

**SUGGESTED STANDARDS–GUIDELINES FOR OPERATORS OF FAMILY
CHILD CARE HOMES SUBJECT TO REGISTRATION OR MANDATED
REQUIREMENTS FOR FAMILY CHILD CARE HOME OPERATORS WHO
ELECT TO BE LICENSED**

I. THE ADMINISTRATION OF THE HOME

A. Owner/Operator

1. **SUGGESTED STANDARD: Interpretation of Policies.** The Operator shall provide the parent user with a copy of the policies of the family child care home, in such areas as:
 - a. hours and days care is provided (including holidays).
 - b. ages of children accepted.
 - c. plan for fee payments and refunds.
 - d. how operator or parent can end services.
 - e. policy concerning illnesses of children, non-admission and re-admission.
 - f. requests concerning children's personal belongings, etc.
 - g. provision of diapers, clothing and formula, if family child care home accepts infants and toddlers.
 - h. procedures parent(s) may use to make a complaint.
 - i. authority and procedures for administering medication and special medical procedures to a child.
 - j. emergency or disaster plan.
 - k. authorization for emergency medical care.

2. **SUGGESTED STANDARD: Admission Procedures.** No family child care home shall have present at any time children in excess of the number for which it is licensed.

POLICY: When a special event or program is being held at the FCCH and parents are present, the number of children present may exceed the number for which the FCCH is licensed. (1/31/06)

EVIDENCE OF COMPLIANCE: Compliance shall be determined by the actual number of children in the family child care home at a given time as reflected by enrollment records.

3. **SUGGESTED STANDARD: Reporting Neglect or Abuse.** The operator shall notify the appropriate department staff or local law enforcement official when it appears that a child is being neglected or abused.

4. **SUGGESTED STANDARD: Display of License.** The family child care home shall display its current license prominently.

B. Records

1. **SUGGESTED STANDARD: General Records on the Child.** The operator shall initiate at admission and maintain a general record on each child to include:
 - a. Child's name, address, birth date, and date of his acceptance and discharge.
 - b. Full name of both parents, or person responsible for child, family's home address, work addresses and telephone numbers.
 - c. Instructions for reaching parents or relatives.
 - d. Name, address, and telephone number of another person who might be reached in case of emergency.
 - e. Name, address, and telephone number of family physician and/or health resource.
 - f. Accurate records of daily attendance of each child.

2. **SUGGESTED STANDARD: Child Health Records.** The operator shall maintain a health record on each child containing the following items:
 - a. Parent's statement of the child's physical and mental condition at the time of his admission to the family child care home. (Refer to Appendix for information regarding how to secure health form.)

POLICY: The health status referred to in this standard is a history of the child's health for the last 30 days before enrolling in the facility and must be completed at the time of admission on DSS Form 2900. (1/31/06)

- b. Physician's statement where there are handicapping physical or psychological conditions, attesting to the child's ability to participate in activities usual for his age level, and indicating any recommendations.
 - c. Written verification that the operator has been shown the immunization card of each child by the parent(s) indicating required immunizations are completed, in process or child meets exemptions. (See Sources of Information in Appendix for information regarding immunization(s).)
 - d. Other health information as deemed necessary by the operator and parent(s).

3. **SUGGESTED STANDARD: Records on Staff and Household.** The operator shall maintain records on all caregivers including himself, other members of his household, and additional staff or help as follows:
 - a. Medical statements completed regarding health status. (See Appendix for information regarding how to secure medical statement form(s).)
 - b. Written evidence from a physician or health department verifying freedom from communicable tuberculosis.

II. THE STAFF AND THE HOUSEHOLD

A. Personal Health

1. **SUGGESTED STANDARD: Health Requirements for Staff.** Written evidence shall be required from each staff member verifying his health is satisfactory and would not interfere with his effective functioning in the family child care home.
 - a. Written statements, using the form provided by the department, shall be completed initially by the family child care operator, any additional caregivers, substitutes and emergency person verifying that their current health status is satisfactory.
 - b. Written verification from a physician or health resource attesting that each staff person is free from communicable tuberculosis shall be submitted initially and annually thereafter.

