate hallways leading to stairs and/or the restroom.

l) A child who goes to school from a day care home providing night care shall be clean and properly dressed according to the weather.

m) Each child shall have individual toilet articles such as comb, toothbrush, towel, and washcloth.

n) Health care routines at bedtime and/or upon rising shall include:
   1) Brushing teeth at bedtime and upon rising.
   2) Brushing or combing the hair upon rising.
   3) Establishing a routine for toileting at bedtime and upon rising.

o) When possible, children shall be left for care and picked up either before or after their normal sleeping period so that there is minimum disturbance of the children during sleep.

p) The day care home shall serve meals and snacks that supplement food served at home as prescribed in Section 406.17.
   1) An evening meal that meets nutritional requirements shall be served at a regular time each evening and shall be available to children who may arrive without having first eaten.
   2) A bedtime snack shall be served, unless contraindicated by parents or physician in accordance with Section 406.17(c).
   3) Children who remain overnight and go to school directly from the day care home shall have breakfast, including juice or fruit, unless they are receiving breakfast at school.

(Source: Amended at 27 Ill. Reg. 19180, effective December 15, 2003)
Section 406.24 Records and Reports

a) Records as required by this Part shall be maintained and available for review by the Department.

b) Information about the child and family shall be confidential as required by Section 406.25.

c) There shall be a record of identifying information as required in Section 406.12(b)(3) on each child received at the time the child is accepted into the home.

d) A medical report for each child, on forms provided by the Department, shall be maintained at the facility, dated no earlier than 6 months prior to enrollment, and signed by the examining physician, an advanced practice nurse who has a written collaborative agreement with a collaborating physician that authorizes the advance practice nurse to perform health examinations, or a physician assistant who has been delegated the performance of health examinations by the supervising physician; or certified by a recognized health facility.

1) The medical report shall be valid for 2 years except that subsequent exams for school age children shall be in accordance with the Illinois School Code requirements, provided that copies of the exam are on file at the facility.

2) If a child is in a high risk group, as determined by the examining physician, a tuberculin test shall be included in the initial exam and when the child enters elementary and secondary school.

3) The reports shall indicate that the child has been immunized as required by Rules and Regulations of the Illinois Department of Public Health for immunizations. These required immunizations are poliomyelitis, measles, rubella, diphtheria, mumps, pertussis, tetanus, hepatitis B, haemophilus influenza B, and varicella (chickenpox) or provide proof of immunity according to requirements in 77 Ill. Adm. Code 695.50 of the Department of Public Health.

4) The report shall include a statement on any physical limitations.

5) Exceptions made for children who for medical reasons should not be subjected to immunizations or a tuberculin test shall be so indicated by the physician on the child's medical form.

e) There shall be signed consent forms from the parent or guardian including:

1) Permission for emergency medical care and treatment if the parent is not readily available.

2) Permission to administer medication, if applicable.

3) Permission for someone other than parent or guardian to pick up child if necessary.
LICENSING STANDARDS FOR DAY CARE HOMES
October 25, 2020 – Updated pursuant to 2021.11 IT

4) Visits, trips or excursions off the premises.
5) Transportation provided by caregiver and caregiver assistant, if applicable.
6) Permission to use the facility's swimming pool, if applicable.

f) The caregiver shall distribute a summary of the licensing standards, provided by the Department, to the parents or guardian of each child at the time that the child is accepted for care in the home. In addition, consumer information materials provided by the Department, including, but not limited to, information on reporting and prevention of child abuse and neglect and preventing and reporting communicable disease, shall be distributed to the parents or guardian of each child cared for when designated for such distribution by the Department. Each child's record shall contain a statement signed by the child's parents or guardian, indicating that they have received a summary of licensing standards and other materials designated by the Department for such distribution.

g) When the licensed day care home is cited for one or more substantiated violations of licensing standards by the supervising agency, the caregiver shall prominently display in the home the list of violations and the corrective plan, on a form provided by the supervising agency. The caregiver shall keep the form posted until a licensing representative has verified in writing that every violation on that form has been corrected.

h) In accordance with the Child Care Act of 1969, a parent may request that immunizations, physical examinations, and/or medical treatment be waived on religious grounds. A request for waiver shall be in writing, signed by the parent, and kept in the child's record.

i) Members of the household, regular substitutes, and assistants shall have a complete physical examination. The medical reports shall be submitted on forms provided by the Department.

1) The report shall be based on an examination that occurred no earlier than 6 months prior to application, with a tuberculin test to be included in the initial exam only. If the skin test is positive, a chest x-ray is required.

2) Immunizations and the tuberculin test for an infant shall be given at the discretion of the physician.

3) The caregivers and assistants shall be found free of communicable diseases and shall be physically and emotionally fit to care for young children.

j) The medical report for caregivers, regular substitutes, and assistants shall be valid for 3 years.

k) Evidence of freedom from communicable disease or illness may be required at any time for members of the household, regular substitutes and assistants.
Suspected child abuse and/or neglect shall be reported immediately to the Child Abuse/Neglect Hotline as required by the Abused and Neglected Child Reporting Act. The telephone number for the reporting hotline is 1-800-252-2873.

The licensee and each staff person shall sign a statement prescribed by the Department acknowledging his or her status as a mandated reporter of child abuse or neglect under the Abused and Neglected Child Reporting Act and acknowledging he or she has knowledge and understanding of the reporting requirements under that Act. The statement shall be signed and dated by the staff person prior to employment, and shall be maintained by the licensee.

The supervising agency shall be notified immediately by telephone, and in writing within one week, if any of the following situations involving children occurs at the facility:

1) Accident or injury resulting in death or requiring emergency medical care;
2) A child is missing from the day care home; or
3) Notice is received of legal action against the facility.

The facility shall promptly report any known or suspected case or carrier of communicable disease to the supervising agency and to local health authorities, and shall comply with the Illinois Department of Public Health's rules for the Control of Communicable Diseases (77 Ill. Adm. Code 690).

The supervising agency shall be notified immediately by telephone, and in writing within one week, of fires or other incidents resulting in structural damage to the day care home. A supervisory visit will be conducted by the supervising agency to determine the safety of the licensed premises in conformance with the other provisions of this Part.

The licensee shall notify the supervising agency within one week, in writing, of any changes to the household composition. Changes that require notification include the addition of any new person into the home, the return of any former household member, or the departure of any household member.

The licensee shall keep a record of dates and hours worked by the substitute caregiver while the licensee is absent from the day care home per Section 406.11(a).

The licensee shall maintain records required for fire safety in accordance with Section 406.8. Fire safety records include monthly fire drill reports, monthly fire safety inspections conducted by the licensee, and the log of daily inspections by the licensee to ensure that exit routes are kept clear.

