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Date of Inspection:						
Section	Regulation#	Reg Description	C	NC	NA	Description NC
§78-18-4. Certificate of License Procedures.	4.1.	Application for License.				
	4.1.a.	Any family child care facility that operates in West Virginia shall apply for and obtain a certificate of license from the Secretary before beginning operations and accepting children for care.				
	4.1.b.	A family child care facility shall submit an application for renewal of a current license at least 60 days before expiration of the current certificate of license.				
	4.1.c.	Applications for licensure as a family child care facility shall be made separately for each facility to be licensed.				
	4.2.	General Requirements.				
	4.2.a.	A certificate of license is not transferable to a third party and applies only to a facility and its location as stated in the application for licensure.				
	4.2.b.	If the ownership of a facility changes, the new owner shall submit an application for a certificate of license. The facility shall not operate until a certificate of license has been issued by the Secretary.				
	4.2.c.	The certificate of license shall be publicly displayed.				
	4.2.d.	A family child care facility may be located in the provider's residence or a separate building.				
	4.3.	Departmental Action on Applications for Certificate of License. Within 60 days of receipt of an application, the Secretary shall provide a written decision to the family child care facility that does one of the following:				
	4.3.a.	Issues an initial six-month license to an applicant establishing a new service found to be in compliance on initial review with regard to policy, procedure, risk management, human resources, service environment, and record-keeping rules;				
	4.3.b.	Issues a regular certificate of license to a facility that complies with the provisions of the West Virginia Code §49-2-101 and the requirements of this rule. A regular license is valid for a period of up to two years from the date of issuance unless revoked or modified to a provisional status;				
	4.3.c.	Issues a provisional certificate of license to a facility that is not in compliance with the provisions of this rule, if operation does not pose a significant risk to the rights, well-being, health, and safety of children. A provisional license expires no more than six months from the date of issuance and may not be reissued unless the recommendation is that of the State Fire Marshal; or				
	4.3.d.	Denies the application for license if the facility does not substantially comply with the requirements of this rule.				
	4.4.	Terms and Conditions of Licensure.				
	4.4.a.	The Department shall inspect every certified family child care facility prior to issuing a certificate of license to determine compliance with this rule.				
	4.4.b.	The Secretary shall have immediate and open access to the premises of a facility and to all aspects of a facility's operation, including personnel, children in care, household members, and records of each facility, including, but not limited to, case records on children and personnel, corporate, and financial records. Inspections may be made with or without prior notice as a condition of licensure.				
	4.4.c.	Applicants shall maintain compliance with applicable rules of the Bureau for Public Health, and the State Fire Marshal, and the Department of Agricultural Pest Management at all times.				
	4.4.d.	Prior to implementing any significant change in its program that was not included in its initial application for a certificate of license, a facility shall submit an application for an amendment to its certificate of license.				
	4.5.	Limitations on a Certificate of License.				
	4.5.a.	The Secretary may place limitations on a certificate of license based on findings of:				
	4.5.a.1.	Insufficient space in the facility;				
	4.5.a.2.	Inadequate sleeping areas;				
	4.5.a.3.	The provision of other home-based services such as foster care and adult family care; or				
	4.5.a.4.	Non-compliance issues that require a plan of correction approved by the Secretary.				
	4.5.b.	Limitations may apply to:				
	4.5.b.1.	The age, sex, and type of problems of the children in care;				
	4.5.b.2.	The intake of additional children; or				
	4.5.b.3.	The total number of children in the home.				
	4.6.	Waivers and Variances.				
	4.6.a.	A family child care facility may request a waiver or variance of any requirement in this rule if:				
	4.6.a.1.	The health, safety, or well-being of children in the home is not adversely affected; and				
	4.6.a.2.	The rule does not prohibit a waiver or variance for the requirement.				
	4.6.b.	The request for waiver or variance shall be in writing, addressed to the Secretary, and shall include the following information:				

	4.6.b.1.	The specific requirement to be waived or varied;				
	4.6.b.2.	The reasons for seeking a waiver and why a specific requirement should not be applied in a particular circumstance; and				
	4.6.b.3.	The reasons for seeking a variance and how compliance with a specific requirement of this rule can be accomplished in a manner different from that set forth in W. Va. Code §49-2-101 or in this rule.				
	4.7.	Closure of a Family Child Care Facility.				
	4.7.a.	The Secretary may deny, refuse to renew, or revoke a license if the facility materially violates any provisions of W. Va. Code §49-2-101, violates any terms or conditions of the certificate of license, or fails to maintain established requirements of child care.				
	4.7.b.	If the Secretary finds that the operation of a family child care facility constitutes an immediate danger of serious harm to children served by the facility, the Secretary shall issue an order of closure terminating the operation of the facility.				
	4.7.c.	A facility ordered closed by the Secretary may not operate pending administrative or judicial review without a court order.				
	4.7.d.	The pendency of administrative or judicial review shall not prevent the Secretary from obtaining injunctive relief pursuant to W. Va. Code §49-2-120.				
<b>§78-18-5. Inspection and Investigation.</b>	5.1.	Before issuing a certificate of license, the Secretary shall investigate the facility, its proposed program, and any persons responsible for the custody and care of children placed in that facility. This investigation shall include, but not be limited to, the following:				
	5.1.a.	An evaluation of a facility's proposed services and the facility's ability to maintain compliance with this rule; and				
	5.1.b.	A review of information including criminal history background checks, medical records, character and financial resources of the applicant, owners, employees, and other household members.				
	5.2.	A facility shall cooperate in the investigation of complaints against the facility including submission of items such as health or psychological examinations, and other third-party verifications.				
<b>§78-18-6. Administration of the Family Child Care Facility.</b>	6.1.	The operator and/or owner of a family child care facility shall administer the facility in a manner that complies with all of the requirements established for this category of care and all applicable Federal and State laws, ordinances, rules, and regulations.				
	6.2.	In addition to the certificate of license, the operator shall display the following items in a prominent place for review by parents and staff:				
	6.2.a.	Current menus for all meals and snacks served by the facility;				
	6.2.b.	An emergency exit plan and a record of the required monthly fire drills for the past 12 months;				
	6.2.c.	A copy of the "Family Child Care Facility Licensing Requirements" for use by staff and parents;				
	6.2.d.	A daily activity schedule, including field trips; and				
	6.2.e.	The most recent inspection reports from the State Fire Marshal and the Bureau for Public Health as required by this rule.				
	6.3.	A facility shall obtain information about the child's developmental history, personal characteristics, and special needs.				
	6.4.	A facility shall maintain confidential records on the children that include the following information:				
	6.4.a.	The child's full name, address, telephone number, birth date, and date of enrollment;				
	6.4.b.	Emergency contact information which shall be updated when information changes and shall include:				
	6.4.b.1.	Home and work addresses and telephone numbers of the parents;				
	6.4.b.2.	The names, addresses, and telephone numbers of any persons authorized to pick up the child;				
	6.4.b.3.	The name of the child's physician or other health care provider; and				
	6.4.b.4.	The names of emergency contact persons;				
	6.4.c.	Health insurance coverage and policy number for the child;				
	6.4.d.	Written authorization signed by the parents for emergency medical treatment transportation field trips and water activities;				
	6.4.e.	A report of the child's most recent medical checkup, which shall be supplied by the parents within 30 days of the child's enrollment. The facility shall provide parents with a West Virginia HealthCheck periodicity chart for child health exams and shall ensure that a child's health assessment is updated with new or current information at least every two years for the child under the age of six years;				
	6.4.f.	A report of the child's most recent immunization records which shall be supplied by the parents based on the following guidelines:				
	6.4.f.1.	Immunization records shall be updated every two years and shall be completed based on the schedule recommended by the Department.				