2. **SUGGESTED STANDARD: Health Requirements for Household.** Written evidence shall be required from each household member and domestic help not serving as staff attesting that their health is satisfactory.
 - a. Written statements, using the form provided by the department, shall be completed initially by each member of the household and domestic help.
 - b. Written verification from a physician or health resource attesting that each household member and domestic help is free from communicable tuberculosis shall be submitted initially and annually thereafter.

3. **SUGGESTED STANDARD: Health practices of Staff and Household.** The operator, his household, domestic help and any additional staff shall follow health practices necessary to safeguard the health of the children and other staff, as follows:
 - a. Each person shall wash his hands with soap and water before food preparation and/or service and after assisting with toilet use or diaper changes.

POLICY: Hand sanitizer may not be used instead of soap and water. However, it may be used after washing hands with soap and water. (8/1/06)

- b. No person if afflicted with boils, infected wounds, sores, or acute respiratory infection shall work in any capacity in which there is a likelihood of such person contaminating food or food-contact surfaces with pathogenic organisms, or transmitting disease to other individuals.

B. Staff Qualifications and References

1. **SUGGESTED STANDARD: Age of Operator:** The operator of a family child care home shall be at least eighteen (18) years of age or older and must reside in the home. Someone must be on the premises at all times who can read and write.

POLICY: Per the Suggested Standards for Operation of a Family Child Care Home, the minimum age of an operator of a Family Child Care Home is 18 years of age. (5/1/06)

2. **SUGGESTED STANDARD: Age of Caregivers:** Caregivers less than eighteen years of age shall be permitted provided the following conditions are met:
 - a. they are at least 14 years of age.
 - b. they are not the person in authority and are properly supervised.
 - c. the facility is in accord with South Carolina Labor Laws regarding the employment of minors in non-hazardous jobs. (Refer to regulation promulgated by the Commissioner of Labor pursuant to S.C. Code Ann. 41-13-20 (1976) and the Appendix.)
3. **SUGGESTED STANDARD: Employment of Persons with Abuse Records:** No person who has been convicted of child abuse or neglect, child molestation or sexual abuse or who is awaiting trial on such charges shall be knowingly employed in a family child care home.
4. **SUGGESTED STANDARD: References.** The operator shall provide the department staff with three references from non-related sources to verify his/her suitability to care for children.

POLICY: Professional support services personnel, including but not limited to therapists, early interventionists, tutors, and contractors must be under the supervision of qualified staff members at all times while they are providing on-site services to children.

III. THE CARE OF THE CHILDREN

A. Health Practices

1. **SUGGESTED STANDARD: Toilet Articles.** Toilet articles such as combs, brushes, toothbrushes, towels and washcloths, when used by the children in attendance, shall be individually provided and plainly marked.

POLICY: Toothbrush covers are permitted if they allow for air circulation. (5/1/06)

POLICY: Toothbrush covers, if used, should be cleaned with bleach solution to prevent mold. (8/1/06)

2. **SUGGESTED STANDARD: Personal Hygiene.** The operator and other caregivers shall follow good hygiene practices with the children.

EVIDENCE OF COMPLIANCE:

- a. Wet or soiled clothing shall be changed immediately.
- b. Face and hands shall be thoroughly washed before and after meals.
- c. Hands shall be washed after toileting.

POLICY: Children's hands shall be washed in the lavatory after each individual diaper change. In the case of infants, hands may be cleaned with single-use, pre-moistened towelettes. (1/31/06)

3. **SUGGESTED STANDARD: Emergency Health Care.** The family child care home shall have provision of emergency medical care of children requiring treatment away from the child care setting, such as an arrangement with a hospital, public health department, or local physician.

POLICY: The Emergency Medical Plan must be in writing, and the Licensing Specialist will review the plan at initial licensure/registration and at each renewal or as needed. (1/31/06)

4. **SUGGESTED STANDARD: Administration of Medicine.** The authority for administering medication to children shall be defined as follows:
- a. Medication and/or special medical procedures shall be administered to a child only when there is a request from the parent(s).
 - b. Prescription drugs and other medications required by the children shall be properly labeled with the child's name and dosage schedule and kept in a location inaccessible to the children.