(Source: Amended at 34 Ill. Reg. 18358, effective December 15, 2010)
Section 406.25 Confidentiality of Records and Information

a) The caregiver shall respect the confidential nature of the child and family records.

b) Information pertaining to the admission, progress, health, or discharge of an individual child shall be confidential and limited to authorized representatives of the supervising agency, the Department, caregivers and assistants unless the parent(s) of the child has granted written permission for its disclosure or dissemination.

1) The facility shall have confidentiality release forms signed by the parents which specifies to whom information may be released and how long the release form is valid. Such release forms shall be on file at the facility prior to release of information.

2) If information is requested by outside persons or agencies, a specific written request signed by the person requesting the information shall be obtained and placed on file at the facility prior to the release of confidential information.

3) Except in extreme emergency or when there is evidence of child abuse, any child 12 years of age or older must be informed of such disclosure of information.

Section 406.26 Cooperation with the Department

a) Authorized representatives of the supervising agency or the Department shall be admitted to the facility during the facility's hours of operation for the purpose of determining compliance with the Child Care Act of 1969 and standards set forth in this Part.

b) Licensed providers are subject to periodic monitoring as long as the license is valid, whether or not child care is actually being provided.

(Source: Amended at 27 Ill. Reg. 19180, effective December 15, 2003)

Section 406.27 Severability of This Part

If any court of competent jurisdiction finds that any rule, clause, phrase, or provision of this Part is unconstitutional or invalid for any reason whatsoever, this finding shall not affect the validity of the remaining portions of this Part.
Appendix A  Meal Pattern Chart for Children 0-12 Months

Section 406. APPENDIX A: MEAL PATTERN CHART FOR CHILDREN 0-12 MONTHS OF AGE

<table>
<thead>
<tr>
<th>MEAL</th>
<th>Ages 0-4 Months</th>
<th>Ages 4-8 Months</th>
<th>Ages 8-12 Months</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Ages 0-4 Months</td>
<td>Ages 4-8 Months</td>
<td>Ages 8-12 Months</td>
</tr>
<tr>
<td>BREAKFAST</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Infant Formula (iron fortified)</td>
<td>4 – 6 ounces</td>
<td>6 – 8 ounces</td>
<td>6 – 8 ounces*</td>
</tr>
<tr>
<td>Infant Cereal (iron fortified)</td>
<td>0</td>
<td>1 – 3 tablespoons</td>
<td>2 – 4 tablespoons</td>
</tr>
<tr>
<td>SNACK (Supplement)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Infant Formula (iron fortified)</td>
<td>4 – 6 ounces</td>
<td>2 – 4 ounces</td>
<td>2 – 4 ounces</td>
</tr>
<tr>
<td>or full strength fruit or whole fluid milk</td>
<td>0</td>
<td>2 – 4 ounces</td>
<td>2 – 4 ounces</td>
</tr>
<tr>
<td>Enriched or whole-grain bread or cracker-type product (suitable for infants)</td>
<td>0</td>
<td>0 – ¼ slice**</td>
<td>0 – ¼ slice**</td>
</tr>
<tr>
<td>or 0</td>
<td>0 – 2 crackers**</td>
<td>0 – 2 crackers**</td>
<td></td>
</tr>
<tr>
<td>LUNCH OR SUPPER</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Infant Formula (iron fortified)</td>
<td>4 – 6 ounces</td>
<td>6 – 8 ounces</td>
<td>6 – 8 ounces*</td>
</tr>
<tr>
<td>Infant Cereal (iron fortified)</td>
<td>0</td>
<td>1 – 2 tablespoons</td>
<td></td>
</tr>
<tr>
<td>strained fruit and/or vegetable (to total)</td>
<td>0</td>
<td>1 – 2 tablespoons</td>
<td>3 – 4 tablespoons</td>
</tr>
<tr>
<td>Strained meat, fish, poultry, or egg yolk, or cheese</td>
<td>0</td>
<td>0 – 1 tablespoon**</td>
<td>1 – 4 tablespoons</td>
</tr>
<tr>
<td>or cheese</td>
<td>0</td>
<td>0 – ½ ounce**</td>
<td>½ – 2 ounces</td>
</tr>
<tr>
<td>or cottage cheese, cheese food, or cheese spread</td>
<td>0</td>
<td>0 – 1 ounce**</td>
<td>1 – 4 ounces</td>
</tr>
</tbody>
</table>

* or 6 – 8 ounces of whole milk and 0 – 3 ounces of full strength fruit juice.
** These items are suggested, not required. Parents should ask their doctor if they have questions about what their baby should eat.
### Section 406.APPENDIX B
MEAL PATTERN CHART FOR CHILDREN OVER ONE YEAR OF AGE

<table>
<thead>
<tr>
<th></th>
<th>BREAKFAST Ages</th>
<th>LUNCH/SUPPER Ages</th>
<th>6 and older¹</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MILK</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Milk, fluid</td>
<td>½ cup²</td>
<td>¾ cup</td>
<td>1 cup</td>
</tr>
<tr>
<td></td>
<td>½ cup²</td>
<td>¾ cup</td>
<td>1 cup</td>
</tr>
<tr>
<td><strong>VEGETABLES AND FRUITS³</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vegetables(s) and/or fruit(s) or</td>
<td>¼ cup</td>
<td>½ cup</td>
<td>½ cup total</td>
</tr>
<tr>
<td></td>
<td>¼ cup total</td>
<td>½ cup total</td>
<td>¼ cup total</td>
</tr>
<tr>
<td>Full-strength vegetable or fruit</td>
<td>¼ cup</td>
<td>½ cup</td>
<td>½ cup</td>
</tr>
<tr>
<td>juice or an equivalent quantity</td>
<td>¼ cup</td>
<td>½ cup</td>
<td>½ cup</td>
</tr>
<tr>
<td>of any combination of vegetable</td>
<td>¼ cup</td>
<td>½ cup</td>
<td>½ cup</td>
</tr>
<tr>
<td>(s), fruit(s), and juice</td>
<td>¼ cup</td>
<td>½ cup</td>
<td>½ cup</td>
</tr>
<tr>
<td></td>
<td>¼ cup</td>
<td>½ cup</td>
<td>½ cup</td>
</tr>
<tr>
<td><strong>BREAD AND BREAD ALTERNATES³</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bread or Cornbread, biscuits,</td>
<td>½ slice</td>
<td>½ slice</td>
<td>½ slice</td>
</tr>
<tr>
<td>rolls, muffins, etc. or</td>
<td>½ slice</td>
<td>½ slice</td>
<td>½ slice</td>
</tr>
<tr>
<td></td>
<td>½ serving</td>
<td>½ serving</td>
<td>½ serving</td>
</tr>
<tr>
<td></td>
<td>½ serving</td>
<td>½ serving</td>
<td>½ serving</td>
</tr>
<tr>
<td>Cold dry cereal or</td>
<td>¼ cup or 1/3 oz.</td>
<td>1/3 cup or ½ oz.</td>
<td>¾ cup or 1 oz.</td>
</tr>
<tr>
<td>Cooked cereal or</td>
<td>¼ cup</td>
<td>¼ cup</td>
<td>½ cup</td>
</tr>
<tr>
<td>Cooked pasta or noodle products</td>
<td>¼ cup</td>
<td>¼ cup</td>
<td>½ cup</td>
</tr>
<tr>
<td>Cooked cereal grain or an</td>
<td>¼ cup</td>
<td>¼ cup</td>
<td>½ cup</td>
</tr>
<tr>
<td>equivalent quantity of any</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>combination of bread/bread</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>alternate</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

