Virgin Islands
Department of Human Services

Office of Child Care & Regulatory Services

Rules and Regulations
for
Child Care Facilities
After School Programs
Summer Camps
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STATEMENT OF PHILOSOPHY

Thousands of Virgin Islands children receive care away from their home. For these children, the quality of care plays a significant role in their growth and development.

Parents of young children in child care facilities rely on the safeguards of Title 34, Chapter 13 of the Virgin Islands Code that require that licensing standards and practices be established that are preventative and protective by nature. These rules and regulations relate to all children irrespective of their social or economic backgrounds.

The Rules and Regulations contained in this document are the result of lengthy research, private and public agency collaboration, and parent and community involvement efforts. The Department of Human Services conducted public hearings throughout the territory to give the public the opportunity to review the draft rules and regulations and to comment.

These Rules and Regulations establish the minimum requirements for child care health and safety throughout the U.S. Virgin Islands. Child care facilities may choose to adopt standards that exceed these Rules and Regulations to meet the needs of children in our changing society.

DECLARATION OF PURPOSE

It is the legislative intent to protect the health, safety, and well being of the children of the Territory who attend child care facilities. Toward that end, it is the purpose of these Rules and Regulations to establish Territory wide minimum standards for the safety and protection of children enrolled in child care facilities. The licensing program of the Department of Human Services ensures that health and safety rules are maintained and regulate conditions in such facilities. It shall be the policy of the Territory to ensure protection of children under the care of child care facilities, and encourage and assist in improving child care programs.
SECTION 1

101  **Applicability**

A. These Rules and Regulations apply to private, not for profit and Government operated facilities in which out-of-home care is provided for part of a 24-hour day to 3 or more children, birth to 14 years of age.

B. These Rules and Regulations do not apply to:

1. Care provided by relatives,
2. Care provided by places of worship during religious services,
3. Care provided during short periods of time (not to exceed four (4) hours) in the facility where the parent is present,
4. Hospitals, while the child is receiving medical care, and
5. All schools and programs certified or accredited by the Virgin Islands Department of Education that operate for educational purposes for grades kindergarten and above, which do not provide care before or after the school day.

102  **Pertinent Laws, Regulations and Standards**

The Department is authorized to promulgate these rules and regulations under the provisions pursuant to Title 34 Virgin Islands Code, Chapter 13 Sections 381-399.

A child care facility shall be operated in conformity with all applicable Federal and Territorial laws and regulations. Territorial agencies whose regulations may relate to the operation of a facility include the Fire Department, Department of Planning and Natural Resources, Police Department, Department of Labor, Department of Health and the Department of Education.

SECTION 2

(200)

**DEFINITIONS**

**AIDS** See Human Immunodeficiency Virus (HIV) disease.

**“Act”** means the Child Day Care Facility Licensure Act, Title 34, Virgin Islands Code, Chapter 13 Sections 381-399.

**“Admission”** means the process of enrolling a child in a child care facility. The admission date is the first day on which a child is actually present in the facility.

**“Adult”** means a person 18 years of age or older.
“After School Program” means a program providing care before and after the regular school hours, excluding facilities certified or accredited by the Virgin Islands Department of Education that operate for educational purposes for grades kindergarten and above, which do not provide care before or after the school day.

“Application” means the form furnished by the Department to gather information about and to document the intent of a person or persons to operate a child care facility. The application also includes any and all materials required for submittal to the Department.

“Attendance” means the number of children actually present in a child care facility at any given time.

“Baby Bottle Syndrome or Baby Bottle Mouth” describes the condition of the mouth of a child that has been sent to bed repeatedly with a bottle filled with fluids other than water. This practice contributes to severe tooth decay (cavities). The sugar from the fluid in the bottle stays on the teeth thereby causing the bacteria on the child’s teeth and the sugar to mix. This mixture forms a type of acid that eats through the enamel and leads to cavities.

“Bleach solution for disinfecting environmental surfaces” means one-quarter (¼) cup of household liquid chlorine bleach (sodium hypochlorite e) in one (1) gallon of water, prepared fresh daily.

“Body fluids” means urine, feces, saliva, blood, nasal discharge, eye discharge, and injury or tissue discharge.

“Cardiopulmonary Resuscitation (CPR)” means emergency measures performed by a person on another person whose breathing or heart activity has stopped. Procedures include closed chest cardiac compressions and mouth-to-mouth ventilation in a regular sequence.

“Caregiver” means the primary staff member who works directly with children, that is a director, teacher, aide, or others in the center, including a child care provider in small and large family child care homes.

“Center” means a facility that provides care and education for any number of children in a nonresidential setting and is open on a regular basis (i.e., not a part-time facility).

“Certificate of Application” means application submitted by facilities operated by the Territorial Government in a timely manner.

“Certificate of Approval” means a written notice issued to a department, agency, or institution of the Virgin Islands Government approving the operation of a Child Care Facility operated by a department, agency or institution.

“Child” means an individual under eighteen (18) years of age, including children emancipated at fourteen (14) years of age or above.
“Child abuse” for the purposes of this set of standards, its definition is considered to be that contained in the Virgin Islands Code in which that standard will be applied.

“Child Care Operator” means any individual ultimately responsible for the overall operation of a child care facility.

“Child/staff ratio” means the maximum number of children permitted per caregiver.

“Children with special needs” means children with developmental disabilities or delays, including children who require special health surveillance or specialized programs, interventions, technologies, or facilities.

“Children’s Camp” means a recreational, educational, cultural, or summer camp program operating on a daily, and/or overnight basis, and providing care for three (3) or more children that are not related to each other between the ages of 3 and 14 years, whether or not the facility is operated for profit.