POLICY: Diaper ointments, Neosporin, and other common over-the-counter products are considered to be medicines and are to be used and stored according to standards. (8/1/06)

5. **SUGGESTED STANDARD: First Aid Information.** The operator shall have readily available a chart describing first aid emergency medical treatment techniques.
6. **SUGGESTED STANDARD: First Aid Supplies.** First aid supplies shall be available for the treatment of minor cuts and abrasions and stored out of the reach of the children.

POLICY: First aid kits shall be restocked after use, and an inventory shall be conducted at least monthly. (5/1/06) (SEE RESOURCE MANUAL SECTION 6 FOR EXAMPLE OF SUGGESTED CONTENTS OF A FIRST AID KIT.)

POLICY: Rubber gloves are to be included in the First Aid Kit. Antibiotic ointment should be used with care as some children may be allergic. (8/1/06)

POLICY: If an emergency medication is needed, such as an EpiPen or inhaler, it should be stored in a First Aid Kit that is readily accessible in the event of an emergency. Staff should be trained in the recognition of symptoms in children in the use of the emergency medication. Parents should complete and maintain on file at the facility an Emergency Consent Form that identifies and gives consent for the use of any special medication prescribed for the child, as well as consent for the use of Neosporin or any other over the counter antibacterial medication listed in the contents of the facility's first aid kits. (11/1/06 amended 7/30/09)

B. Supervision

1. **SUGGESTED STANDARD: Staff to Child Ratios.** The operator shall supervise the care for up to a total of six children, including the operator's own children under 12. (See Suggested Standard III.C.7.(a))

POLICY: Within a six-month period, when there have been three separate supervision/ratio citations and/or citations for exceeding the number of children allowed on a license/registration/approval, a conference will be held with the operator. A correction action plan shall be written that states the consequences of another violation within a probationary period (as determined by the corrective action plan). The corrective action plan shall contain language that states another violation will affect the status of the license/registration/approval. (1/31/06)

POLICY: Professional support services personnel, including but not limited to therapists, early interventionists, tutors, and contractors must be under the supervision of qualified staff members at all times while they are providing on-site services to children.

2. **SUGGESTED STANDARD: Caregiver Coverage.** Children shall not be without competent supervision at any time.
EVIDENCE OF COMPLIANCE:
 - a. No person under 18 years of age shall be left in sole charge of the children at any time.
 - b. The operator shall present written evidence that a plan has been worked out whereby an outside person can be summoned quickly to assist in an emergency.

C. Program

1. **SUGGESTED STANDARD: Daily Schedule.** The operator shall establish a daily schedule which will provide regularity of activities with sufficient flexibility and variety to respond to the needs of the children.
2. **SUGGESTED STANDARD: Activities for Children Three and Above.** The family child care home shall provide daily activities which contribute to the individual child's growth and well-being, including both active and quiet experiences.
3. **SUGGESTED STANDARD: Infant-Toddler Care.** The family child care home shall provide an environment which safeguards infants and toddlers

from physical harm but is not so restrictive so as to inhibit physical, intellectual, emotional or social development.

EVIDENCE OF COMPLIANCE:

- a. The caregiver(s) shall provide frequent direct contact so that the children are not routinely left in any situation for long periods of time.
 - b. The caregiver(s) shall have frequent verbal communication with the children.
 - c. The caregiver(s) shall hold the children while they are feeding or drinking, as long as they are unable to sit in a high chair, an infant seat, or at the table.
 - d. The caregiver(s) shall feed infants individually and follow a recognized or prescribed formula, diet and developmental needs.
 - e. The caregiver(s) shall offer water to infants and toddlers at frequent intervals.
 - f. The caregiver(s) shall provide the following types of equipment and space:
 - (1) Indoor areas protected from general walkways within the home, where crawling children can be on the floor at least part of the day to explore.
 - (2) Toys and materials which afford opportunities for the children to learn through seeing, feeling, hearing, smelling, and tasting.
 - (3) Comfortable chairs to use when feeding, holding or playing with the children.
 - (4) Sleeping equipment including cribs for infants who have not yet begun to climb and low cots for the other children. In a facility with limited space in which cribs and other bulky equipment would leave too little area for floor space, individual floor pads are adequate, provided that the floors are clean, warm and free from drafts.
4. **SUGGESTED STANDARD: Space.** A family child care home shall have sufficient indoor and outdoor space for the activities of the children.