¹ For children 6 years and older, the meal pattern shall be the same as for children 12 years and older.

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Illinois Department of Children and Family Services
Rules 406 – (61)
## APPENDIX B
### MEAL PATTERN CHART FOR CHILDREN OVER ONE YEAR OF AGE

<table>
<thead>
<tr>
<th></th>
<th>BREAKFAST Ages</th>
<th>LUNCH/SUPPER Ages</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1 though 2</td>
<td>3 though 5</td>
</tr>
<tr>
<td></td>
<td>1 though 2</td>
<td>3 though 5</td>
</tr>
<tr>
<td><strong>BREAD AND BREAD ALTERNATIVES (Continued)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cooked pasta or noodle products or cooked cereal grains or an equivalent quantity of any combination of bread/bread alternate</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>MEAT AND MEAT ALTERNATES⁵</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lean meat or poultry or fish or</td>
<td>1 oz.</td>
<td>1 ½ oz.</td>
</tr>
<tr>
<td>Cheese or</td>
<td>1 oz.</td>
<td>1 ½ oz.</td>
</tr>
<tr>
<td>Eggs or</td>
<td>1 egg</td>
<td>1 egg</td>
</tr>
<tr>
<td>Cooked dry beans or peas or</td>
<td>¼ cup</td>
<td>3/8 cup</td>
</tr>
<tr>
<td>An equivalent quantity of any combination of meat/meat alternate or</td>
<td>2 tbsp.</td>
<td>3 tbsp.</td>
</tr>
<tr>
<td>Peanut butter</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## APPENDIX B

### MEAL PATTERN CHART FOR CHILDREN OVER ONE YEAR OF AGE

<table>
<thead>
<tr>
<th>1</th>
<th>Children age 12 and up may be served adult-size portions based on the greater food needs of older boys and girls, but shall be served not less than the minimum quantities specified for children age 6 up to 12.</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>For purposes of the requirements outlined, a cup means a standard measuring cup.</td>
</tr>
<tr>
<td>3</td>
<td>Bread, pasta, or noodle products and cereal grains shall be whole-grain or enriched. Cornbread, biscuits, rolls, muffins, etc., shall be made with whole-grain or enriched meal or flour. Cereal shall be whole-grain or enriched or fortified.</td>
</tr>
<tr>
<td>4</td>
<td>Serve two or more kinds of vegetables(s) and/or fruits(s). Full strength vegetable or fruit juice may be counted to meet not more than one-half of this requirement.</td>
</tr>
<tr>
<td>5</td>
<td>Cooked lean meat without bone.</td>
</tr>
</tbody>
</table>

(Source: Amended at 32 Ill. Reg. 9137, effective June 20, 2008)
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Section 406. APPENDIX C  Background of Abuse, Neglect, or Criminal History Which May Prevent Licensure or Employment in a Day Care Home

A. The Department makes the presumption that an individual who has been determined to be a perpetrator of child abuse or neglect involving the allegations listed below, as defined in Appendix B, Child Abuse and Neglect Allegations of 89 Ill. Adm. Code 300, Reports of Child Abuse and Neglect is not suitable for work that allows access to children.

- Death
- Head injury, brain damage or skull fracture or hematoma
- Internal injuries
- Wounds (gunshot, knife, or puncture)
- Torture
- Sexually transmitted diseases
- Sexual penetration
- Sexual molestation
- Sexual exploitation
- Failure to thrive
- Malnutrition
- Medical neglect of disabled infant

A single indicated report of child abuse or neglect that resulted in serious injury to the child, regardless of the allegations involved

More than one indicated report involving any of the following allegations, regardless of severity:

- Burns or scalding
- Poison or noxious substances
- Bone fractures
- Cuts, bruises, welts, abrasions and injuries
- Human bites
- Sprains or dislocations
- Tying or close confinement
- Substance misuse
- Mental and emotional impairment
- Substantial risk of physical injury
- Inadequate supervision
- Abandonment or desertion
- Medical neglect
- Lock-out
- Inadequate food
- Inadequate shelter
Inadequate clothing
Environmental neglect

If the licensees/license applicants believes there are unusual circumstances that should be considered to mitigate the presumption of unsuitability, the licensees/license applicants may request a waiver of the presumption of unsuitability. Materials to be considered are to be submitted to the licensing entity.

B. Criminal Convictions Which Prevent Licensure or Employment

If any person subject to background checks has been included in the Statewide Child Sex Offender Database or convicted of committing or attempting to commit one or more of the following serious criminal offenses under the Criminal Code of 1961 [720 ILCS 5] or under any earlier Illinois criminal law or code or an offense in another state, the elements of which are similar and bear a substantial relationship to any of the criminal offenses specified below, this conviction will serve as a bar to receiving a license or permit to operate as a child care facility and from obtaining employment or continuing in employment in a licensed child care facility that allows access to children as part of the duties.