	6.4.f.2.	If immunizations are not current, the facility shall obtain a schedule for completion from the parent for the caregiver's files. A grace period is permitted for children experiencing homelessness and children in foster care based on the individual circumstances of the child.				
	6.4.f.3.	Exemption from immunization requirements shall be available for parents who provide a signed statement from a child's health care provider indicating that immunization is contraindicated based on the child's medical condition;				
	6.4.g.	Daily attendance records which include the name of the provider, the parents' complete names, sign in/sign out information, and dates and times with the designation a.m. or p.m.;				

	6.4.h.	Written reports of accidents, injuries, or illnesses involving a child while at the facility;				
	6.4.i.	Written consent and instructions signed by parents regarding medications or special dietary needs;				
	6.4.j.	A statement of any special needs of the child including allergies, existing illness or injuries, previous illnesses or injuries, and any medication prescribed for long-term continuous use; and				
	6.4.k.	The names and telephone numbers of schools for all school-aged children.				
	6.5.	Records on all staff including the operator, substitutes, and volunteers, as appropriate, shall include:				
	6.5.a.	The staff person's name, date of birth, home address, telephone number of an emergency contact, and the date of employment and/or termination;				
	6.5.b.	Documentation of the staff person's qualifications and education or training attended in relation to early childhood development, past employment, and experience with children and a pre-service training certificate completed prior to hire;				
	6.5.c.	Application forms or materials, if any, including at least two letters of reference.				
	6.5.d.	Evidence of a completed criminal history background check for each individual volunteer, employee, or household member over the age of 18 including:				
	6.5.d.1.	WV CARES self-disclosure application and consent form signed by the individual indicating any past criminal conviction or any pending charges;				
	6.5.d.2.	A variance or waiver if the individual has convictions or pending charges of disqualifying offenses;				
	6.5.d.3.	A fitness determination of eligibility from the WV CARES unit; and				
	6.5.d.4.	An examination of the previous five years of protective services records for the state of West Virginia and any other state the individual has resided in as an adult.				
	6.5.e.	Documentation of required medical examinations that:				
	6.5.e.1.	Includes the results from a tuberculosis risk assessment screening, TB skin test, or chest x-ray;				
	6.5.e.2.	Were completed no more than six months prior to nor more than 30 days after employment.				
	6.5.e.3.	Lists of regular volunteers and household members with documentation of tuberculosis risk assessment screening, TB skin test, or chest x-ray.				
	6.5.f.	The operator shall obtain a medical examination within 30 days of application for a certificate of licensure and upon application for renewal.				
	6.5.f.1.	Medical examination documentation shall indicate that the operator has no physical or mental condition that would negatively impact the provision of child care services.				
	6.6.	A facility shall maintain all records in a confidential manner and shall not provide, release, or make available information from any child's or employee's record except to:				
	6.6.a.	Persons authorized by law;				
	6.6.b.	The child or a parent of the child as defined in subsection 3.8 of this rule;				
	6.6.c.	Persons authorized, in writing, by the parents of the child; and				
	6.6.d.	Employees or representatives of the Department.				
	6.7.	The facility shall maintain staffing schedules for up to 12 months to demonstrate that the facility meets staff-to-child ratios.				
	6.8.	The facility shall carry fire and liability insurance as a protection for the children in care. A copy of the current policy shall be maintained on file at the facility.				
<b>§78-18-7. Family Child Care Facility Personnel.</b>	7.1.	<u>Staffing/Facility Capacity.</u>				
	7.1.a.	A family child care facility shall have two staff members on duty who provide care for and supervision of the children if the facility provides care to more than two children under 24 months of age or more than six children at the same time.				
	7.1.b.	When determining the ratio between staff members and children, a family child care facility shall include all children 12 years of age and under who are present and cared for in the facility, including any child of the director, staff members, and friends of the child.				
	7.1.c.	No operator or staff member shall be used to meet staff-to-child ratios for more than two consecutive eight-hour shifts of care.				
	7.2.	Substitutes.				
	7.2.a.	The facility may use a substitute to allow for staff persons to take vacation or short-term medical leave or to take care of routine appointments. However, use of a substitute shall be limited to no more than 20 days, at eight hours per day, per year, and the facility shall notify parents in advance when use of a substitute is necessary for non-emergency situations. Substitutes shall have approved training in pediatric cardio-pulmonary resuscitation, pre-service training, and receive an orientation from the operator.				

	7.2.b.	A regular substitute caregiver used more frequently than 20 days per year at eight hours per day, shall meet the same qualifications that apply to new staff, including requirements with regard to criminal history background checks.				
	7.3.	Programming of Children's Activities.				
	7.3.a.	The operator shall provide a planned program of activities geared to the child's individual needs and developmental levels, which are designed to promote the development of language and thinking skills, large and small muscles, social skills, self-esteem, and positive self-image.				
	7.3.b.	Daily activities shall provide the following:				
	7.3.b.1.	Regularity of such routines as meals and nap periods with flexibility to respond to a child's individual needs;				
	7.3.b.2.	A balance of active and quiet activities;				
	7.3.b.3.	Individual and group activities;				
	7.3.b.4.	Daily indoor and outdoor activities that make use of large and small muscles;				
	7.3.b.5.	Participation in vigorous outdoor play whenever temperatures are above 40 degrees Fahrenheit and weather conditions permit;				
	7.3.b.6.	Opportunities for children to select individual projects such as creative activities, crafts, games, or homework, and play independently, as well as to do activities that require adult involvement and supervision;				
	7.3.b.7.	Sufficient time to complete activities without long waiting periods between activities or prolonged periods where the children must stand or sit;				
	7.3.b.8.	Varieties of creative activities including arts and crafts, dramatic play, stories, and books and science and building toys; and				
	7.3.b.9.	Opportunities to practice self-help skills such as feeding, dressing, toileting, hand washing, and grooming skills which foster independence in the child.				
	7.3.c.	Age-appropriate books shall be read on a daily basis to children between the ages of six months and five years of age.				
	7.3.d.	School age children shall be provided with opportunities to:				
	7.3.d.1.	Have periods for rest and relaxation;				
	7.3.d.2.	Select individual projects such as homework;				
	7.3.d.3.	Become involved with friends their own age; and				
	7.3.d.4.	Join in group play and community activities.				
	7.3.e.	Television, video games, and video tapes are allowed if the content is designed for and is of benefit to a child and viewing time is limited. Adult programming rated "PG 13," "R," and "X" or song lyrics which contain either violent or sexually explicit scenes or language are prohibited.				