“Child Care Facility” means the care, supervision, and/or guidance of three (3) or more children that are not related to each other from birth to 14 years of age for any part of a 24-hour day, including, as defined in these regulations, day care center/child development center, group day care home, nursery, preschool, pre-kindergarten, after-school center, family day care home, and children’s camp.

“Clean” means to remove dirt and debris by scrubbing and washing with soap and water on a regular basis.

“Communicable disease” means a disease caused by a microorganism (bacterium, virus, fungus, or parasite) that can be transmitted from person to person via an infected body fluid or respiratory spray, with or without an intermediary agent (e.g., louse, mosquito) or environmental object (e.g., table surface).

“Contamination” means the presence of infectious microorganisms in or on the body, on environmental surfaces, on articles of clothing, or in food or water.

“Corporal Punishment” means the infliction of physical pain or suffering inflicted on the body (e.g., spanking).

“CPR” See Cardiopulmonary Resuscitation.

“Day Care” means the care, supervision, and/or guidance of three (3) or more children that are not related to each other from birth to 14 years of age for any part of a 24-hour day.

“Day Care Center” means a child care facility which provides care for more than twelve (12) children between two (2) and fourteen (14) years of age for less than twenty-four (24) hours a day, whether known under some other descriptive name such as “nursery”, “preschool”, “pre kindergarten”, “after-school center”, “drop-in center”, or “child development center”, and whether or not the facility is operated for profit.
“Department” means the Department of Human Services.

“Disinfect” means to clean or sanitize environmental surfaces and other inanimate objects and/or to remove germs, bacteria or viruses.

“Emergency response procedures” means procedures used to call for emergency medical assistance, to reach parents or emergency contacts, to arrange for transfer to medical assistance, and to render first aid to the injured person.

“Employee” means any person employed in a child care facility in any capacity, whether or not such person receives payment or other compensation for services.

“Enrollment” means the number of children registered in the child care facility.

“Evening or Night Care” means care given to children who are starting or continuing their night sleep or children who spend the night at the facility. (See overnight care)

“Facility” means the people, administration, governing body, activities, operations, buildings, grounds, equipment, furnishings, and materials involved in the care of children.

“Family Day Care Home” means a child day care facility which provides care for not less than 3 and no more than 6 children under 14 years of age for less than 24 hours a day and whether or not the facility is operated for profit.

“Flu” see Influenza.

“First Aid” see Pediatric first aid.

“Group Day Care Home” means a child day care facility which provides care for 7 to 12 children under 14 years of age for less than 24 hours a day and whether or not the facility is operated for profit.

“Group size” means the number of children assigned to a caregiver or team of caregivers occupying an individual classroom or well-defined separated space within a larger room. (See Child/Staff Ratio and Group Size)

“Health care provider” means the health professional licensed to write prescriptions.

“Health plan” means a written document that describes emergency health and safety procedures, general health policies and procedures, and policies covering the management of mild illness, injury prevention, and occupational health and safety.

“HIV” See Human immunodeficiency virus disease.

“Human immunodeficiency virus (HIV)” means the pathogen leading to failure of the human immune system, leaving the body unable to fight infections and cancers. It is characterized by a relatively long (up to ten (10) years) asymptomatic stage and a brief...
acute stage. Gradually, an HIV-infected person develops multiple symptoms and infections that progress to the end stage of the disease, called acquired immunodeficiency syndrome (AIDS). HIV is transmitted by sexual contact or blood-to-blood contact, or from an infected mother to her baby during pregnancy, labor, delivery, or breast-feeding.

“Hygiene” means the protective measures taken by individuals to promote good health and to limit the spread of infectious diseases.

“Immunizations” means vaccines that are given to children and adults to help them develop protection (antibodies) against specific infections. Childhood and adult immunizations include those as recommended by the American Academy of Pediatrics.

“Individualized Education Program (IEP)” means a written plan and legal document, formalized according to Part B of the Individuals with Disabilities Education Act and its amendments, includes, but is not limited to, a child’s present level of functioning, specific areas that need special services, annual goals, short-term objectives, services to be provided, and the method of evaluation to be implemented for children 3 to 21 years of age who have been determined eligible for special education services.

“Individualized Family Service Plan (IFSP)” as described in Part C of the Individuals with Disabilities Education Act and its amendments, is both a process and a document. The IFSP process consists of the gathering, sharing, and exchange of information between families and staff to enable families to make informed choices about the early intervention services they want for their children. The IFSP document is a written contract that outlines outcome statements to be achieved by the infant or toddler with disabilities or developmental delay and his/her family to meet the needs of a child and to assist the family in its management of the child.

“Infection” means a condition caused by the multiplication of an infectious agent in the body.

“Influenza” means an acute viral infection of the respiratory tract. Symptoms typically include, but are not limited to: fever, chills, headache, muscle aches, dry cough, and sore throat. Influenza should not be confused with Haemophilus influenza infection caused by bacteria, or with “stomach flu,” which is usually an infection caused by a different type of virus.

“License” means the document required to be held by an operator by Section 383 of the Act that authorizes operation of a child care facility in accordance with its terms, and with the provisions of the Act not defined separately.

“Maximum Capacity” means the maximum number of children permitted in the facility at any one time, as provided in the License.

“Minimum Standards” means the rules and regulations for Child Care Facilities promulgated by the Department.

“Out-of-Home Care” means care provided in a location or facility that is not the child’s residence.
“Overnight Care” means care given to children at the Facility between the hours of 7:00 p.m. and 7:00 a.m. in a twenty-four (24) hour period.