The offenses that serve as a bar to licensure, residence in a family home in which a child care facility operates, or employment that allows access to children in any child care facilities subject to licensing include:

OFFENSES DIRECTED AGAINST THE PERSON

HOMICIDE

Murder
Solicitation of murder
Solicitation of murder for hire
Intentional homicide of an unborn child
Voluntary manslaughter of an unborn child
Involuntary manslaughter
Reckless homicide
Concealment of a homicidal death
Involuntary manslaughter of an unborn child
Reckless homicide of an unborn child
Drug induced homicide

KIDNAPPING AND RELATED OFFENSES

Kidnapping
Aggravated kidnapping
Aggravated unlawful restraint
Forcible detention
Child abduction
Aiding and abetting child abduction
Harboring a runaway

SEX OFFENSES

Indecent solicitation of a child
Indecent solicitation of an adult
Public indecency
Sexual exploitation of a child
Custodial sexual misconduct
Presence within school zone by child sex offenders
Approaching, contacting, residing, or communicating with a child within a public park zone by child sex offenders
Sexual relations within families
Prostitution
Soliciting for a prostitute
Soliciting for a juvenile prostitute
Solicitation of a sexual act
Pandering
Keeping a place of prostitution
Keeping a place of juvenile prostitution
Patronizing a prostitute
Patronizing a juvenile prostitute
Pimping
Juvenile pimping
Exploitation of a child
Obscenity
Child pornography
Harmful material
Tie-in sales of obscene publications to distributors
Posting of identifying information on a pornographic Internet site

BODILY HARM

Heinous battery
Aggravated battery with a firearm
Aggravated battery of a child
Tampering with food, drugs, or cosmetics
Hate crime
Stalking
Aggravated stalking
Threatening public officials
Home invasion
Vehicular invasion
Criminal sexual assault
Aggravated criminal sexual assault
Predatory criminal sexual assault of a child
Criminal sexual abuse
Aggravated sexual abuse
Criminal transmission of HIV
Criminal neglect of an elderly or disabled person
Child abandonment
Endangering the life or health of a child
Ritual mutilation
Ritualized abuse of a child
Drug induced infliction of great bodily harm

Refer to Appendix A of Part 385 for additional convictions that bar licensure of or employment in a child care facility.

(Source: Added at 30 Ill. Reg. 18280, effective November 13, 2006)
Section 406. APPENDIX D Pre-Service and In-Service Training

a) Entities that may provide pre-service and in-service training to meet the requirements of this Part include, but are not limited to:

1) colleges and universities
2) child care resource and referral agencies
3) Illinois Department of Public Health or local health departments
4) Office of the State Fire Marshal or local fire department
5) Illinois Department of Children and Family Services
6) Illinois Department of Human Services
7) state or national child care or child advocacy organizations
8) national, state or local family day care home associations
9) Child and Adult Care Food Program sponsors
10) Healthy Child Care Illinois nurses
11) American Red Cross, American Heart Association and other providers of first aid and CPR training that have been approved by the Illinois Department of Public Health

b) Topics or courses to meet the in-service training requirements include, but are not limited to:

1) child care and child development
2) guidance and discipline
3) first aid and CPR
4) symptoms of common childhood illness
5) food preparation and nutrition
6) health and sanitation
7) small business management
8) child abuse and neglect
9) working with parents and families
10) caring for children with disabilities
11) information about asthma and its management
12) Sudden Infant Death Syndrome (SIDS) education (training is required for new applicants and assistants to care for newborns and infants, and every three years thereafter for the life of the license)
13) service obligations under the federal Americans With Disabilities Act (ADA)
14) Shaken Baby Syndrome (training is required for new applicants and assistants licensed to care for newborns and infants, and every three years thereafter for the life of the license)
15) Department-approved Mandated Reporter Training (available on the Department's website; training is required for new applicants and assistants)
16) Sudden Unexpected Infant Death (SUID) (training is required for new applicants and assistants licensed to care for newborns and infants, and every three years thereafter for the life of the license)

c) Training
1) Pre-service and in-service training may be acquired through the following:
   A) attending college or university or vocational school classes (clock hours spent in the classroom are counted.)
   B) attending conferences or workshops (certificate or other proof of attendance, clock hours and subject matter is required.)
   C) attending state or local child care association meetings when a specific training program is provided by a guest speaker or group member (documentation of attendance, subject matter and clock hours is required.)
   D) in-home training by a Child and Adult Care Food Program sponsor representative, nurse or other trainer (documentation must include the topic and the clock hours.)
   E) self-study materials provided by a child care resource and referral (CCR&R) agency (certification of clock hours must be secured from the CCR&R.)
F) internet home study programs if the internet site provides documentation of use and number of clock hours

G) Mandated Reporter Training may be acquired through the Department’s website at: https://www.dcfstraining.org/manrep/index.jsp

H) viewing of the approved video offered by the National Institutes of Health Back to Sleep Campaign for SIDS and sleeping position of infants

2) The training instructor, speaker or president of the child care organization sponsoring the training may sign the documentation of completion. The child care resource and referral (CCR&R) agency must sign and provide documentation of completion for self-study materials, and the internet site must provide documentation for home study programs.

d) Licensed providers shall complete 15 clock hours of in-service training per period of the licensing year. Caregivers obtaining clock hours in excess of the required 15 clock hours per year may apply up to 5 clock hours to the next year’s training requirements.

e) Courses/training approved by the Department in caring for children with disabilities must include the following components:

- Introduction to Inclusive Child Care
- Understanding Child Development in Relation to Disabilities
- Building Relationships with Families
- Preparing for and Including Young Children in the Child Care Setting
- Community Services for Young Children with Disabilities (including Early Intervention services)

(Source: Amended at 40 Ill. Reg. 10769, effective July 29, 2016)
APPENDIX E  List of Items for Fire Safety Inspection

The Department shall notify the Office of the State Fire Marshal (OSFM) of the name and address of a day care home licensure initial applicant. The following list of items shall be inspected by OSFM, or by a Department or supervising agency licensing representative trained by OSFM to conduct fire safety inspections for license renewal or annual monitoring visits:

1. The paths of escape including doors and escape windows from the home are kept operable and clear from obstruction (see Section 406.8(a)(22)(A))

2. Smoke detectors are provided on each level of the home (including basements and second floors even if they are not used for child care) and in any room where children are allowed to nap or sleep (see Section 406.8(a)(94)(A))

3. All smoke detectors are less than 10 years old and functioning properly (detected by pushing the test button)

4. Locks and deadbolts on exit doors are operable without the use of a key, tool or special knowledge to open the door from inside the home to exit to the outside (see Section 406.8(a)(22)(F))

5. Occupants shall be able to escape the home without having to activate more than 2 releasing devices (e.g., door knobs, deadbolts, thumb-turn lock) on any exit door (see Section 406.8(a)(22)(F))

6. Bathroom doors shall be able to be opened by a caregiver from outside the room if necessary (see Section 406.8(a)(22)(D))

7. Closet doors shall be able to open from inside the closet without the use of a key (see Section 406.8(a)(22)(E))

8. Paths of escape from the home shall have operable lighting if needed (light bulbs are in place and functioning) (see Section 406.8(a)(22)(C))

9. Protective covers for all electrical receptacles are provided in areas used by children (see Section 406.8(a)(3))

10. Heating sources in spaces occupied by children is separated by partitions, screens, or other means to protect children from hot surfaces and open flames (see Section 406.8(a)(8))