§78-18-8. Guidance and Discipline.	8.1.	Guidance. The facility shall have a written policy on guidance of children which staff shall follow. The policy shall be consistent with the following guidelines:				
	8.1.a.	The staff and parents shall discuss and agree upon positive methods of guidance that encourage a child's acceptable behavior;				
	8.1.b.	The staff shall use guidance that helps a child understand appropriate behavior and is appropriate to the child's age;				
	8.1.c.	A facility shall have rules that are fair, consistent, and relevant to the children's ages; and				
	8.1.d.	Facility staff may use a time-out that is based on the following guidelines.				
	8.1.d.1.	Time-outs shall be used only:				
	8.1.d.2.	As a supplement to positive approaches to discipline;				
	8.1.d.2.	For the purpose of helping children regain control;				
	8.1.d.3.	For brief periods of approximately one minute for each year of a child's age;				
	8.1.d.4.	After the caregiver has discussed the reason for the time-out with the child in a way that the child can understand; and				
	8.1.d.5.	If children removed from groups remain under visual supervision and are never unattended or placed behind closed doors.				
	8.2.	Discipline.				
	8.2.a.	A caregiver, household member, visitor, or substitute shall not use any of the following harmful forms of discipline:				
	8.2.a.1.	Punishing a child physically including spanking, hitting, kicking, biting, shaking, swatting, thumping, pinching, popping, shoving, spitting, or other cruel treatment;				
	8.2.a.2.	Punishing or threatening a child in association with food, sleep, rest, or toilet training;				
	8.2.a.3.	Putting anything in or on a child's mouth as punishment;				
	8.2.a.4.	Confining a child in a closet or locked room or using physical restraints for confinement;				
	8.2.a.5.	Using loud, profane, or abusive language or threats of physical punishment;				
	8.2.a.6.	Punishing a child psychologically including public or private humiliation, shaming, and negative remarks about the child or child's family;				
	8.2.a.7.	Punishing a child emotionally including rejecting, terrorizing, ignoring, or isolating the child; and				
	8.2.a.8.	Allowing a child to discipline other children.				
	8.2.b.	A caregiver shall not seek or accept parental permission to use any punishments or acts prohibited in this rule.				

	8.2.c.	The facility operator shall share the guidance and discipline policy with all parents, caregivers, aides, volunteers, and all individuals residing in or visiting the facility. All of these persons shall agree to abide by its content.				
	8.2.d.	Only adult staff with direct supervisory responsibilities for children may discipline children. No child or other household member shall be delegated or permitted to discipline children in care.				
§78-18-9. Transportation.	9.1.	When transportation is provided by the facility, staff shall observe the following precautions:				
	9.1.a.	Transport vehicles shall be in safe running condition and have current insurance, an inspection sticker, and a license, according to state law;				
	9.1.b.	Drivers shall be at least 18 years of age and appropriately licensed;				
	9.1.c.	The driver and vehicle shall comply with all applicable motor vehicle laws;				
	9.1.d.	Staff shall not leave any child unattended in a vehicle;				
	9.1.e.	Each child shall be secured in an approved child safety seat or secured with seat belts at a ratio of one child per seat belt as required by W. Va. Code §17C-15-56; and				
	9.1.f.	Staff shall carry children's emergency consent forms in the vehicle in case of accident or illness.				
	9.2.	Field Trips.				
	9.2.a.	During field trips, staff shall provide direct supervision to all children, regardless of age;				
	9.2.b.	When field trips are scheduled, staff shall notify parents prior to each excursion; and				
	9.2.c.	The facility shall have written permission on file or obtain written permission prior to each field trip.				
	9.2.d.	The facility shall have a written field trip plan that includes:				
	9.2.d.1.	The names of the children, staff members, and any other participants on the field trip;				
	9.2.d.2.	The departure and return times;				
	9.2.d.3.	The means of travel and the routes to be taken;				
	9.2.d.4.	An alternate plan in case of bad weather;				
	9.2.d.5.	The name of the contact person at the facility, if applicable;				
	9.2.d.6.	The name, address, and telephone number, if applicable, of each destination;				
	9.2.d.7.	Relevant safety rules to be followed; and				
	9.2.d.8.	Special emergency procedures.				
	9.3.	Water Activities.				
	9.3.a	For all Level I and Level II water activities, the facility shall:				
	9.3.a.1.	Obtain prior written permission from parents for children to participate;				
	9.3.a.2.	Be physically present at the site of any water play and provide constant, direct supervision of all children;				
	9.3.a.3.	Ensure that an adult swimmer is present for Level II water activities,				
	9.3.a.4.	Ensure that life guards are present when taking children to a swimming area outside of the family child care facility;				
	9.3.a.5.	Provide simple water safety rules to children based on their ages and developmental levels; and				
	9.3.a.6.	Ensure that children who are not toilet trained wear swim diapers during water play of any kind.				
	9.3.b.	Ensure that a second adult is available to supervise when:				
	9.3.b.1.	Some children are not swimming; and				
	9.3.b.2.	More than three children under six years of age are participating in Level II swimming activities.				
	9.3.c.	When a child is participating in a Level I or Level II water activity, except a swimming lesson with a qualified instructor, a facility shall provide direct supervision to all children, regardless of age.				
	9.3.d.	When two or more children 24 months of age and under are participating in a Level I or Level II water activity in a mixed age group, except a swimming lesson with a qualified instructor, the facility shall ensure that at least two staff members are present.				
§78-18-10. Night Time Care.	10.1.	A facility shall not provide 24 consecutive hours of care for an individual child except for emergency situations such as brief hospitalizations or occasional business trips. Twenty-four-hour care shall not last more than 72 consecutive hours unless approved by the Secretary due to extenuating circumstances.				
	10.2.	A facility that provides overnight care shall continue to meet staff-to-child ratios. If seven or more children are in care, an adult staff member shall remain awake and shall check on sleeping children at least hourly.				
	10.3.	A facility shall serve an evening meal to children in overnight care and shall serve breakfast prior to a child's leaving for school or other activities unless the parent indicates otherwise.				
	10.4.	The facility shall establish bedtime schedules for children in consultation with the child's parent.				
	10.5.	The facility shall ask parents to provide children with clean, comfortable, non-flammable or flame retardant sleeping garments, a toothbrush, and a comb or brush. The facility shall label and store personal items separately for each child.				
	10.6.	Staff shall not place mats or sleeping bags directly on the floor for overnight sleeping.				
	10.7.	When bathing a child, staff shall:				

	10.7.a.	Discuss bathing arrangements with the child's parents;				
	10.7.b.	Provide age-appropriate bathing facilities for children in overnight care;				
	10.7.c.	Supervise a child younger than six years of age while bathing;				
	10.7.d.	Equip bathtubs and showers with safety devices to prevent slipping or falling;				
	10.7.e.	Provide soap, clean water, clean individual wash cloths, and towels for each child; and				
	10.7.f.	Thoroughly clean the tub between each use.				