“Owner” or “Owner Operator” is defined as an individual or group of individuals that are responsible for the overall administrative operation of the facility including but not limited to: administering finances, personnel, maintenance, meal planning and preparation, transportation, and meeting overall program objectives.

“Parent” means the biological or adoptive mother or father or the legal guardian of a Child.

“Pediatric first aid” means any emergency care and treatment of an injured child before definite medical and surgical management can be secured. Pediatric first aid includes but is not limited to: rescue breathing, first aid for choking, and CPR.

“Professional Development” includes but is not limited to: workshops, reading, video presentations, lectures, or time spent with consultants.

“Related” means any of the following familiar relationships by blood, adoption, marriage or legal guardianship: siblings (brother - sister - or step-brother - step-sister), step-parent - step-child, parent - child, grandparent - grandchild, uncle or aunt - nephew or niece, first cousins.

“Rescue breathing” means the process of breathing air into lungs of a person who has stopped breathing that is also called “artificial respiration.”

“Rules and Regulations” means all rules, policies, regulations, standards, and conditions promulgated by the Department contained in this document.

“Sanitize” see Clean and Disinfect.

“School-Age child” means a child who is enrolled in a school, including kindergarten usually from 5 to 14 years of age.

“School-Age Programs” are programs held outside of a regular school day for children ages 5 to 14 that are developmentally appropriate that include but are not limited to: academic enrichment, personal growth, cultural, recreational, sports and fitness activities. These programs may include after-school programs, summer camps and other children’s camps.

“Staff” refers to all personnel employed at a facility, including caregivers, volunteers, interns, and others who do not provide direct care to the children (including but not limited to: cooks, drivers, maintenance, housekeeping personnel)

“Sudden Infant Death Syndrome (SIDS)” means the sudden and unexpected death of an apparently healthy infant, typically occurring between the ages of 3 weeks and 5 months and not explained by an autopsy.
“Supervision” means the awareness of and responsibility for the ongoing activity of a child or group of children. Supervision requires physical presence, knowledge of activity requirements and children’s needs, and accountability for their care.

“Training” video presentation. See Professional Development.

“Universal precautions” is a term that describes the infectious control precautions recommended by the Centers for Disease Control and Prevention to be used in all situations to prevent transmission of blood borne germs.

“Violation” means any infraction of the Child Care Facility Licensure Act and/or the Rules and Regulations.

SECTION 3
(300)
LICENSED PROCEDURES/CERTIFICATION

301 Licensing Procedures

A. A person desiring to operate a child care facility or children’s camp shall file a written application with the department that meets all of the requirements stated in the application in conjunction with the required inspection forms and other documents that certify the appropriate minimum standards set by the Department.

B. During the consultation process, an initial inspection of the facility will be conducted by a representative of the Department.

C. Upon receipt of the Application and accompanying inspection reports from partner agencies (including but not limited to Fire, Health), the Department shall conduct its investigation of the applicant and the plan of care for children.

D. The Department shall complete its investigation and render a decision on the application within ninety (90) days after receipt of the Application and accompanying reports.

E. If the Department determines that the facility has reasonably satisfied all of its requirements, it shall issue a license.

F. The Department may impose restrictions on the facility, including, but not limited to, the number of children to be served and the ages of children to be served.

G. If a facility meets any definition of a school under the authority of the Department of Education and any definition of a child care facility under the authority of the Department of Human Services, the legal entity shall apply for approval to operate from both the Departments of Education and Human Services.
302 License Not Transferable

Any license, issued by the Department, shall apply only to the location stated on the application and is not transferable from one person to another or from one place to another. If the location of the facility is changed or modified the owner of the facility is changed or modified, the license shall be automatically revoked and is rendered null and void.

303 Application for Renewal of License

A facility may apply for a renewal of its license in accordance with the provision of this Section and the rules and regulations promulgated by the Department no later than ninety (90) days prior to expiration of its license. The application must be completed and acted on prior to the expiration of the license. This is not the same as a new license. Evaluation to determine if the applying facility meets all requirements must include at least four (4) visits to the facility and review of all required forms and records.

304 Provisional License

A. The Department may issue a provisional license to a facility whose plans meet the Department requirements but which is:

1. Not currently operating; or

2. Changing ownership.

3. A provisional license is valid for six (6) months from the date of issuance and is non-renewable.

305 Annual License

An annual license will be issued if the Department determines that the facility meets all requirements. The evaluation shall be based on a specific number of visits to the facility and a review of all required forms and records.

An annual license shall be valid for one (1) year.

306 Certification

All child care facilities operated by the Government of the Virgin Islands must receive a certification of approval from the Department of Human Services, Office of Child Care & Regulatory Services.

To be certified, the facilities must meet all Department Rules and Regulations, and provisions of this Chapter that apply to licensed facilities of the same category. The operator of a certified facility must display the certification in a prominent place at the facility. Certification of approval must be renewed every two years.
307 Suspension

A. If a facility has temporarily suspended operations but had definite plans for renewing operations within the time limits of the issued license, the Department may suspend the license.

B. If a facility fails to comply with the standard rules and regulations but does not endanger the health or safety of the children, the Department has the option of suspending the license for a definite period of time instead of denying or revoking the license. In order to qualify for suspension under this subsection, the facility must:

1. Show it can meet the standards within the suspension period; and
2. Suspend its operations for the appropriate period.

C. If a facility does not comply with standards after the suspension, the Department shall deny or revoke its license.

308 Denial or Revocation

A. If the Department finds that a facility does not comply with the provisions of the Act, the Department’s rules and regulations, or the specific terms of a license or Certificate of Approval, it must deny or revoke the license or certification of approval.

B. The Department shall provide written notice of the reasons for the denial or revocation and the rights of appeal within twenty (20) days and must state in the notification the reasons for denial or revocation.