11. Carbon monoxide detectors are installed and operable in areas occupied by children (see Section 406.8(a)(5))
Operating Requirements (renewal and subsequent monitoring visits)

12. There is a comprehensive written fire emergency response plan in the home (see Section 406.8(a)(18))

13. There are monthly tornado and fire drills conducted by the caregiver with participation by children (see Section 406.8(a)(19) and (20))

14. Monthly basic fire safety inspections of the home are conducted by the caregiver or staff members in the home (see Section 406.8(a)(24))

15. Daily fire safety inspections are done by the caregiver to ensure that escape paths are clear and exit doors and escape windows are operable (see Section 406.8(a)(23))

16. Corridors are clear of clothing and personal effects (see Section 406.8(a)(22)(A))

17. Flammable and combustible artwork and teaching materials attached directly to the walls are limited to no more than 20% of the wall area (see Section 406.8(a)(11)) and

18. Caregivers are awake and alert when children are present in the home (see Section 406.9(s))

(Source: Amended at 34 Ill. Reg. 18358, effective December 15, 2010)
DATE: October 19, 2020

TO: All Day Care Licensing Representatives, Supervisors and Administrators

FROM: Marc D. Smith, Acting Director

EFFECTIVE: Immediately

I. PURPOSE

The purpose of this Policy Guide is to issue changes to group size during Phase IV of Restore Illinois to Rules 406, 407 & 408.

In light of the extreme circumstances related to COVID-19 and the need to ensure that the health and safety of children is protected through social distancing, this policy guide is adopted to allow day care homes, day care centers, and group day care homes to increase group size to serve additional parents and caregivers.

II. PRIMARY USERS

Primary users include DCFS Day Care Licensing Representatives, Supervisors and Administrators, licensed Day Homes, licensed Day Care Centers, and licensed Group Day Care Homes.

III. BACKGROUND AND SUMMARY

DCFS has responded to the challenges COVID-19 has presented through Emergency and permanent rulemaking for those facilities licensed as Day Care Homes, Day Care Centers and Group Day Care Homes. As the Department transitions from Emergency Rules for all day care facilities, policy guides will provide revisions to these rules to respond to the changing conditions the COVID-19 pandemic present. The Department will continue to post updated guidance that all day care programs are urged to follow, based on recommendations from the Centers for Disease Control and Illinois Department of Public Health.
IV. INSTRUCTIONS

A. **Grouping and Staffing Day Care Homes, Day Care Centers and Group Day Care Homes**:

Grouping and staffing limits shall be in accordance with CDC and IDPH guidelines during Phases IV as follows:

1) Children must remain with the same group each day while in care.

2) Groups must not be combined at any time.

3) Required Ratios and Maximum Group Sizes. In order to provide the level of supervision necessary to adhere to the health and safety requirements established by the Illinois Department of Public Health in response to the COVID-19 pandemic, the following staff-to-child ratios must be maintained at all times during the program day.

B. **Day Care Home Numbers and Ages**

<table>
<thead>
<tr>
<th>Day Care Homes</th>
<th>Minimum Staff to Child Ratio</th>
<th>Maximum Group Size (Children)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mixed Group</td>
<td>1 Caregiver alone 8 children</td>
<td>8 children (includes the caregiver’s own children under the age of 12)</td>
</tr>
<tr>
<td>Mixed Group</td>
<td>Caregiver and 1 Assistant 8 children plus 2 school aged children = 10 children</td>
<td>8 children plus 2 school aged children = 10 children (this includes caregiver’s own children under the age of 12 and additional 2 children fulltime-enrolled school age children)</td>
</tr>
</tbody>
</table>

This will remain the same, the maximum capacity for Day Care Homes is 8 and then if they have been granted the extended 4 school-age capacity.

C. **Group Day Care Home Numbers and Ages**

<table>
<thead>
<tr>
<th>Group Day Care Home</th>
<th>Minimum Staff to Child Ratio</th>
<th>Maximum Group Size (Children)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mixed Group</td>
<td>1 Caregiver alone 8 children</td>
<td>8 children (includes the caregiver’s own children under the age of 12)</td>
</tr>
<tr>
<td>Mixed Group</td>
<td>Caregiver and Assistant 12 children</td>
<td>12 children plus 2 school aged children = 14 children (this includes caregiver’s own children under the age of 12 and additional 2 children fulltime-enrolled school age children)</td>
</tr>
</tbody>
</table>

The Maximum capacity with an assistant is 12 and then if they have been granted the extended 4 school-age capacity it would be under traditional rule 16.
D. **Day Care Center Grouping and Staffing**

Day Care Centers may choose to staff classrooms with a qualified early childhood assistant for up to 3 hours of their program day and should document such in the program’s Enhanced Staffing Plan and must comply with these staff to child ratios:

<table>
<thead>
<tr>
<th>Ages</th>
<th>Minimum Staff to Child ratio</th>
<th>Maximum Group Size (Children)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infant</td>
<td>1:4 (Stay the same any increase would require additional staff)</td>
<td>8</td>
</tr>
<tr>
<td>Toddler</td>
<td>1:5</td>
<td>14</td>
</tr>
<tr>
<td>Two</td>
<td>1:8</td>
<td>14</td>
</tr>
<tr>
<td>Three</td>
<td>1:10</td>
<td>17</td>
</tr>
<tr>
<td>Four</td>
<td>1:10</td>
<td>17</td>
</tr>
<tr>
<td>Five</td>
<td>1:17</td>
<td>17</td>
</tr>
<tr>
<td>School-agers</td>
<td>1:20</td>
<td>20</td>
</tr>
</tbody>
</table>

V. **REVISED DAY CARE GUIDANCE**

The Day Care and License Exempt School Age Guidance has been updated as of October 19, 2020. The revised Guidance is attached to this Policy Guide and is posted to the DCFS Website.

VI. **QUESTIONS**

Licensee holders may direct questions to their Licensing Representative. Applicants may direct questions to their local day care licensing office. Licensing staff should direct questions to their supervisory chain-of-command. All others may direct their questions to the Office of Child and Family Policy via Outlook at DCFS.Policy. Non-Outlook users may e-mail questions to DCFS.Policy@illinois.gov.

VII. **FILING INSTRUCTIONS**

File this Policy Guide immediately behind Rules 406, Licensing Standards for Day Care Homes; Rules 407, Licensing Standards for Day Care Centers; and Rules 408, Licensing Standards for Group Day Care Homes.
DATE: January 3, 2020

TO: DCFS and Private Agency Licensing Staff

FROM: Marc D. Smith, Acting Director

EFFECTIVE: Immediately

I. PURPOSE

The purpose of this Policy Guide is to provide DCFS and Purchase of Service (POS) Agency staff with information regarding limitations that apply to the lawful use (possession, consumption, storage) of recreational and medical cannabis as it pertains to child welfare practice.