§78-18-11. Care of Infants and Toddlers.	11.1.	A facility providing care for children 24 months or age or younger shall have sufficient space for the following:				
	11.1.a.	Separate indoor and outdoor play areas for infants and toddlers away from those used by older children and				
	11.1.b.	A quiet sleeping area with sufficient space to allow at least two feet between infant cribs, portable packs and play yards, beds, or cots				
	11.2.	Staff shall place an infant who is unable to turn over independently on his or her back to sleep unless medical documentation prohibits sleep in that position.				
	11.3.	Staff shall use only a firm crib mattress covered by a sheet for sleep and keep soft objects and loose bedding out of an infant's sleeping environment.				
	11.4.	Staff shall clothe infants lightly for sleep and keep the sleeping area at a temperature that is comfortable for lightly clothed adults.				
	11.5.	The facility shall provide indoor and outdoor play materials and equipment suitable for staff to use with infants and toddlers. Materials and equipment shall be physically, mentally, emotionally, and socially stimulating for the children. Equipment shall be:				
	11.5.a.	Durable, safe, in good repair, and free of potentially hazardous characteristics such as sharp edges, small objects, and toxic paint; and				
	11.5.b.	Maintained in a sound, sanitary condition.				
	11.6.	The use of jumpers and infant walkers is prohibited				
	11.7.	Effective December 28, 2012, the use of traditional drop side cribs, and any crib manufactured prior to June 28, 2011, is prohibited. Stackable cribs shall not be used. A family child care facility shall:				
	11.7.a.	Only use cribs that comply with the Consumer Product Safety Commission crib standards, and were manufactured after June 28, 2011, and any portable pack and play yards manufactured after February 19, 2014;				
	11.7.b.	Supply separate cribs or portable packs and play yards for infants. Portable packs and play yards shall not be used for infants able to climb; and				
	11.7.c.	Have bars no farther than 2 3/8 inches apart				
	11.8.	Diapering practices shall comply with the provisions of the Bureau for Public Health's Child Care Centers Rule, 64 CSR 21.				
	11.9.	Toilet Training.				
	11.9.a.	The operator shall discuss and agree upon toilet training methods with the parent of each child being toilet trained.				
	11.9.b.	Toilet training shall not be initiated until the child is developmentally ready to control toileting functions.				
	11.9.c.	Potty or training chairs shall be provided and shall be disinfected after each use.				
	11.9.d.	No child shall be forced to sit in a training chair for extended periods of time.				
	11.10.	Infant Nutrition and Feeding. Facilities shall:				
	11.10.a.	Hold infants six months of age and younger while bottle feeding. Bottle propping is prohibited;				
	11.10.b.	Hold infants and toddlers with special needs over six months of age while bottle feeding until they are able to hold their own bottles securely;				
	11.11.	High chairs shall be provided with safety straps and shall have a wide base to reduce the possibility of tipping.				
	11.12.	The facility and staff shall provide activities for infants and toddlers to stimulate their physical, intellectual, and emotional growth. Activities shall include:				
	11.12.a.	Opportunities to interact with caregivers, siblings, and other children;				
	11.12.b.	Frequent verbal communication and eye-to-eye contact between staff and children;				
	11.12.c.	Opportunities for the child to be held, rocked, played with, and dressed in an unhurried manner;				
	11.12.d.	Opportunities for children to explore and learn on their own in a protected area with the freedom to creep, crawl, toddle, and walk as they are physically able;				
	11.12.e.	Frequent moves of infants who are unable to climb and are awake and alert to different locations. Infants shall not routinely be left in a crib or portable packs and play yard except for rest or sleep. They may be left for short periods of time, however, if they are alert and responsive and provision is made for stimulating activity in the form of mobiles or other safe crib toys;				
	11.12.f.	Use of infant seats, swings, and high chairs when used for periods of less than one hour and only if direct supervision is provided and the infant is content;				

	11.12.g.	Opportunities to play with safe, nontoxic, and age-appropriate toys which are stored in low, open shelves for easy access				
	11.12.h.	Practice in self-care habits such as washing, dressing, brushing or combing hair, or toileting as the child shows evidence of the ability to do so;				
	11.12.i.	Play with a wide variety of toys;				
	11.12.j.	Opportunities for children to express themselves through conversation and imaginative play; and				
	11.12.k.	Opportunities for the child to participate in art and craft activities and to run, climb, and engage in other physical activities.				
	11.13.	Staff shall give immediate attention to the emotional and physical needs of a child. Crying shall be attended to immediately.				
	11.14.	Continuity of care shall be provided. The facility shall assign each infant or toddler to a primary caregiver who shall feed, diaper, and play with the child on a daily basis to provide the reassurance and bonding necessary for the child's healthy development.				
§78-18-12. Children with Special Needs.	12.1.	For children who need special care because of a disabling or limiting condition, the operator shall provide the care and activities recommended by qualified psychologists, physicians, or other experts.				
	12.2.	A parent, physician, or other health care provider shall provide a written plan that includes instructions for any special treatment, diet, or restrictions in activities necessary for the health of the child.				
	12.3.	The operator shall permit an early intervention specialist, when appropriate, to enter the facility to provide services to the child, to assure the environment is appropriate for the child, and to instruct staff in proper techniques of care.				
	12.4.	The facility shall perform only those procedures and treatments for which staff has the necessary training, experience, credential, or license to perform.				
§78-18-13. Parental Involvement.	13.1.	The facility shall have written operating policies which shall be discussed with parents at the time of enrollment. The policies shall cover the following areas:				
	13.1.a.	Admission requirements, enrollment procedures, and supplies that parents are expected to provide, if any;				
	13.1.b.	A statement that the facility is operated on a nondiscriminatory basis in regard to race, color, sex, religion, marital status of the parents, and disability, except when the child's needs cannot be met by the facility;				
	13.1.c.	Guidance and discipline;				
	13.1.d.	Rates, any additional fees charged, and the plan for payment;				
	13.1.e.	Liability insurance coverage;				
	13.1.f.	Unlimited access to visit the family child care facility at any time;				
	13.1.g.	Transportation arrangements, when provided by the facility;				
	13.1.h.	Written permission for field trips outside the facility, emergency medical treatment, water activity, and provision of medications;				
	13.1.i.	Hours of operation;				
	13.1.j.	Management of sick children;				
	13.1.k.	Services provided by the facility;				
	13.1.l.	Rules concerning personal belongings brought to the facility;				
	13.1.m.	General procedures of the facility regarding cold weather outdoor play;				
	13.1.n.	Animals on the premises;				
	13.1.o.	Mandatory reporting of child abuse or neglect; and				
	13.1.p.	Religious activities, if any.				
	13.2.	Staff shall share information with parents regarding the accomplishments, successes, and improvements of their child as well as any problems that arise.				
	13.3.	Staff shall encourage parents to become involved with the facility and shall include them in planning for the child's care.				
	13.4.	Staff shall provide parents with a national periodicity schedule for child health exams and a recommended immunization schedule.				