EVIDENCE OF COMPLIANCE:

- a. The operator shall provide at least 35 square feet of indoor space per child (exclusive of bathrooms and storage places). Halls may be counted as indoor space if approved by the appropriate fire official.

POLICY: All rooms shall be measured baseboard to baseboard, where the floor meets the wall. (1/31/06)

- b. The operator shall provide at least 75 square feet per child of outdoor space. Where the outdoor space is not available at the facility, the operator may utilize parks or other outdoor play areas which are easily accessible.

POLICY: The measuring wheel may be used outside to measure the playground only.
(1/31/06)

5. **SUGGESTED STANDARD: Equipment and Materials.** A family child care home shall have available material and equipment appropriate to the needs of the children in care.
6. **SUGGESTED STANDARD: Disciplinary Practices.** Disciplinary practices shall be according to the following requirements:
 1. Limits or rules shall be those necessary to safeguard the children and premises and stated on the children's level of understanding.
 2. No corporal punishment shall be used, except when authorized in writing by the parent(s).
 3. Caregiver(s) shall not deprive children of meals, naps, or bathroom procedures.
7. **SUGGESTED STANDARD: Overnight Care.** A family child care home offering overnight care shall provide for the special needs of children during the night, shall adapt to the day/night routines of the parents, and shall assure sufficient, unbroken periods of sleep for the children.
EVIDENCE OF COMPLIANCE:
 - a. The operator shall schedule an additional caregiver during sleeping hours to provide for the needs of the children and to respond to emergencies.
 - b. The operator shall encourage parent(s) to leave and pick up their children before and after normal sleeping period so that there is minimal disturbance of the child during sleep.
 - c. The operator shall provide comfortable beds or cots and complete bedding and make arrangements with parent(s) for nightclothes. (Refer to Suggested Standard IV.B.5.a.(2))
8. **SUGGESTED STANDARD: Drop-in Care.** Drop-in care shall be offered only if this practice does not cause the operator to exceed the number of children for which the family child care home has been licensed.

D. Food

1. **SUGGESTED STANDARD: Nutritional Needs.** Food of a quantity, variety and quality to meet the daily nutritional needs of the children shall be provided during whatever part of the 24 hour day they are in the family child care home.
EVIDENCE OF COMPLIANCE:
 - a. Regular meals and snacks with no more than four hours between food services during the period from 6:00 a.m. to 9:00 p.m. (Refer to Appendix for suggestions related to daily food requirements).
 - b. Milk or full strength fruit or vegetable juice shall be served at least once a day.

- c. If food is provided by the facility, daily menus shall be plainly posted.

POLICY: All foods, including milk, must be served by the date indicated on the container or package. (7/30/09)

- 2. **SUGGESTED STANDARD: Drinking Water.** The family child care home shall have safe drinking water readily accessible to children of all ages.

IV. SANITATION AND SAFETY PROVISIONS

A. Safety Precautions

- 1. **SUGGESTED STANDARD: Disaster Plan.** The operator shall develop a disaster plan in case of fire or emergencies which shall be put in writing and tested with the children at regular intervals.

POLICY: Staff orientation shall include training on the evacuation plan. The plan must include a posted evacuation route, the procedures followed during evacuation, and an alternative destination. (revised 5/1/06)

- 2. **SUGGESTED STANDARD: Accident Prevention.** The operator of a family child care home shall provide premises which minimize the risk of accidental injury.

EVIDENCE OF COMPLIANCE:

- a. **Outdoor play Areas.** Outdoor play areas shall be protected by fencing or some type of barrier if location is readily accessible to street or highways or otherwise dangerous.
 - b. **Building and Grounds**
 - (1) Outside stairs, walkways, ramps and porches shall be maintained free from accumulations of water, ice, or snow.
 - (2) Stairs and ramps, if hazardous, shall be provided with handrails.
 - (3) Where clear glass is used in exterior windows less than 32 inches above floor level, the glass shall be of safety grade.
 - c. **Storage of Harmful Items.** Flammable liquids, cleaning supplies, detergents, matches, lighters, medications and other such harmful items shall be kept inaccessible to children.
- 3. **SUGGESTED STANDARD: Safety of Equipment.** Equipment used with or by the children shall be kept reasonably free of hazards.
- EVIDENCE OF COMPLIANCE:**
- a. **Indoor equipment, furnishings and toys** shall be of safe construction, free from sharp edges and loose or rusty points. No toy accessible to infants and toddlers shall be small enough to swallow.