The Department will propose amendments to rules and procedures affected by these statutes in the near future.

II. PRIMARY USERS

The primary users of this Policy Guide are Department and POS Agency licensing staff.

Definitions:

“Cannabis” has the definition as assigned in the Cannabis Regulation and Tax Act. [410 ILCS 705]

“Cannabis-infused product” means a beverage, food, oil, ointment, tincture, topical formulation, or another product containing cannabis that is not intended to be smoked as defined in the Cannabis Regulation and Tax Act. [410 ILCS 705]

“Child Care Facility” means a child care facility as defined in the Child Care Act. [225 ILCS 10]

“Medical cannabis” means cannabis products that are acquired for “medical use” as that term is defined in the Compassionate Use of Medical Cannabis Program Act. [410 ILCS 130]
III. SUMMARY OF ILLINOIS LAW

The Illinois Cannabis Regulation and Tax Act and the Compassionate Use of Medical Cannabis Program Act regulate the possession, consumption and storage of recreational and medical cannabis. The Cannabis Regulation and Tax Act was amended, effective January 1, 2020, to permit the recreational use of cannabis in Illinois.

These Acts also contain limitations on the possession, consumption and storage of recreational and medical cannabis in or near licensed and unlicensed child care facilities, in vehicles and in the presence of persons under 21 years of age.

These Acts allow for an individual to use any type of cannabis and continue to be eligible for initial or renewal of licensure for any type of child care facility; this includes unlicensed relative foster homes and employees of any licensed and unlicensed child care facility.

These Acts provide numerous limitations on the use and possession of cannabis (which includes cannabis-infused products) as it relates to child care. For example, the Acts DO NOT PERMIT:

- Undertaking any task under the influence of cannabis when doing so would constitute negligence, professional malpractice, or professional misconduct;
- Possessing cannabis in a private residence that is used at any time to provide licensed or unlicensed child care (day care and foster care) or other similar social service care on the premises;
- Using cannabis in a private residence that is used at any time to provide licensed or unlicensed child care (day care and foster care) or other similar social service care on the premises;
- Using cannabis in any public place;
- Using cannabis knowingly in close physical proximity to anyone under 21 years of age who is not a registered medical cannabis patient under the Compassionate Use of Medical Cannabis Pilot Program Act;
- Smoking cannabis in any place where smoking is prohibited under the Smoke Free Illinois Act;
- Facilitating the use of cannabis by any person who is not allowed to use cannabis under either the Cannabis Regulation and Tax Act or the Compassionate Use of Medical Cannabis Program Act;
- Using cannabis in any motor vehicle; or
- Possessing (driver or passenger) cannabis in a motor vehicle except in a sealed, odor-proof, child-resistant cannabis container.

Any violation of these laws may subject the violator to civil or criminal penalties.
IV. QUESTIONS

Questions regarding this Policy Guide may be directed to the Office of Child and Family Policy at 217-524-1983 or via Outlook at DCFS.Policy. Non-Outlook users may e-mail questions to DCFS.Policy@illinois.gov.

V. FILING INSTRUCTIONS

File this Policy Guide immediately following Rules:

Rules 401, Licensing Standards for Child Welfare Agencies;
Rules 402, Licensing Standards for Foster Family Homes;
Rules 403, Licensing Standards for Group Homes;
Rules 404, Licensing Standards for Child Care Institutions and Maternity Centers;
Rules 406, Licensing Standards for Day Care Homes;
Rules 407, Licensing Standards for Day Care Centers;
Rules 408, Licensing Standards for Group Day Care Homes;
Rules 409, Licensing Standards for Youth Transitional Living Programs;
Rules 410, Licensing Standards for Youth Emergency Shelters; and
Rules 411, Licensing Standards for Secure Child Care Facilities.
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I. PURPOSE

The purpose of this Policy Guide is to inform all day care licensing staff of recent legislation that requires specific child care staff to show proof/documentation of certain immunizations. In the coming months, day care licensing rules will be amended to reflect this statutory change.

II. PRIMARY USERS

The primary users of this Policy Guide are Department and POS licensing and placement staff.

III. BACKGROUND AND SUMMARY

Any alleged violation of statute needs to be taken as a licensing complaint and processed accordingly. Until the rules are amended, violation codes will be identified per section of the Child Care Act as noted below:

**Child Care Act, Section 4.6 (amended by P.A. 99-267)**

Effective, 1/1/16, any staff person employed by a child care facility licensed to care for children ages 6 weeks through six years old is required to show proof/documentation of having received the following:

- One dose of the Tdap (tetanus, diphtheria, pertussis) and
- 2 doses of the MMR (measles, mumps, rubella), or
- Shows proof of immunity to MMR (DCFS will require physician’s written signature)

Violation Codes

- Staff person does not have documentation of Tdap in file: CCASEC46i
- Staff person does not have documentation of MMR or proof of immunity: CCASEC46ii

Licensing staff shall immediately begin implementing the new standards outlined in this Policy Guide.
IV. Frequently Asked Questions

**What is Tdap?**
Tdap is short for tetanus (lockjaw), diphtheria and pertussis (whooping cough). If you’re between the ages of 19 and 64, you should have had at least one single dose. If you’re age 65 or older and have not previously had a Tdap vaccination, you will need to receive one Tdap vaccination. A Tdap usually lasts around 7 years, so if it’s been longer than that since your last one, you will need a booster.

**What is MMR?**
MMR stands for mumps, measles and rubella. Anyone born after January 15, 1957 who has not had at least one measles vaccination after their first birthday OR who has never had the measles should be immunized. MMR immunizations are two doses, usually one month apart. Two doses of MMR vaccine should be all you need. If you had measles, discuss this with your healthcare provider—acquired immunity after illness is permanent.

Children cannot start receiving MMR vaccinations until they are 1 year of age, so it is especially important that their caregivers be health and protected themselves.

**Who does this rule change affect?**
Anyone employed by a child care facility that care for children ages six and under. This means:

<table>
<thead>
<tr>
<th>Day Care/Group Care Homes</th>
<th>Day Care Center</th>
</tr>
</thead>
<tbody>
<tr>
<td>Licensees</td>
<td>Directors</td>
</tr>
<tr>
<td>Substitutes</td>
<td>Teachers</td>
</tr>
<tr>
<td>Assistants</td>
<td>Assistants</td>
</tr>
<tr>
<td>Volunteers</td>
<td>Support Staff, Volunteers, Substitutes</td>
</tr>
</tbody>
</table>

**When does this rule change take affect?**
The change to the Illinois Child Care Act takes effect 1-1-16. The amendment process to add new rules to existing home and center standards minimally takes 9-12 months, so for a time, DCFS will continue to inform center and home licensees and their staff about the new law and the expectations that the coming rule change.