§78-18-14. Family Child Care Facility Operator.	14.1.	Requirements for Family Child Care Facility Operators				
	14.1.a.	The operator shall meet all of the requirements that apply to staff. In addition, the operator shall:				
	14.1.a.1.	Be at least 21 years of age;				
	14.1.a.2.	Have a general education development (GED) certificate or high school diploma;				
	14.1.a.3.	Have 6 months of experience in caring for children in a licensed child care center or family child care facility, registered family care home, Head Start, or other early childhood or school-age child care program;				
	14.1.a.4.	Be certified in an approved pediatric Cardiopulmonary Resuscitation (CPR) or first aid training that includes rescue breathing and first aid for choking; and				
	14.1.a.5.	Complete training in child abuse recognition and prevention from an approved training source. Except for the first year of operation, training in child abuse recognition and prevention is in addition to the required 15 clock hours of approved annual training.				

	14.1.a.6.	Complete medication administration training from an approved training source. Except for the first year of operation, training in medication administration is in addition to the required 15 clock hours of approved annual training;				
	14.1.a.7.	Prior to caring for children, all current and potential staff are required to complete approved pre-service training;				
	14.1.a.8.	Complete at least 15 clock hours of approved training annually. Except for the first year of operation, training in pediatric CPR is in addition to the required 15 clock hours of approved annual training. Approved sources of training include:				
	14.1.a.8.A	One Step at a Time or West Virginia Infant and Toddler Professional Development Training Program;				
	14.1.a.8.B	Apprenticeship for Child Development Specialists;				
	14.1.a.8.C	Any training provided by a trainer approved through STARS to provide training;				
	14.1.a.8.D	Any training provided by a trainer certified in the subject and/or field on which the training is provided. The facility owner shall verify the trainer's credentials;				
	14.1.a.8.E	College courses in early childhood development from an accredited college or university or distance education class; and				
	14.1.a.8.F	Any other vocational class from which the caregiver received a certificate, pending approval by the Secretary. The caregiver shall submit the class syllabus to the Secretary for review and approval.				
	14.1.b.	Training shall be selected based on the Core Knowledge/Core Competency areas listed in subsection 3.3 of this rule and shall increase the operator's skills and knowledge in the early childhood field.				
	14.1.c.	Over a four-year period, an operator shall select training that addresses all of the Core Knowledge areas.				
	14.1.d.	Operators completing approved training modules lasting more than 15 hours may elect to apply training-module hours over and above 15 to the following year's training requirement. Training hours that may be carried over include hours earned through the West Virginia Infant and Toddler Professional Development Program, the Apprentice for Child Development Specialist, or other coursework approved by the Department.				
	14.1.e.	The operator shall document that he or she has met one of the following requirements prior to opening or operating a family child care facility:				
	14.1.e.1.	Completion of at least 15 clock hours of child development training or arrangements to complete the training during the first six months of operation of the facility;				
	14.1.e.2.	A child development associate (CDA) credential or completion of the Child Care Apprenticeship Program; or				
	14.1.e.3.	Completion of at least three credit hours in child development or a related field at an accredited higher education institution.				
	14.2.	Responsibilities – family child care facility operators:				
	14.2.a.	Shall work on-site to administer the facility's daily operation;				
	14.2.b.	Are responsible for providing a child care program and facility that meets the requirements of this rule;				
	14.2.c.	Shall instruct staff in this rule and provide a copy for their use;				
	14.2.d.	Are responsible for the supervision of staff including maintaining staff-to-child ratios and assuring that additional staff is available as needed to maintain supervision of the children in care;				
	14.2.e.	Shall be present at the facility or, if absent, designate one adult who meets the requirements of subsection 14.1. of this section. This designee shall be capable of carrying out the duties of the operator;				
	14.2.f.	Are responsible for the recruitment and hiring of staff, enrollment, and admissions, informing parents of the policies of the family child care facility program, and the training of staff in areas such as emergency and evacuation procedures, programming for children, working with parents, discipline policies, health care, sanitation procedures, release of children, child abuse and neglect reporting, symptoms of illness and medication administration.				
	14.2.g.	Shall maintain adequate records on enrollment, finances, staff, and children;				
	14.2.h.	Shall submit reports to the Department when requested;				
	14.2.i.	Are responsible for screening, scheduling, and supervising the conduct of all staff, volunteers, and others in the facility;				
	14.2.j.	Shall inform staff of the requirement to report child abuse and neglect per W. Va. Code §49-2-801 et seq.; and				
	14.2.k.	Are responsible for all legal and financial obligations.				
	14.3.	If the family child care facility operator and owner are separate individuals, the owner shall assume the responsibility for the operation of the facility in compliance with this rule.				
§78-18-15. Family Child Care Facility Staff.	15.1.	All staff working directly with children shall:				
	15.1.a.	Be 18 years of age;				
	15.1.b.	Be able to read and write;				
	15.1.c.	Understand children and their developmental needs and relate to children with courtesy, respect, patience, and affection, and with understanding and respect for the child's family and culture;				



	15.1.d.	Provide continuous supervision of young children including during outdoor play, napping, field trips, and water activities as follows:				
	15.1.d.1.	Supervision of older children may consist of their playing within sight or hearing of nearby staff who shall conduct periodic checks every 15 to 20 minutes;				
	15.1.d.2.	Staff shall visually check on napping infants every 15 to 20 minutes; and				
	15.1.d.3.	Staff shall directly supervise all children during field trips and water play;				
	15.1.e.	Carry out methods of guidance and discipline without recourse to physical or emotional punishment;				
	15.1.f.	Recognize and act against hazards to children and react in a calm manner in an emergency;				
	15.1.g.	Have positive written responses from two references;				
	15.1.h.	Have on file a health appraisal that:				
	15.1.h.1.	Includes a physical examination and a tuberculosis skin test or risk assessment screening with negative results;				
	15.1.h.2.	Indicates that the individual is physically and mentally able to care for children; and				
	15.1.h.3.	Is completed no more than six months prior to employment nor more than 30 days after date of hire and updated every two years;				
	15.1.i.	Have successfully completed an approved pediatric Cardiopulmonary Resuscitation (CPR) training or other certified first aid including rescue breathing and first aid for choking, or have a plan to do so within the first six months of employment;				
	15.1.j.	Have successfully completed training in child abuse recognition and prevention from an approved training source or have a plan to do so within the first six months of employment;				
	15.1.k.	Have successfully completed training in medication administration from an approved training source or have a plan to do so within the first six months of employment;				
	15.1.l.	Completed approved pre-service training requirements or have a plan to do so within the first six months of employment;				
	15.1.m.	Have received, prior to caring for children, an orientation from the operator with regard to evacuation procedures, discipline, child abuse and neglect reporting, recognition of symptoms of childhood illness, medication administration, and the requirements of this rule;				
	15.1.n.	Complete at least 12 clock hours of training annually, selecting training that addresses a variety of the Core Knowledge areas listed in subsection 3.3 of this rule;				
	15.1.o.	Complete at least 12 clock hours of training annually, selecting training that addresses a variety of the Core Knowledge areas listed in subsection 3.3 of this rule.				
	15.1.p.	If staff completes approved training modules lasting more than 12 hours, staff may elect to apply those training module hours over and above 12 to the following year's training requirement. Training hours that may be carried over include hours earned through the West Virginia Infant and Toddler Professional Development Program, the Apprentice for Child Development Specialist, or other coursework approved by the Department; and				
	15.1.q.	Meet and abide by all other requirements listed in this rule including those with regard to criminal history background checks.				