- b. Outdoor play equipment shall be free of jagged edges and rust, made of durable, nonpoisonous material, and sturdy. Stationary outdoor equipment shall be firmly anchored.
 - c. When cribs and playpens are required after the effective date of these regulations, the safety requirements developed by the United States Consumer Product Safety Commission shall be observed. (Refer to Appendix for address.)
4. **SUGGESTED STANDARD: Emergency Phone Numbers.** Emergency telephone numbers shall be available by a specified telephone which is readily accessible in the child care home.
- EVIDENCE OF COMPLIANCE:**
- a. The following telephone numbers shall be posted by the telephone:
 - (1) Ambulance service and emergency service plan.
 - (2) Police department.
 - (3) Fire department.
 - b. Other emergency numbers shall be available near the telephone. These numbers shall include:
 - (1) The number of the physician designated by the parent(s).
 - (2) Home and business numbers of the parent(s).
 (Enrollment information or health forms kept in a readily accessible location constitute compliance.)

B. Environmental Sanitation

1. **SUGGESTED STANDARD: Facility and Grounds.** The facility and grounds shall be situated, equipped and maintained as needed in order to safeguard the health of the users.

POLICY: Knowledge of any significant health or safety risk, including but not limited to soil, water, or building contamination, is grounds for denial of an approval, license or registration to operate a child care facility. (4/01/08)

EVIDENCE OF COMPLIANCE:

- a. **Site.** The facility shall be located in an area reasonably free from health hazards, such as open drainage, ditches, wells, holes, and other natural or man-made obstacles.
- b. **Outdoor Areas.** Outdoor areas shall be kept neat, clean, and free of litter.
- c. **Vermin Control.** Measures for the control of insects, rodents and other vermin shall be applied to prevent harborage, breeding and infestation of the premises.
- d. **Floors.** Floors shall have smooth, washable surface and shall be kept clean, in good repair, and free from hazards. If carpeting is used, it shall be cleaned regularly and repaired if torn.
- e. **Walls and Ceilings.** Walls and ceiling shall be in sound condition and clean. No lead-based paint (0.5 lead compound per cent of the

total weight of the contained solids or dried paint) shall be used on interior and exterior surfaces accessible to children.

- f. Lighting and Ventilation. All rooms shall be adequately lighted and ventilated. Lighting on the task shall never be less than 30-foot candles. Lights and ventilation systems shall comply with the local and/or state building codes, whichever is more stringent.
- g. Animals. Healthy animals, which present no apparent threat, shall be permitted, providing they are properly housed, cared for and have required rabies inoculation.

POLICY: Regarding animals in Family Child Care Homes, DHEC states that animals are allowed as long as they are housed properly. Children should always wash their hands thoroughly after contact with animals. (1/31/06)

POLICY: Dogs, cat and ferrets must have rabies vaccinations. (8/1/06)

POLICY: Green slider turtles are not allowed in facilities because they carry salmonella. (8/1/06)

POLICY: Reptiles may not be handled by children. Staff who handle and prepare food shall not handle reptiles due to the salmonella threat. (1/31/06)

- h. Protection of Openings. Windows and other similar openings shall be protected or otherwise remain closed.

2. SUGGESTED STANDARD: Water Supply. The water supply shall meet the bacteriological, chemical, and physical requirements of the South Carolina Department of Health and Environmental Control.