**What does the new law require?**
- Proof of having had 1 Tdap (tetanus, diphtheria and pertussis) vaccination AND
- 2 MMR (mumps, measles, rubella) vaccinations

**How do I show I’ve had the shots before or that I’m immune?**
Your physician will have your healthcare history and can sign off on the CFS 602, *Medical Report on and Adult in a Child Care Facility*, to attest that either your previous immunizations OR for MMR, that a blood test indicates you are still immune.
What if my doctor says I shouldn’t get them?
DCFS will not require something that your physician or healthcare provider says is not medically indicated. The CFS 602, Medical Report on an Adult in a Child Care Facility, has been changed to include a section for your physician to record his or her medical recommendation that it is not in your best interest to receive one or both of these immunizations.

What if I don’t want to get more immunizations?
There is no test which can substitute for the Tdap, however, there is a blood test which can indicate proof of immunity which would substitute for the MMR vaccinations—however, this test is very costly.

How do I prove I’ve had the immunizations in the past?
Talk with your healthcare provider. They should have your previous health and immunization records.

What if I’m pregnant?
Pregnant women should not receive the MMR and must wait for appx. 6-8 weeks after delivery to receive their immunizations. To be safe, talk to your healthcare provider.

What if I don’t believe in vaccinations?
There is no exclusion for personal choice. The law requires all caregivers to be immunized or show proof of immunity. It is very important for the protection of children, especially infants, that caregivers be healthy. Numerous cases of whooping cough and measles were identified in Illinois last year so provider immunizations have been identified as an important line of defense—for children and adults.

What if I can’t afford to get these immunizations?
Check with your insurance company, the local health Department, or your healthcare provider. There are some healthcare plans that will cover adult immunizations at a free or reduced price and there are some programs such as Vaccines for Adults through the IDPH, that can provide immunizations for the underinsured.

V. REVISED FORM

CFS 602, Medical Report on an Adult in a Child Care Facility (Rev 3/2016)

This form may be ordered from Central Stores in the usual way, and is also available on the “T” Drive and DCFS Website.

VI. FURTHER QUESTIONS

Questions regarding this Policy Guide may be directed to the Office of Child and Family Policy at 217-524-1983 or via Outlook at OCFP – Mailbox. Non Outlook users may e-mail questions to cfpolicy@idcfs.state.il.us.
VII. FILING INSTRUCTIONS

I. PURPOSE

The purpose of this Policy Guide is to inform all day care licensing staff of recent legislation that provides new regulations for licensed day care facilities that the Department of Children & Family Services monitors. In the coming months, day care licensing rules will be amended to reflect these statutory changes.

II. PRIMARY USERS

The primary users of this Policy Guide are Department and POS licensing and placement staff.

III. BACKGROUND AND SUMMARY

Any alleged violation of statute needs to be taken as a licensing complaint and processed accordingly. Amendments to respective rules will be proposed to add the language in the Policy Guide. Until the rules are amended, violation codes will be identified per section of the Child Care Act or Food Handling Regulation Enforcement Act as noted below:

**Child Care Act, Section 5.5 (amended by P.A. 99-343)**

Effective August 11, 2015, based upon U.S. government findings regarding second hand smoke and its special risks to children’s health, the following shall be monitored, recorded and regulated:

- It is a violation for any person to smoke tobacco in any area of a licensed day care center, day care home or group day care home. This includes smoking in a licensed day care facility outside of times of operation and/or when children are not present. It also includes any area of a licensed day care facility that is not licensed specifically for childcare, but is part of the same structure.

- It is a violation for any person responsible for the operation of the licensed day care facility to knowingly allow, or encourage anyone to smoke in a licensed day care facility. This includes any person who is the owner, director and/or teacher of the licensed child care facility.
Violation Codes

- Smoking in a licensed day care center: CCASEC55b
- Smoking in a licensed day care home or group day care home: CCASEC55c
- Allowing or encouraging a person to smoke in any licensed day care facility: CCASEC55

Child Care Act, Section 7 (j) (amended by P.A. 99-143)

Effective July 27, 2015, the Department shall accept, in lieu of a high school diploma or GED, the following documentation from an applicant for a day care home license:

A degree, license or certificate earned from an institution of higher learning or vocational institution that is accredited by an agency recognized by the government.

Violation Code

No documentation of a valid post-secondary degree, license or certificate: CCASec7a.

Food Handling Regulation Enforcement Act, Sections 3, 3.05 & 3.06 (amended by P.A. 98-566 and P.A. 99-62)

Effective July 16, 2015, the following requirements pertain to all licensed day care facilities:

- Staff who work with unpackaged food, food equipment or utensils, or food-contact surfaces must have food handling training that is approved by IDPH;
- Exemption for staff with a Food Service Sanitation Manager Certificate and unpaid volunteers;
- Training courses must be approved by American National Standards Institute (ANSI) or the Illinois Department of Public Health;
- Local Health Departments must have their food handling training curriculum approved by the Illinois Department of Public Health;
- Training must be completed every 3 years;
- Proof of Training must be documented and kept on-site at the licensed day care facility;
- Food Handling Certificates are not issued by the State, so documentation of the approved training must be completed by the training entity;
- Trainers may be persons who have taken the training and passed an assessment, as long as the curriculum being used has been approved and there is an assessment component;
• Training taken by food handlers is not transferrable between licensed day care facilities;
• Employers are not “required” to pay for their staff’s food handler’s training
• Food Handler Training shall be completed by 7/1/16;
• Enforcement of Law shall consist of education and notification, from 7/1/16-12/31/16; and
• Full Enforcement begins on 1/1/17, i.e. violation substantiated, with corrective plan.

Violation Code

• No documentation of required food handling training: FHsec305

Licensing staff shall immediately begin implementing the new standards outlined in this Policy Guide.

IV. QUESTIONS

Questions regarding this Policy Guide may be directed to the Office of Child and Family Policy at 217-524-1983 or via Outlook at OCFP – Mailbox. Non Outlook users may e-mail questions to cfpolicy@idcfs.state.il.us.

V. FILING INSTRUCTIONS

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I. PURPOSE

The purpose of this Policy Guide is to inform Department and Purchase of Services (POS) licensing staff of new requirements, which are consistent with Public Act 98-0817, regarding educational documentation in day care homes.