	15.2.	If staff completes approved training modules lasting more than twelve 12 hours, staff may elect to apply those training module hours over and above 12 to the following year's training requirement. Training hours that may be carried over include hours earned through the West Virginia Infant and Toddler Professional Development Program, the Apprentice for Child Development Specialist, or other coursework approved by the Department.				
	15.3.	Volunteers.				
	15.3.a	Volunteers shall:				
	15.3.a.1.	Be at least 16 years of age;				
	15.3.a.2.	Be supervised by the owner or an adult staff person at all times;				
	15.3.a.3.	Submit evidence of a negative tuberculosis risk assessment screening completed during the past 24 months;				
	15.3.a.4.	Receive orientation to the facility and its programs and policies;				
	15.3.a.5.	Be familiar with and meet the requirements of this rule; and				
	15.3.a.6.	Complete approved pre-service training requirements or have a plan to do so within the first six months of employment				
	15.3.b.	A volunteer shall not be used to meet staff-to-child ratios.				
	15.4.	Substitutes				
	15.4.a	Substitutes used 20, eight-hour days or fewer per year shall:				
	15.4.a.1.	Be 18 years of age;				
	15.4.a.2.	Be able to read and write;				
	15.4.a.3.	Understand children and their developmental needs and relate to children with courtesy, respect, patience, and affection, and with understanding and respect for the child's family and culture;				
	15.4.a.4.	Provide continuous supervision of young children including during outdoor play, napping, field trips, and water activities as follows:				
	15.4.a.4.A	Supervision of older children may consist of their playing within sight or hearing of nearby staff who shall conduct periodic checks every 15 to 20 minutes;				

	15.4.a.4.B	Staff shall visually check on napping infants every 15 to 20 minutes; and				
	15.4.a.4.C	Staff shall directly supervise all children during field trips and water play.				
	15.4.a.5.	Carry out methods of guidance and discipline without recourse to physical or emotional punishment;				
	15.4.a.6.	Recognize and act against hazards to children and react in a calm manner in an emergency;				
	15.4.a.7.	Have successfully completed an approved pediatric Cardiopulmonary Resuscitation (CPR) and certified first aid training including rescue breathing and first aid for choking, or have a plan to do so within the first six months of employment;				
	15.4.a.8.	Complete approved pre-service training requirements or have a plan to do so within the first six months of employment;				
	15.4.a.9.	Have received, prior to caring for children, an orientation from the operator with regard to evacuation procedures, discipline, child abuse and neglect reporting, recognition of symptoms of childhood illness, medication administration and the requirements of this rule;				
	15.4.a.10.	Meet and abide by all other requirements listed in this rule including those with regard to criminal history background checks.				
	15.4.b.	Substitutes used more frequently than 20, eight-hour days per year shall meet all requirements listed in subsection 15.1. of this rule.				
§78-18-16. Criminal History Background Checks.	16.1.	At the time of license application and renewal, a family child care facility must demonstrate compliance with the provisions of the West Virginia Clearance for Access: Registry and Employment Screening Act (WV CARES), W. Va. Code §16-49-1 et seq., and 69CSR10, for all facility owners, operators, staff, volunteers 18 years of age and over, and each adult household member.				
	16.1.a	A caregiver shall ensure that a state and federal fingerprint-based criminal background investigation is performed on the caregiver and each adult household member pursuant to the provisions of the West Virginia Clearance for Access: Registry and Employment Screening Act (WV CARES), W. Va. Code §16-49-1 et seq., and 69CSR10, and shall keep the following information on file:				
	16.1.a.1.	A completed and signed WV CARES self-disclosure application and consent form. A copy of the form shall be on file and uploaded to the WV CARES system no later than the date of approval to operate;				
	16.1.a.2.	A variance or waiver if the individual has convictions or pending charges of disqualifying offenses;				
	16.1.a.3.	A fitness determination of eligibility from the WV CARES unit; and				
	16.1.a.4.	The caregiver shall update the documentation of a completed background check in the caregiver and each adult household member's file at the expiration of rap back enrollment.				
	16.1.a.5.	A state check shall be done in any other state where the caregiver and each adult household member has resided in the past five years. Fingerprint checks for other states are optional.				
	16.1.b.	A state check of the sex offender registry or repository shall be done in any other state where the caregiver and each adult household member currently resides and shall be done in any other state where the caregiver and each adult household member has resided in the past five years.				
	16.1.c.	A search shall be done of the state-based child and adult abuse and neglect registries and protective services databases in each state where the caregiver and each adult household member resided during the preceding five years. The same search shall be done in the state where the caregiver and each adult household member currently resides and shall be repeated every five years.				
	16.2.	The Secretary shall not grant a certificate of license to a family child care facility if any of the individuals listed in subsection 16.1 of this rule are determined to be ineligible pursuant to WV CARES. A negative fitness determination will result if the individual:				
	16.2.a.	Is on parole or probation for a WV CARES disqualifying offense;				
	16.2.b.	Has been convicted of or is currently under indictment or charged with any of the WV CARES disqualifying offenses; or				
	16.2.c.	Other crimes that the Secretary determines may pose a risk to children.				
	16.3.	If the individuals listed in subsection 16.1 of this rule failed to report convictions to the Department, a family child care facility shall not operate or continue operations unless the facility owner requests a waiver or variance, and it is approved by the Secretary.				
	16.4.	A family child care facility shall report charges, indictments, and convictions of individuals listed in subsection 16.1 of this rule to the Department within 24 hours of their occurrence. Failure to report will result in revocation of the certificate of registration and the family child care facility shall not operate or continue operations unless the facility owner requests a waiver or variance, and it is approved by the Secretary.				
	16.5	The Department shall not approve a facility for continuing licensure if a criminal history background check reveals that any individual listed in subsection 16.1 of this rule:				
	16.5.a.	Has committed child or adult abuse or neglect, or both, according to Department protective services record or any other Department records;				

	16.5.b.	Is an active recipient of child or adult protective services; or				
	16.5.c.	Has a fitness determination of ineligibility that may not be waived or for which a waiver or variance was not approved.				
	16.6.	For facilities operated outside the operator's home, a certificate of license may be issued when a household member has a conviction if the household member with the conviction does not reside with, visit, or have contact with children in care.				
§78-18-17. Other Personnel and Household Member Requirements.	17.1.	The operator, an employee, volunteer, or other household member or resident shall not have been diagnosed or be under treatment for a serious mental illness which might create a risk to children. The Department and/or facility shall determine the risk to children on the basis of a written recommendation from a licensed psychologist or doctor of psychiatry.				
	17.2.	No operator, employee, volunteer, or household member or visitor to the facility shall be under the influence of alcohol or illegal drugs while children are in care.				
	17.3.	No person working directly with children in the facility shall be under the influence of any substance or medication, including medical cannabis, that would impair his or her ability to care for children.				
§78-18-18. Physical Plant Safety.	18.1.	Facility Requirements.				
	18.1.a.	The building and grounds used for a family child care facility shall be suitable for the purpose of child care, kept clean and in good repair, and shall present no hazard to the health and safety of children.				