C. The Department’s Hearings & Appeals Office shall hear the appeal within four (4) weeks of the notice of appeal and shall render its decision within thirty (30) days after the hearing. The Hearing Officer shall notify the person by certified mail of the decision.

D. Within twenty (20) days after receipt of the decision from the Hearings & Appeals Office, the person whose license has been denied or revoked may challenge the decision by filing a suit in the Superior Court of the Virgin Islands.

E. On request by a person challenging a Department decision in a court suit, the Department shall provide a copy of the transcript of the hearing, at his expense. Records of the hearing shall be kept for one (1) year after a final decision is rendered.

F. A facility may remain open during an appeal of the denial or revocation of its license unless the Department uses the procedures to close the facility set forth in the Act.
Penalties

A. Civil Penalty

1. Any person who violates any provision of the Act, the Department rules and regulations, or any standard of the Department that threatens serious harm to the children in the facility is subject to a civil penalty.

2. Any person who violates any provision of this Chapter or rule, regulation, or standard of the Department three or more times within a period of a year.

3. Any person who operates a facility without a license or certificate as required under these rules and regulations, or who places a public advertisement for an unlicensed facility, is subject to a civil penalty of not more than $1,000 for each day of violation and for each act of violation. Civil penalties shall be cumulative and in addition to the remedies of injunction and criminal penalties provided in Title 34, Chapter 13 of the Virgin Islands Code.

B. Criminal Penalty

1. Any person operating an infant and child care facility without a license or placing a public advertisement for an unlicensed facility will be prosecuted on a charge of a misdemeanor and punishable by a fine not to exceed $1,000 and imprisonment not to exceed three months or both.

2. The Attorney General of the Virgin Islands must bring all court actions initiated by the Department of Human Services. However, nothing within these Rules and Regulations preclude a parent/guardian from bringing a legal action on behalf of their child attending a child care facility.

SECTION 4
(400)
BUSINESS ORGANIZATION OF FACILITIES

401 Ownership and Operation of Facilities

A Child Care Facility may be owned and/or operated by an individual, partnership, association, religious organization, corporation, or by a department or agency of the Government, whether for or not-for-profit. The owner or operator or in the case of a corporation, the governing body, shall submit to the Department prior to licensure, a written statement setting forth the purpose and scope of the services to be provided by the facility.
402 Corporate Owner

In the case of a facility owned by a business entity, the facility shall file copies of all organizational documents and its amendments with the Department including but not limited to: the articles of incorporation, the by-laws, partnership agreements and any and all amendments thereto. All facilities must submit a letter of good standing within the Virgin Islands.

SECTION 5
(500) GENERAL ADMINISTRATION

501 Responsibility for Compliance with Rules and Regulations

Every facility shall have an operator or director who shall be liable for operating the facility in compliance with these Rules and Regulations and all applicable laws of the Virgin Islands. Should the owner or owners of a facility be different from the operator or director, the owner or owners shall be jointly and generally liable for operating the facility.

502 Documents to be displayed

A. Each center shall post the following in a conspicuous place within the facility clearly visible to parents, caregivers, and visitors:

1. The center’s license or certificate of approval

2. Telephone numbers for filing complaints with the appropriate licensing agency.

3. Emergency evacuation plan approved by the Fire Department to include procedure as specified in Section 801 of this document.

4. A current weekly menu for parents and caregivers, if meals are provided. The facility shall provide copies to parents, if requested. Copies of menus served shall be kept on file for one (1) year.

5. The following information shall be conspicuously posted adjacent to the main telephone at the Facility: Phone numbers and instructions for contacting the licensing agency, fire department, police, emergency medical services, local physicians, dentists, rescue and ambulance services, and the poison control center; the address of the facility, and directions to the facility from major routes north, south, east, and west.

6. Approved annual sanitation inspection by the Division of Environmental Health of the Department of Health (see Section 802 A).

7. Posted safety rules for the use of any swimming pool, and built-in wading pools, as well as corresponding health permits, fire permits, occupancy permits, reports, and citations.
B. Each center shall have the following documents accessible for review:

1. A statement informing parents/legal guardians about how they may obtain a copy of the licensing or certification requirements from the regulatory agency.

2. Information on procedures for filing complaints with the regulatory agency.

3. Inspection reports and any required certificates, as specified in the Rules and Regulations.

4. A notice that inspection reports, legal action, and compliance letters are available for inspection in the facility.

5. Procedures for reporting child abuse consistent with all Territorial laws.

6. A notice announcing the “open-door policy” (that parents may visit at any time and will be admitted without delay) and what action the facility will take to handle a visitor’s request for access if the caregiver is concerned about the safety of the children.

7. A class roster in each facility room that lists the names of all children assigned to that room and the name of the caregiver primarily responsible for each child.

8. A copy of the policy and procedures for discipline, including the prohibition of corporal punishment. This requirement also applies to school-age facilities.

9. A list of reportable communicable diseases as required by the V. I. Department of Health and how to report an incident.

503 Availability of Rules

At least one complete copy of the Rules and Regulations shall be available at the facility for review by parents, staff, and other persons.