II. PRIMARY USERS

The primary users of this policy guide are Department and POS foster home licensing staff.

III. BACKGROUND

Public Act 98-0817, effective January 1, 2015, amends the Child Care Act to include the following language: “Any standard adopted by the Department that requires an applicant for a license to operate a day care home to include a copy of a high school diploma or equivalent certificate with his or her application shall be deemed to be satisfied if the applicant includes a copy of a high school diploma or equivalent certificate or a copy of a degree from an accredited institution of higher education or vocational institution or equivalent certificate.”

This Policy Guide summarizes the Department’s guidelines for implementing this change.

IV. SUMMARY

The Department’s Licensing Standards for Day Care Homes and Group Day Care Homes currently require the application for license to include a copy of the applicant’s high school diploma or equivalent certification.
As of January 1, 2015, the Department shall accept any of the following documents as proof that minimum education requirements are met when issuance comes from a public school system or accredited private institution:

- High School Diploma;
- General Education Development Certificate;
- Degree from a College or University; or
- Certificate or degree from career/vocational schools where a high school diploma or documentation of general education development is a pre-requisite for admission.

Foreign credentials must be translated into English and have additional documentation providing a statement of the equivalency in the U.S. educational system.

The Department will propose amendments to rules 406 and 408 to promulgate this statute and comport with this Policy Guide. Licensing staff shall immediately implement the new standards.

V. QUESTIONS

Questions regarding this Policy Guide may be directed to the Office of Child and Family Policy at 217-524-1983 or via Outlook at OCFP – Mailbox. Non Outlook users may e-mail questions to cfpolicy@idcfs.state.il.us.

VI. FILING INSTRUCTIONS

File this Policy Guide immediately following Rules 406, Licensing Standards for Day Care Homes and Rules 408, Licensing Standards for Group Day Care Homes.
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

POLICY GUIDE 2015.05

DAY CARE STAFF IMMUNIZATION GUIDELINES

DATE: March 18, 2015

TO: DCFS Child Welfare and Licensing Staff and Supervisors

FROM: George H. Sheldon, Acting Director

EFFECTIVE: Immediately

I. PURPOSE

The purpose of this Policy Guide is to inform Day Care Licensing staff of new Department policy concerning immunizations of staff at licensed day care centers and homes, which are consistent with guidelines established by public health entities.

II. PRIMARY USERS

The primary users of this policy guide are DCFS Day Care Licensing Staff and Supervisors.

III. BACKGROUND

The Department’s licensing standards currently require newly employed day care staff to submit a physical examination report, no more than six months from their employment date, that provides evidence that they are free of communicable disease, including active tuberculosis, and physical or mental conditions that could affect their ability to perform assigned duties. Staff must have physical re-examinations every 2 years and whenever communicable disease or illness is suspected. The standards are silent on whether staff must be up-to-date on immunizations.

IV. SUMMARY

Through this Policy Guide, the Department now requires that day care centers and homes include a staff vaccination policy, consistent with guidelines from the Centers for Disease Control, in the written risk management plan described in subsection 407.70(k) for day care centers, or hazard protection plans described in subsections 406.4.(b)(1)(F) for day care homes or 408.10(b)(1)(G) for group day care homes. Form CFS 602, Medical Report on an Adult in a Child Care Facility, has been revised to ascertain whether the examining physician has discussed the importance of immunizations with the adult child care provider being examined. Licensing staff shall discuss this new policy with providers during licensing visits to ensure subsequent compliance.
The Department will propose amendments to **Part 407, Licensing Standards for Day Care Centers**, **Part 406, Day Care Home Licensing Standards**, and **Part 408, Group Day Care Home Licensing Standards** to comport with this Policy Guide. Licensing staff shall immediately implement this new policy. The revised **CFS 602, Medical Report on an Adult in a Child Care Facility**, may be ordered from Central Stores and is available thru Templates and D-net.

V. QUESTIONS

Questions regarding this Policy Guide may be directed to the Office of Child and Family Policy at 217-524-1983 or via Outlook at OCFP – Mailbox. Non Outlook users may e-mail questions to cfpolicy@idcfs.state.il.us.

VI. FILING INSTRUCTIONS

DATE: June 22, 2018

TO: All Department and Purchase of Service Agency Staff

FROM: Roxanne Lizcano, Deputy Director Licensing

EFFECTIVE: Immediately

I. PURPOSE

The purpose of this Information Transmittal is to provide DCFS Licensing with clarification of how licensing staff are to conduct practice regarding medical cannabis that is approved by a physician, per the Compassionate Use of Medical Cannabis Pilot Program Act.

II. DEFINITIONS

“Cannabis” as defined in the Cannabis Control Act [720 ILCS 550/3(a)]

“Child Care Facility” as defined in the Child Care Act [225 ILCS 10/2.05]

III. SUMMARY OF LEGISLATION

Medically prescribed cannabis is legal in Illinois under the Compassionate Use of Medical Cannabis Act [410 ILCS 130/1]. There is nothing in the Act that prevevents a user of medically prescribed cannabis from being a foster parent or child care licensee however, there are sections of that law that apply to foster parents and child care licensees.

The law requires that 1) no person may possess cannabis in a private residence used to provide licensed child care or other similar social services on the premises and 2) no person may use cannabis in a private residence used at any time to provide day care or other similar social services on the premises.

IV. PROCEDURES

For licensees, applicants for licensure, household members, employees, volunteers and contractual providers who are currently approved by a licensed physician to use medical cannabis, a written, signed and dated plan for compliance with Licensing Standards and The Compassionate Use of Medical Cannabis Pilot Program Act, is required.
The applicant or licensee shall provide proof of physician authorization for use and document where the medical cannabis will be stored and ingested. Documentation for foster family homes shall be placed on CFS 452-7. Documentation for day care centers shall be placed on the Risk Management Plan. Documentation for day care homes/group day care homes shall be placed on the Hazard Plan.

V. QUESTIONS

Questions regarding this Policy Guide may be directed to the Office of Child and Family Policy at 217-524-1983 or via Outlook at DCFS.Policy. Non Outlook users may e-mail questions to DCFS.Policy@illinois.gov

VI. NEW FORM

The following form is available on templates and can be ordered in the usual manner.

CFS 452-7: Compliance with the Compassionate Use of Medical Cannabis Pilot Program Act – Child Care Facility

VII. FILING INSTRUCTIONS

File this Information Transmittal immediately following:
Rule 402, Licensing Standards for Foster Family Homes;
Rules 406, Licensing Standards for Day Care Homes;
Rules 407, Licensing Standards for Day Care Centers; and
Rules 408, Licensing Standards for Group Day Care Homes.