EVIDENCE OF COMPLIANCE:

- a. Approved Source of Supply. Water shall be accessible from an approved source of supply, in adequate amounts, under pressure (21 psi. recommended). If a private water supply is used, the operator shall obtain approval from the South Carolina Department of Health and Environmental Control to assure safe location, construction, and proper maintenance and operation of the system.
- b. Adequate Supply of Water. Water under pressure shall be supplied to the kitchen area where food is processed or handled; laundry room and bathroom. Where hot water is provided, the temperatures shall not exceed 120° F, except that where mechanical dishwashing is used, an adequate supply of 160° water shall be available to the machine. The operator shall supply mixing faucets at all lavatory fixtures, where hot water is provided.
- c. Drinking Cups. Each individual shall be provided with a drinking cup, unless disposable cups are used. The use of "common drinking cups" are prohibited. Disposable cups, if used, shall be stored to prevent contamination.

3. **SUGGESTED STANDARD: Toilets and Lavatories.** Sufficient toileting and lavatory facilities shall be provided.

EVIDENCE OF COMPLIANCE:

- a. **Minimum Toilet and Lavatory Units:**
 - (1) One (1) flush toilet.
 - (2) One (1) lavatory.
- b. **Types of Units for Children.** Safe step stools shall be provided to allow standard-sized toilets and lavatories to be used. Training equipment shall be available to children who need it.
- c. **Bathroom.** Water under pressure, soap and single service towels shall be provided.

POLICY: Bar soap is not allowed. (1/31/06)

- d. **Diaper Changing and Disposal.** Facilities caring for infants shall provide a surface with clean covering for each changing process. Feces shall be disposed of through the sewerage system and soiled diapers placed in a plastic lined, covered, leakproof container, which shall be emptied and cleaned daily.

SEE RESOURCE MANUAL SECTION 6 FOR APPROVED SANITIZERS FOR DIAPER CHANGING TABLES. *(National Health and Safety Performance Standards, Second Edition)*

POLICY: Only bleach/water solution may be used on the diaper changing table. Allow to dry for ten (10) seconds and then it may be wiped with a clean paper towel or clean dry cloth. Old bleach/water solution should be discarded and a new bleach/water solution made for use on a daily basis, either at the beginning of the day or at the end of the day. (amended 11/3/10)

4. **SUGGESTED STANDARD: Waste Disposal.** The facility shall follow approved sanitary methods of disposal of wastes.

EVIDENCE OF COMPLIANCE:

- a. **Liquid Waste Disposal.** All sewerage and liquid waste shall be disposed of in a manner not to create a public health hazard and by sanitary methods approved by the local health officials. Where public sewerage systems are provided, this shall be the method of disposal.
- b. **Solid Waste Disposal.** Refuse shall be stored in containers or designated areas in an approved manner. Garbage and other putrid material shall be stored in durable, rust-resistant, nonabsorbent, water-tight, air-tight, rodent-proof, easily cleaned containers away from the reach of children. All solid waste shall be disposed of at sufficient frequencies and manner so as not to create a rodent, insect, or other vermin problem.

5. **SUGGESTED STANDARD: Sleeping and Resting Equipment.** Individual, comfortable and sanitary equipment for sleeping and resting shall be provided.

EVIDENCE OF COMPLIANCE:a. Beds, Cots, Cribs, Mats.

(1) For daytime rest and nap periods. A separate bed, cot, crib or mat shall be assigned each individual for use during rest or nap periods. If mats are used, they shall be made of waterproof washable material and shall be stored and handled in such a manner that the sleeping surface does not contact the floor. If linen is provided, it shall be clean and available for each individual user.

(2) For Overnight Care. If the facility offers overnight care, a bed or cot with a mattress shall be provided. The size of the bed or cot with a mattress shall be provided. The size of the bed or cot shall be appropriate to the age and the size of the user. Each mattress shall be equipped with a waterproof cover or protected. Individual, clean linen shall be provided. Covering shall be available, as necessary.

b. Placement of Equipment. Placement of beds, cots, cribs, or mats shall allow staff to have ready access to each individual.6. SUGGESTED STANDARD: Food and Drink. All food and drink shall be prepared, served and stored so that sanitary cooking methods are observed, nutrients retained and spoilage prevented.EVIDENCE OF COMPLIANCE:a. Storage, Preparation and Serving of Food(1) Maintenance of Food.