504 Notification of Department in Case of Emergency

The Department of Human Services, Office of Child Care & Regulatory Services shall be notified by phone within two (2) hours and a written incident report within 24 hours of an occurrence or emergency at a child care facility, including but not limited to the following:

A. Fire;

B. Death of a child while attending the facility;

C. Any accident or injury;

D. Child abuse (sexual, verbal, or physical);
E. Kidnapping and/or prolonged disappearance of a child; and

F. Detection or presence of any serious communicable disease.

505 Notification of Department in Case of Changes in Ownership, Control, Location, or Operation of a Facility

The Department of Human Services shall be notified immediately, in writing, prior to any of the following:

A. Change in the director or operator of a facility; all contact information.

B. Change in the ownership of a facility. In the case of a corporation which owns a facility, this requirement shall be construed to require notification in case of a change in ownership of a minimum of twenty percent (20%) of the voting stock of the corporation or any change in ownership of the voting stock of the corporation which results in a change of majority control;

C. Change in location of a facility;

D. Permanent termination of the operation of a facility or the intent to do so;

E. Temporary suspension of the operation of a facility or the intent to do so;

F. Any changes to indoor or outdoor facility;

G. Change in hours of operation of the facility.

H. Change in the contact information or number of the facility.

506 Child Abuse or Neglect Mandatory Reporting Requirements

All the operators, directors, owners, and employees and staff of Child Care Facilities must comply with the reporting requirements of the Virgin Islands Child Abuse and Neglect Law, 5 V.I.C. Sections 2532 to 2554 which mandates that;

A. When any operator, director, owner or employee of a day care center has reasonable cause to suspect that a child has been subjected to physical abuse, sexual abuse, or neglect, or observes the child being subjected to conditions or circumstances that would reasonably result in abuse or neglect, he or she shall immediately report it to the Department of Human Services, Office of Intake & Emergency Referral.

B. In the case where an employee is required to make a report under subsection (a), the employee shall notify the operator of the known or suspected abuse/neglect and the operator shall also be responsible to make a report to the Department of Human Services, Office of Intake & Emergency Referral.

C. Reports shall include:
1. Name and address of child, his/her parents or person responsible for his/her care;
2. Child’s age and sex;
3. Nature and extent of the child’s injuries, abuse or neglect;
4. Name and address, if known, of person responsible for the injuries, abuse or neglect;
5. Family composition, if known;
6. Source of the report, including the name, occupation, and address of the person(s) making the report; and
7. Dates of observation;
8. Any other pertinent information that the person making the report believes may further the purpose of the Virgin Islands Child Abuse and Neglect Law.

D. In accordance with the law, any person required to report a case of known or suspected child abuse, sexual abuse or neglect, who knowingly fails to do so, shall be guilty of a misdemeanor and shall be fined no more than five hundred dollars ($500.00) or imprisoned for not more than one year or both.

507 Discrimination Prohibited

In accordance with the Federal law, Child Care Facilities shall not discriminate against any child, employee, or other person on the basis of race, creed, color, national origin, citizenship, or disability.

508 Telephone Required

All Child Care Facilities shall have a working landline telephone with a listed telephone number in the local phone book under the name of the facility.

509 Maintenance of Children’s Records

A. A Child Care Facility shall maintain a record on each child enrolled, which shall include:

1. The child’s full name, birth date, current address, and date of admission;
2. The name of the child’s parents, home address, employment address, telephone numbers and instructions as to where they may be contacted while the child is at the facility;
3. The names, addresses and telephone numbers of persons authorized to take the child from the facility, or to be contacted in the event of an emergency;

4. Written authorization from parents for emergency medical treatment; and

5. Written authorization from parents for the child to participate in field trips, excursions or swimming activities;

6. Current child health record as specified in Section 6; and

7. Documentation of parent conference(s) [see Section 514 C (4)].

B. All information included in children’s files shall be kept current and must remain private and confidential.

510 Attendance Records

Records of enrollment and daily attendance shall be maintained for each child. A daily sign in and out log including time, full name of parent or designee shall be maintained.

511 Personnel Records

Every facility shall maintain a confidential personnel record for each staff member; including all substitutes, in a secure location, which shall contain:

A. The employees’ name, age, address, telephone number, and Social Security Number;

B. A copy of an initial health appraisal signed by a licensed physician before their employment and every two (2) years thereafter unless the staff member’s health care provider recommends more frequently. At a minimum, health history, physical exam, TB screening and results or appropriate follow-up, review and certification of up-to-date immunization status, and any accommodations necessary in accordance with the Americans with Disabilities Act (ADA);

C. A current Food Handler’s card issued by the Department of Health;

D. Documentation of training in First Aid;

E. Documentation of CPR training, if applicable (See Section 706);

F. Employment history and educational background;

G. Identification from a government agency or Immigration documentation showing proof of approval to work in the United States (i.e. U. S. passport, U.S. birth certificate or U. S. permanent residency card or work visa);
H. Criminal background check from all jurisdictions where the employee lived and worked, including a check of the federal and local sexual offender registries; and
I. Copy of on-going continuing education and training (see Section 606).

512 Staffing Pattern

Every facility shall maintain a list of current staff, substitutes, and staffing pattern.

513 Availability of Records

All records shall be made available to the Department of Human Services – Office of Child Care & Regulatory Services at its request.

514 Statement of Policies

A Child Care Facility shall make available to parents a written statement of its policies and goals, which shall include the following:

A. The goals and objectives of the facility

1. The director/operator of a facility shall see to it that policies that promote the achievement of quality child care are developed, and shall also ensure stable and continuing adherence to all policies. When problems are identified, the director/operator shall be responsible for a follow-up plan to be sure that corrective action was taken and assign a person to correct the problem by a specified date.

2. The supervision policies that shall be specify:

   a. That no child shall be left alone or unsupervised while under the care of the child care staff. Caregivers shall supervise children at all times, even when the children are sleeping. A caregiver must be able to both see and hear infants while they are sleeping. Caregivers shall not be on one floor while children are on another floor.

   b. That developmentally appropriate child/staff ratios shall be met during all hours of operation, including field trips. (See Section 901)

3. Prohibition of Statements to corporal punishment

   a. Staff shall not hit the children or engage in any form of corporal punishment.

   b. Children shall not be subjected to cruel or severe punishment, humiliation, or verbal abuse.