	18.1.b.	A family child care facility shall have heat, electricity, and indoor plumbing.				
	18.1.c.	Family child care facilities shall be equipped with a working telephone with a listed number.				
	18.1.d.	Facilities shall post the following emergency telephone numbers adjacent to the phone: ambulance, fire, police, poison control or universal poison control center, and parents and health care providers for all children in care.				
	18.1.e.	Usable floor space of 35 square feet per child shall be available for children's activities, exclusive of halls, bathrooms, the kitchen, office space, or storage areas.				
	18.1.f.	Family Child Care facilities shall use an on-site kitchen which complies with the requirements of Bureau for Public Health's Child Care Centers Rule, 64 CSR 21, and shall be equipped as follows:				
	18.1.f.1.	Kitchen and eating areas shall be equipped to safely prepare, store, and serve meals to children.				
	18.1.f.2.	Equipment shall include an oven or microwave, a range or cook-top, a refrigerator, and equipment for washing, rinsing, and sanitizing cooking and eating utensils.				
	18.1.g.	A quiet space shall be available for children to nap or rest away from the noise of household activity.				
	18.1.h.	An operator shall provide an individual bed, sturdy cot, crib, couch, baby bed, portable packs and play yard, or mat for each child who naps. Siblings may share double beds.				
	18.1.i.	All interior bathroom and closet doors which can be locked from the inside shall be capable of being unlocked from the outside.				
	18.1.j.	Clear glass doors shall be clearly marked at a child's eye level.				
	18.1.k.	There shall be usable outdoor play space of 75 square feet per child available for the children's outdoor activities either on the premises or within walking distance of the facility. The facility may stagger play times and space based on the number of children using the area at one time.				
	18.2.	Safety Barriers.				
	18.2.a.	All indoor or outdoor stairways, hallways, and exits shall be unobstructed except for safety barriers.				
	18.2.b.	Stairs of four or more steps shall have hand railings when children less than five years of age are in care.				
	18.2.c.	Safety gates shall be provided at the top and bottom of stairs accessible to children under 36 months of age.				
	18.2.d.	Accordion expansion gates are prohibited.				
	18.2.e.	Pressure mounted gates shall not be used at the top of a set of stairs				
	18.2.f.	Balconies, decks, porches, ramps, and play or living areas that are elevated more than 36 inches shall be equipped with secure, child-proof railings and barriers.				
	18.3.	Hazards. Family child care facilities shall:				
	18.3.a.	Keep children away from areas undergoing remodeling or construction;				
	18.3.b.	Store cleaning supplies, detergents, aerosol cans, pesticides, poisons, flammable materials, poisonous or unknown plants, medicines, medical cannabis, and alcoholic beverages or toxic materials out of the reach of children less than six years of age;				
	18.3.c.	Store hazardous materials separately from food items;				
	18.3.d.	Store guns, ammunition, hunting knives, bows and arrows, and other weapons in a locked cabinet or closet, and store keys out of the children's reach;				
	18.3.e.	Keep strings and cords long enough to encircle a child's neck (six inches or more) out of the children's reach;				

	18.3.f.	Not permit children less than age six in food preparation areas when ranges or cook-tops are in use; and				
	18.3.g.	Keep hanging items including Venetian blind cords, appliance cords, and table cloths out of the reach of small children.				
	18.4.	Electrical Safety.				
	18.4.a.	Electrical cords shall be maintained in good condition.				
	18.4.b.	Extension cords shall be heavy duty, UL approved, and not run under carpets or rugs or through common walkways unless stabilized to prevent tripping.				
	18.4.c.	Protective covers shall be installed on all unused electrical outlets accessible to children who are under five years of age.				
	18.4.d.	Small appliances shall be unplugged when not in use.				
<b>§78-18-19. Environmental Safety.</b>	19.1.	Tobacco Use.				
	19.1.a.	Facilities shall notify parents in advance if staff, volunteers, or household members in the facility smoke or use smokeless tobacco.				
	19.1.b.	A caregiver shall provide a smoke-free environment while children are present.				
	19.1.c.	Smoking is prohibited when the children are in vehicles with caregivers.				
	19.1.d.	All tobacco products, smoke abatement products, ashtrays, butts, ashes, spittoons, lighters, and matches shall be kept out of the children's reach.				
	19.2.	Animals.				
	19.2.a.	Any pet or animal present at the facility, indoors or outdoors, shall be in good health, show no evidence of carrying disease, and be a friendly companion for children.				
	19.2.b.	When pets are kept on the premises, the facility shall comply with the rules of the Bureau for Public Health's Child Care Centers Rule, 64 CSR 21.				
	19.3.	Play Areas and Equipment.				
	19.3.a.	All areas accessible to the outdoor play area determined to be unsafe, including, but not limited to, steep grades, cliffs, open pits, swimming pools, high voltage boosters, propane gas tanks, streets, roads, driveways, railroad tracks, or parking lots, shall be fenced off or have natural barriers at least three feet high to protect the children.				
	19.3.b.	Play equipment shall be of a safe design and shall be maintained in good repair. It shall be free of sharp edges, protruding parts, weaknesses, or flaws and shall be installed to prevent tipping or collapse.				
	19.3.c.	Swings, slides, and climbing equipment shall not be placed on concrete or asphalt surfaces;				
	19.3.d.	Trampolines shall not be accessible to the children in care.				
	19.3.e.	The facility shall have indoor and outdoor play equipment, toys, materials, and furniture that are:				
	19.3.e.1.	Appropriate to the developmental needs and ages of the children in care;				
	19.3.e.2.	Safe, clean, durable, in good repair, and made of nontoxic materials;				
	19.3.e.3.	Easily accessible to and appropriately sized for young children;				
	19.3.e.4.	Of sufficient quantity to provide choices for children and avoid competition for toys; and				
	19.3.e.5.	Capable of providing for a variety of activities such as quiet and active play and individual and group play.				
	19.3.f.	The facility shall have storage spaces for each child's clothing and for toys and art supplies that are easily accessible to children. These spaces shall be designed to encourage children to pick up and put away toys and personal possessions.				
<b>§78-18-20. Sanitation and Health Issues.</b>	20.1.	The operator shall obtain a permit to operate from the health officer as required by Bureau of Public Health's Child Care Center Rules, 64 CSR 21. The facility must maintain the permit.				
	20.2.	All persons in the facility shall practice good personal hygiene.				
	20.3.	Hand washing practices shall be in compliance with the requirements of Bureau of Public Health's Child Care Centers Rules, 64 CSR 21.				
	20.4.	The caregiver shall employ universal precautions for protection from disease and infection, as detailed in Appendix 78-19-B of this rule.				
	20.5.	The facility shall be free from infestations of insects or rodents.				
	20.6.	Staff shall observe children daily upon arrival and throughout the day for signs of illness or injury.				
	20.7.	The operator shall isolate or exclude staff and children with a serious communicable disease per the facility's policy on management of sick children.				
	20.8.	The operator shall notify parents of any communicable disease outbreak in the facility.				
	20.9.	The operator shall ensure that the following first aid supplies are available in the facility: soap; alcohol wipes or antiseptic; non-medicated adhesive strips; a digital thermometer; sterile gauze; bandage tape; blunt-tipped scissors; tweezers; disposable, nonporous gloves; CPR mouthpiece; and a first aid guide.				