- The operator shall provide refrigeration units and insulated facilities as needed to assure the maintenance of all food at 45° or below except during preparation and service.
- Frozen food shall be kept at such temperatures as to remain frozen except when being thawed at refrigerator temperatures of 45° or below; or under cool, potable running water (70° F or below); or quick-thawed as part of the cooking process.
- Containers of food shall be stored above the floor, on clean surfaces, in such a manner as to be protected from splash and other contamination.
- Food not subject to further washing or cooking before serving shall be stored in such a manner as to be protected against contamination from food requiring washing or cooking.

(2) Handling of Food. Utensils, such as forks, knives, tongs, spoons, scoops, shall be provided and used to minimize handling of food at all points where food is prepared.

b. Cleaning and Storage of Utensils and Equipment.(1) Cleaning Procedures.

- After each usage, all tableware shall be thoroughly cleaned to sight and touch.
 - After each usage, all kitchenware and food-contact surfaces used in the preparation, serving and storage of food, shall be thoroughly cleaned to sight and touch.
 - When manual dishwashing is employed, equipment and utensils shall be thoroughly washed in a detergent solution which is kept reasonably clean and then shall be rinsed free of such solution. Utensils shall be sanitized with one of the following methods:
 - Immersion for a period of at least one (1) minute in a sanitizing solution containing:
 - At least 50 ppm of available iodine in a solution having a pH not higher than 5.0 and a temperature of not less than 75° F ; or
 - Any other chemical-sanitizing agent which has been demonstrated to the satisfaction of the health authority to be effective and non-toxic under use conditions, and for which a suitable field test is available. Such sanitizing agents, in use solutions, shall provide the equivalent bactericidal effect of a solution containing at least 50 ppm of available chlorine at a temperature no less than 75°F.
- (2) Types of Sinks. An approved two-compartment sink and a container of adequate length, width, and depth to completely immerse all tableware for final sanitization shall be provided in facilities beginning operation after the effective date of these standards. A one-compartment sink shall be approved in facilities operating prior to the effective date of these standards, provided that a container shall be furnished of adequate length, width, and depth to completely immerse all tableware for final sanitization. Hot water sanitizing is discouraged due to a possible health hazard in using extremely hot water of 170° F.
- (3) Dishwashing Machine. If a dishwashing machine is used, it shall meet the standards for sanitization required by the State Department of Health and Environmental Control.
- (4) Handling of Utensils and Equipment. Food-contact surfaces of cleaned and sanitized equipment and utensils shall be handled in such a manner so as to be protected from contamination.
- (5) Storing of Utensils and Equipment. Cleaned and sanitized utensils shall be stored above the floor in a clean, dry location so that food-contact surfaces are protected from contamination.
- (6) Use of Single Service Articles. Facilities which do not have adequate and effective equipment for cleaning and sanitizing utensils shall use single service articles. Single service articles shall be used only once. Single service articles shall be stored

in closed cartons or containers which protect them from contamination.

c. Protection of Food and Food Supplies

(1) Protection Against Contamination. All food being stored, prepared or served shall be protected against contamination.

(2) Protection Against Spoilage and Toxic Materials. All perishable food like fruits and vegetables shall be stored at such temperatures as will protect against spoilage. All raw fruits and vegetables shall be washed thoroughly before being cooked or served, to remove poisonous and toxic materials.

(3) Cooking, Preparation and Procedures. Stuffings, poultry, and stuffed meats and poultry, shall be heated throughout to a minimum temperature of 165° F with no interruption of the initial cooking process.

- Pork and pork products which have not been specially treated to destroy Trichinae shall be thoroughly cooked to heat all parts of the meat to at least 150° F.

POLICY: The FDA requires pork products to be cooked to a temperature of at least 155 degrees. (8/1/06)

- Potentially hazardous food such as meat salads, potato salad and cream-filled pastries shall be prepared (preferably from chilled products) with a minimum of manual contact and on surfaces and with utensils which are clean, and which, prior to use, have been sanitized.
- Custards, cream fillings or similar products which are prepared by hot or cold processes shall be kept at safe temperatures except during necessary periods of preparation and service.

(4) Use of Milk Products. Grade A Pasteurized fluid milk and fluid milk products or pasteurized dry milk or evaporated milk shall be served.