B. The hours the facility is open and all holidays.
C. Procedures concerning admission and registration of children;

1. Caregivers shall inform all parents that they may visit the site at any time when their child is there, and that they will be admitted without delay. This open-door policy shall be part of the “admission agreement” or other contract between the parent and the caregiver.

2. All aspects of child care programs shall be designed to facilitate parental input and involvement.

3. Information about the child’s daily needs and activities shall be shared with parents on a daily informal basis.

4. Planned communication (e.g., parent conferences) shall be scheduled with at least one parent of every child in care to review the child’s development and adjustment to care; to reach agreement on appropriate, nonviolent disciplinary measures; and to discuss specific health issues and concerns. The signature of the parent, director, and/or staff reviewer in the child’s health record shall document each review. These planned communications shall be as follows:
   a. As part of the intake process
   b. At each appropriate health update a minimum of one (1) time per year.
   c. Whenever new information is added to the child’s health record.

5. The director shall assign staff members to maintain contact with the parent. The contact should include discussions regarding observations about the child.

6. The staff shall ask parents to share with caregiver information regarding the child’s health and developmental status.

D. Fees for part-time, regular household and before and after care if applicable.

E. Procedures for the handling of illness and emergencies of children (see Section 704);

F. Procedures for transportation of children, where provided (see Section 906);

G. Procedures for release of children from the facility;

H. Information concerning meals and snacks (see Section 10);

I. Procedures for discipline (see Section 912);

J. Procedures for medication distribution (see Section 702);
K. Procedures for pets and service animals on premises (see Section 707);
L. Procedures for notification of field trips.

515 Number and Age of Children to be Admitted

The maximum number of children admitted to a facility at any one time shall be the number stated on the license as “maximum capacity”, in accordance with the guidelines in Section 902. In determining maximum capacity, the children of the facility’s operator and staff members shall be included in the group size and the staff child ratio.

SECTION 6
(600)

GENERAL QUALIFICATION OF OWNER/OPERATOR

601 Competence and Moral Character

A. All staff members, volunteers and the operator or director shall be of good moral character; shall demonstrate mental, physical, and emotional competency in working with children.

B. No person convicted of a crime of violence involving child abuse and/or child neglect or who is a registered sex offender shall be the owner, operator, employee or volunteer staff member of a Child Care Facility. The Owner/Operator shall submit the results of a background check for all staff prior to employment.

C. The owner/operator shall demonstrate an ability to manage and direct the facility in a competent manner and to maintain compliance with the Rules and Regulations for a Child Care Facility. The owner is responsible for payment of all taxes, compliance with zoning, fire safety permits and compliance thereof and any other legal obligations. The owner must have an orientation to Early Childhood Education and must demonstrate qualifications managing an early care and education facility if no academic or professional background in early childhood education.

602 Entry Level Qualifications and Responsibilities of Director of Child care Facilities for Children Ages 0-5

NOTE: This section applies to Directors of group day care homes, nurseries, preschools, pre kindergartens, family day care homes, and day care centers.

A. The director/supervisor of a Child Care Facility:

1. Shall be at least twenty (21) years of age;

2. Shall ensure compliance with licensing requirements set forth in these Rules and Regulations;
3. Shall be responsible for supervising the daily operations of the program, including, but not limited to: the supervision and coordination of teaching staff, planning professional development for staff, planning and implementing daily program activities with the teaching staff, coordinating activities of teachers, management of program-parent relationships, and assisting the Operator/Owner with other administrative aspects of the program.

4. Shall have earned a Bachelors’ Degree in Early Childhood Education, Child Development, Special Education, Elementary Education or a child-related health or human services field;
   (OR)
   Shall have earned an Associate of Arts Degree in Early Childhood Education, Child Development, Special Education, Elementary Education or a child-related health or human services field and a minimum of three (3) years experience in a licensed or certified child care facility;
   (OR)
   Shall have a high school diploma
   (AND)
   Shall have obtained a Child Development Associate (CDA) credential and a minimum of five (5) years experience in a licensed or certified child care facility within the first year of employment
   (AND)
   Shall have obtained annual training of no less than twenty-four (24) clock hours of classroom instruction that include and is not limited to child care facility management, a Director’s institute, child development, health and safety, current best practices in child care, with a minimum of 1 (one) hour of training in the area of “child abuse and neglect”.

5. Shall be of good moral character as evidenced by at least three (3) professional references from unrelated persons who can attest to his or her moral character.

6. Shall ensure that all staff meet minimum qualifications, and shall provide orientation for all new staff, volunteers, and substitutes to acquaint them with the child care facilities’ philosophy, organization, program practices and goals. A written plan for this orientation process shall be on file at the facility.

B. Child care facility shall submit evidence of aforementioned qualifications of the director and/or supervisor no later than August 31, 2013.

603 Entry Level Staff Qualifications

A. Teacher:
   1. Shall be at least eighteen (18) years of age;
   2. Shall have a high school diploma or a GED or its equivalent;
3. Shall have completed or will complete within the first year of employment, an Associate Degree or higher in early childhood education; (OR)
   Shall have obtained a Child Development Associate (CDA) credential within the first year of employment (AND)
   Shall have obtained annual training of no less than twenty-four (24) clock hours of classroom instruction that include and is not limited to child care facility management, a Director’s institute, child development, health and safety, current best practices in child care, with a minimum of 1 (one) hour of training in the area of “child abuse and neglect”.