	20.10.	The operator shall ensure that first aid supplies are not accessible to the children in care.				
	20.11.	Staff shall take a first aid kit on all trips away from the facility.				
	20.12.	The operator or staff shall administer:				

	20.12.a.	Non-prescription medications, including medical cannabis, only with prior written permission from the parents, which includes a written schedule with information about dosage amount, method, and times, or upon directions from the child's health care provider; and				
	20.12.b.	Prescription medication only from the original container clearly labeled with the child's name and dosage, the date, and name of the medication, following the health care provider's directions.				
	20.13.	The facility shall notify parents or guardians immediately of illness or injury to the child.				
	20.14.	If it is necessary to secure emergency treatment for a child, a staff person shall accompany and remain with the child during care or treatment until the parent arrives.				
§78-18-21. Nutrition.	21.1.	The operator shall plan menus and provide meals and snacks with the goal of meeting or working toward meeting the current United States Department of Agriculture Dietary Guidelines for Americans.				
	21.2.	The operator shall prepare, date, and post menus in advance in a conspicuous place and shall keep them on file for 30 days.				
	21.3.	The operator shall consider information provided by parents about children's eating habits, food preferences, and special dietary needs when planning menus.				
	21.4.	When parents provide food for meals, the facility shall supplement any meal that does not provide nutritious and sufficient amounts of food for the children, as needed, to meet the requirements of this rule.				
	21.5.	No child shall be permitted to be without a meal or snack for excessively long periods of time. A facility shall provide meals according to the following requirements:				
	21.5.a.	In a facility open morning through afternoon, lunch and morning and afternoon snacks shall be served;				
	21.5.b.	The facility shall serve a snack to school age children arriving after school; and				
	21.5.c.	The facility shall offer breakfast, mid-morning or mid-afternoon snack, lunch, and dinner to a child when attendance is prior to 7:00 in the morning or after 7:30 in the evening.				
	21.6.	The operator shall encourage children to eat the food served but shall not subject them to coercion or forced feeding.				
	21.7.	An operator shall limit the use of snack foods with high sugar and salt content.				
	21.8.	An operator shall serve only pasteurized, inspected, and Grade A approved milk products to children. A facility shall not use powdered milk except for cooking.				
§78-18-22. Fire Safety and Evacuation Plans.	22.1.	Family Child Care facilities shall meet the applicable rules of the State Fire Marshal's Office.				
	22.2.	A family child care facility shall request an inspection by the State Fire Marshal prior to beginning operation and annually thereafter.				
	22.3.	The facility shall establish and post a written plan for evacuation in the event of fire, natural disaster or other threatening situation that may pose a health or safety hazard to the children in the facility.				
	22.3.a.	The plan shall include, but not be limited to:				
	22.3.a.1.	A designated relocation site and evacuation;				
	22.3.a.2.	Procedures for notifying parents of the relocation and ensuring family reunification;				
	22.3.a.3.	Procedures to address the needs of individual children, including children with special needs;				
	22.3.a.4.	Instructions relating to the training of staff or the reassignment of staff duties, as appropriate;				
	22.3.a.5.	Coordination with local emergency management officials; and				
	22.3.a.6.	A program to ensure that appropriate staff are familiar with the components of the plan.				
	22.3.b.	The facility shall:				
	22.3.b.1.	Update the evacuation plan by December 31 of each year. If the facility fails to update the plan, the child care regulatory specialist shall take no action against the facility's license until notice is provided and the facility is given thirty days after the receipt of notice to provide an updated plan;				
	22.3.b.2.	Retain an updated copy of the plan for evacuation;				
	22.3.b.3.	Provide notice of the plan;				
	22.3.b.4.	Provide notification that a copy of the plan will be provided upon request to any parent, custodian, or guardian of each child at the time of the child's enrollment in the child care service and when the plan is updated;				
	22.3.b.5.	Provide the plan and each updated copy of the plan to the Director of the Office of Emergency Services in the county where the center or facility is located;				
	22.3.b.6.	Develop, implement, and maintain a written procedure to practice with staff and volunteers moving to a safe location within the facility at least two times a year and record the dates and times when the practice sessions are conducted; and				
	22.3.b.7.	Develop, implement, and maintain a written procedure for practicing relocation outside the facility with staff members and volunteers two times per year and record the dates and times when the practice sessions are conducted.				

	22.4.	The facility shall prevent children from entering areas which contain furnaces and water heaters or shall install shields to prevent burns.				
	22.5.	Water heaters shall be equipped with thermostatic controls and pressure relief valves.				
§78-18-23. Reporting and Investigation of Complaints	23.1.	Reporting.				
	23.1.a.	The operator shall immediately report any serious incident affecting the operation of the facility to the Department and follow up with a written report within 72 hours on a form designated by the Department.				
	23.1.b.	The operator shall report the following situations:				
	23.1.b.1.	Any accident, injury, or illness occurring while a child is in care that results in emergency treatment, hospitalization, or death;				
	23.1.b.2.	Any serious communicable disease of a child, operator, employee, or family member that results in temporary closure of the facility;				
	23.1.b.3.	Any incident which results in legal action by or against the facility; and				
	23.1.b.4.	Serious violations of requirements by the facility operator or its employees such as use of physical punishment or failure to supervise which could have resulted in harm to a child.				
	23.1.c.	In accordance with W. Va. Code §49-2-801 et seq., the operator shall immediately report suspected child abuse or neglect to the statewide child abuse and neglect intake hotline or to Department child protective services staff in the county office where the facility is located.				
	23.1.d.	The operator shall also notify the Department, in writing, of any occurrence affecting the operation of the facility. This includes, but is not limited to, the following:				
	23.1.d.1.	A change in ownership that requires the new owner to file for a new application;				
	23.1.d.2.	A change of operator;				
	23.1.d.3.	Closure of the facility;				
	23.1.d.4.	A change in hours of operation or change in ages of children served;				
	23.1.d.5.	Additions to or reductions in space affecting the facility's capacity;				
	23.1.d.6.	Additions such as a swimming pool;				
	23.1.d.7.	Reductions such as removal of fences;				
	23.1.d.8.	Location of facility which requires the owner to file for a new application;				
	23.1.d.9.	A disaster such as a fire or flood that damages the facility; and				
	23.1.d.10.	A change in the composition of the household.				
	23.2.	Investigation of Complaints.				
	23.2.a.	A facility shall fully cooperate with the Secretary in the investigation of any complaints including alleged violations of the requirements of this rule, allegations of creating or otherwise causing risk of serious harm to a child, a violation of the juvenile or criminal laws of this state, or reports of suspected child abuse or neglect.				
	23.2.b.	If a complaint alleges that the behavior or conduct of any operator, employee, household member, or volunteer may pose risk of serious harm to a child in care, the facility shall immediately remove that person from further contact with the children until an investigation is completed and a determination is made.				
	23.2.c.	If the Secretary determines there are violations of this rule, a facility shall submit a plan of correction within 30 days of receipt of the written summary report.				