(5) No Reuse of Food. Individual portions of food once served shall not be served again.

d. Food and Drink for Infants. In facilities offering care to infants, formula, juice and baby food served in a baby bottle shall be fully prepared and packaged (ready-to-feed) and identified for the appropriate child at the child's home and provided daily by the parent/guardian; or formula and juice served in a baby bottle shall be provided by the facility as a ready-to-feed, fully prepared and packaged single-use item; or formula and juice may be provided in a manner specifically approved by the local health authority. Any excess formula or juice shall be discarded after each feeding. Formula and juice which require refrigeration and baby food (after

opening and re-covering) shall be identified for the appropriate child and shall be refrigerated at 45° F or below.

C. Fire Safety

SUGGESTED STANDARD: Fire Safety. Family child care homes shall comply with the regulations and the codes of the State Fire Marshal.

APPENDIX 1 SOURCES OF INFORMATION

LICENSING CHILD CARE FACILITIES

For more information on the regulation of child care facilities, please contact the Department of Social Services Child Care Licensing and Regulatory Services Regional Office which serves the county in which the facility is located. Additional information may be found on the DSS website, www.dss.state.sc.us/dss.

SECURING FORMS

Please contact the Department of Social Services Child Care Regulatory Services Regional Office which serves the county in which the facility is located. Additional information may be found on the DSS website, www.dss.state.sc.us/dss.

REPORTING CHILD ABUSE AND NEGLECT

Contact the County Department of Social Services.

IMMUNIZATION INFORMATION

Information about required immunizations and ways to obtain the "Certificate of Immunization" can be secured from family physicians, local health departments, or the South Carolina Department of Health and Environmental Control.

RULES AND REGULATIONS RELATING TO PUBLIC SWIMMING POOLS

South Carolina Department of Health and Environmental Control
2600 Bull Street
Columbia, S.C. 29201

CRIB SAFETY

United States Consumer Product Safety Commission
Washington, D.C. 20207

CHILD LABOR LAWS AND REGULATIONS

South Carolina Department of Labor
3600 Forest Drive
Columbia, S.C. 29204

APPENDIX 2
REQUIRED DAILY AMOUNTS OF FOOD TO SERVE BOYS AND GIRLS
For Information Only

(Based on the National Resource Council's Recommended Dietary Allowances)

Patterns	1 year up to 3 years	3 years up to 6 years	6 years up to 12 years
<u>Breakfast Pattern</u>			
Juice ¹ or Fruit	1/4 cup	½ cup	1/2 cup
Cereal and/or Bread ²			
Cereal	1/4 cup	1/3 cup	3/4 cup
Bread ³	1/2 slice	½ slice	1 slice
Milk	1/2 cup	¾ cup	1 cup
<u>Lunch and/or Supper Pattern</u>			
Meat and/or Alternate:			
Meat, Poultry, Fish	1 ounce	1 - 1 1/2 ounces	2 ounces
Cheese	1 ounce	1 - 1 1/2 ounces	2 ounces
Egg ⁴	1	1	1
Cooked Dry Beans and Peas	1/8 cup	¼ cup	1/3 - 1/2 cup
Peanut Butter	1 tablespoon	2 tablespoons	3 - 4 tablespoons
Vegetable and/or Fruits ⁵	1/4 cup	½ cup	3/4 cup
Bread	1/2 slice	½ slice	1 slice
Butter or Fortified Margarine	1/2 teaspoon	½ teaspoon	1 teaspoon
Milk	1/2 cup	¾ cup	1 cup
<u>AM or PM Supplement</u>			
Milk or Juice as Fruit or Vegetable	1/2 cup	½ cup	1 cup
Bread and/or Cereal			
Bread	1/2 slice	½ slice	1 slice
Cereal	1/4 cup	1/3 cup	3/4 cup

¹ Full strength fruit or vegetable juice.

² Enriched or whole grain.

³ Or an equivalent quantity of cornbread, biscuits, rolls, or muffins, etc., made of whole grain or enriched meal or flour.

⁴ When an egg is served as main dish for children above 6 years use in addition a half portion of meat or meat alternate.

⁵ Must include at least two kinds.