B. Assistant Teachers:
   1. Shall be at least eighteen (18) years of age;
   2. Shall have a high school diploma, GED, or its equivalent;
   3. Must be under the direct supervision of a teacher and/or director.
   4. Shall have obtained annual training of no less than twenty-four (24) clock hours of classroom instruction that include and is not limited to child care facility management, a Director’s institute, child development, current best practices in child care, with a minimum of 1 (one) hour of training in the area of “child abuse and neglect”.

C. Substitute Staff:
   1. Shall meet the qualifications for the assigned staff position;
   2. May be already employed at the facility and not meet the qualifications if, and only if:
      a. an unqualified substitute has not been employed as teacher or assistant teacher at the child care facility for more than twenty (20) consecutive working days for the same group of children per calendar year;
      b. there is always a person qualified as a Teacher present within the facility who is directly supervising the unqualified substitute.

D. Other Staff:
   1. Shall be at least sixteen (16) years of age;
   2. Must be under the direct supervision of a qualified staff member;
   3. If under eighteen (18) years of age, must work the number of hours of employment that complies with Virgin Islands child labor laws;
4. Shall be of good moral character

E. Volunteers:

1. Volunteers, who have direct contact with or access to children, must be supervised by a staff person who meets the qualifications for director, teacher, or assistant teacher at all times.

2. A classroom volunteer who is included in the staff to child ratio must meet the requirements for the assigned staff position or substitute. If the volunteer does not meet the qualifications, he/she cannot be counted towards the minimum child/staff ratios established for the relevant classroom.

3. Adult volunteers who are eighteen (18) years of age or older must also complete a background check.

4. Field trip volunteers can be counted towards the increase in child/staff ratios required by trips outside of the center facility.

5. Food handler or kitchen volunteer must also get a food handler’s card from the V.I. Department of Health

F. Child Care Facility shall submit evidence of the aforementioned qualifications of entry level staff no later than August 31, 2013.

G. Directors, Supervisors and Entry Level Staff of a Children’s Camp will not need to meet the qualifications of this section.

604 Entry Level Qualifications and Responsibilities of Director of School Age Programs

A. The Director of a School Age Program:

1. Shall be at least twenty-one (21) years of age;

2. Shall ensure compliance with licensing requirements set forth in these Rules and Regulations;

3. Shall be responsible for supervising the daily operations, including, but not limited to: the supervision and coordination of programs, staff, providing pre-service orientation and training to new full and part-time staff. Pre-Service Orientation and Training shall include but are not limited to the following:

   • The goals and philosophy of the facility;
   
   • The age groups of the children for whom the caregiver will be responsible, and their specific developmental needs;
• Any special adaptation(s) of the facility required for a child with special needs;

• Any known health or nutrition need(s) of the children assigned to the caregiver;

• The planned program of activities and curriculum at the facility;

• Routines and transitions;

• Acceptable methods of discipline;

• Policies of the facility about relating to parents;

• Meal patterns and food-handling policies of the facility;

• Occupational health hazards for caregivers;

• Emergency health and safety procedures (see Section 801 D (4));

• General health policies and procedures, including but not limited to the following:
  
  o Child abuse detection, prevention, and reporting.
  o Teaching health promoting concepts to children and parents as part of the daily care provided to children.
  o Recognizing symptoms of illness.
  o Dispensation and storage of medication.

A written plan for this orientation shall be on file at the child care facility for review by the Office of Child Care and Regulatory Services.

4. Shall provide in-service training and professional development opportunities to all staff, design and implement daily activities, facilitate parent involvement and assist the Operator/Owner with other administrative aspects of the program.

5. Shall have a Bachelors’ Degree in Early Childhood Education, Elementary Education, Special Education, Child Development, or a child-related field, social work, psychology, or in a specific content area related to the school-age program, including, but not limited to: art, music, dance, recreation, physical education, education, home economics, business management or administration, or nutrition.

(OR)

An Associate of Arts Degree in Early Childhood Education, Elementary Education, Special Education, Child Development, or a child-related field, social work, psychology, or in a specific content area related to the school-
age program, including, but not limited to: art, music, dance, recreation, physical education, education, home economics, business management or administration, or nutrition.

(OR)
A high-school diploma or GED and twenty four (24) clock hours of classroom training related to but not limited to the following areas: child development, recreation, administration/management, school age care, special needs children, special education or specific content area of school-age program including, but not limited to: art, music, dance, recreation, physical education, home economics, nutrition or completed a Director’s Institute or Credential Program in early childhood education/child development, other child-related field. No less than twelve of the twenty-four clock hours of classroom instruction must be related to child development, the education and care of children, and child abuse detection, prevention and reporting.

(AND)
A minimum of three (3) years experience working with school-age children.

6. Shall be of good moral character, attested to by at least three references from unrelated persons.

B. Professional Development Requirements for Director: Annual training of no less than twelve (12) clock hours of classroom training in child development, current best practices in child care, a Director’s Institute or program management. Of the twelve required hours, a minimum of 1 (one) hour of training in the area of “child abuse and neglect” is required. (doesn’t this statement conflict with the 24 hours entry level requirements. Are they supposed to come in with those hours or are they required to complete 24 hours every year thereafter)

605 Entry Level Requirement for School-Age Program Staff (to include lead teachers, assistant teachers, caregivers, coaches, counselors, tutors, mentors, activity coordinators, etc.)

A. School-Age Program Staff

1. Shall be eighteen (18) years of age or older;

2. Possess a high school diploma or GED;

3. Have school-age child development knowledge and experience;

4. For all academic enrichment programs, the Lead Teacher shall have obtained at least an Associate Degree in a related subject matter and shall provide supervision to all staff working with the students; and

5. SHALL have the ability to implement the activity program.
B. Substitute Staff shall meet the qualifications for the assigned staff position (See above).

C. Other Staff
   1. Shall be sixteen (16) years of age or older;
   2. Must be under the direct supervision of a qualified staff member;
   3. If under eighteen (18) years of age, must work the number of hours of employment that comply with Virgin Islands child labor laws;
   4. Shall be of good moral character as evidenced by at least three (3) professional references from unrelated persons who can attest to his or her moral character.

D. Volunteers
   1. Volunteers, who have direct contact with or access to children, must be supervised by a staff person who meets the qualifications for director.
   2. A classroom volunteer who is included in the staff to child ratio must meet the requirements for the assigned staff position or substitute. If the volunteer does not meet the qualifications, he/she cannot be counted towards the minimum child/staff ratios established for the relevant classroom.
   3. Adult volunteers who are eighteen (18) years of age or older must also complete a background check.
   4. Field trip volunteers can be counted towards the increase in child/staff ratios required by trips outside of the facility.
   5. Food handler or kitchen volunteers must also get a food handler’s card from the Department of Health.

E. Professional Development for School-Age Staff: All School-Age Program Staff must complete, on an annual basis, a minimum of six (6) clock hours of classroom training to include but is not limited to the following:
   1. Child development
   2. Health and safety, or life safety
   3. Children with special needs
   4. Nutrition
   5. Any child care related courses sponsored or funded by the Department
   6. Behavior guidance
   7. Working with families
8. Legal issues in child care
9. Child welfare
10. Specific content areas related to School-Age Program

606 Health Requirements –Director and Staff for all Child Care Facilities

A. All staff members, including the director, shall have a current health card and physical report on file, stating the results of an initial health appraisal signed by a licensed physician before their employment and every two (2) years thereafter unless the staff member’s health care provider recommends more frequently. The medical report shall include:

1. A record of laboratory work to verify that the individual is free of parasites or tuberculosis;
2. A statement from the licensed physician indicating that the individual is free of communicable disease;
3. A recommendation from the licensed physician that the individual is physically able to work with young children; and
4. The signature of licensed physician and date of examination.

B. All summer employees, volunteers and interns shall have a current physical and health card that shall be renewed in accordance with regulations of the Department of Health.

607 Attitude Towards Children

The operator or director and all employees, interns and volunteers of a facility shall relate to all infants and children with courtesy, respect, acceptance, and patience. Children should be held, cuddled and spoken to as is developmentally appropriate.

608 Professional Development

A. Annually a minimum of fifteen (15) clock hours of classroom training in the field of child development, developmentally appropriate practices, and issues related to children with 1. disabilities, 2. child abuse, 3. health, 4. safety, 5. nutrition, 6. environmental issues and/or related areas shall be provided for staff each year. A written description of such training shall be kept on file at the facility. (doesn’t this statement conflict with the 24 hours entry level requirements. Are they suppose to come in with those hours or are they required to complete 24 hours every year thereafter)

B. Any new full and part-time staff shall be oriented within thirty (30) days of start date and be able to clearly demonstrate knowledge of the following items (1) through (12). The orientation shall address, at a minimum:

1. The goals and philosophy of the facility;
2. The names and ages of the children for whom the caregiver will be responsible, and their specific developmental needs;

3. Any special adaptation (s) of the facility required for a child with special needs;

4. Any special health or nutrition need(s) of the children assigned to the caregiver;

5. The planned program of activities and curriculum at the facility;

6. Routines and transitions;

7. Acceptable methods of discipline;

8. Policies of the facility about relating to parents (i.e. parent handbook);

9. Meal patterns and food-handling policies of the facility;

10. Occupational health hazards for caregivers;

11. Emergency health and safety procedures (see Section 801 D (4)); and

12. General health policies and procedures, including, but not limited to the following:

   a. Child abuse detection, prevention, and reporting.

   b. Teaching health promoting concepts to children and parents as part of the daily care provided to children.

   c. Recognizing and reporting symptoms of illness.

   d. Dispensation and storage of medication

SECTION 7
(700)
Health Rules and Regulations

701 Medical Examination and Report

Each child from ages 0-14 shall also have had a health examination and all recommended immunizations according to the American Academy of Pediatrics and the V. I. Department of Health, within sixty (60) days prior to initial admission to a facility, and at least annually thereafter. These guidelines are issued on a yearly basis typically in December or January. Head Start programs are required to meet Federal Head Start Requirements. A child health record and immunization record shall be on file at the facility and shall be renewed and updated annually when appropriate.
For children ages 6-14 the providers will require the following for after school programs and children’s camp programs:

A. Child health record
B. Immunization record

702 Medications

A. Medications and special procedures shall be administered only as follows:

1. Prescription medications shall be in the original container labeled with the child’s name, a date, directions, and the physician’s name. Medication shall not be administered after any stated expiration date.

2. All non-prescription medications shall be labeled with the child’s name and dated. All non-prescription medication shall be administered to the child only when approved in writing by health personnel and the child’s parents and in accordance with label instructions.

3. Aspirin or aspirin-containing preparations may not be administered in a child care facility without a prescription by a licensed health care provider.

B. A written log of medications administered shall be kept at the facility. Entries shall include the full name of child and full name and signature of individual instructing the facility to administer the medication with instructions, the name of the medication and the expiration date, time and amount administered as well as the full name and signature of the person who administered the medication.

C. All medications, refrigerated or un-refrigerated, shall be secured with child-protective caps, shall be kept in an orderly fashion, shall be stored away from food at the proper temperature and in a container clearly labeled “FOR MEDICATION ONLY”. All medication shall be inaccessible to children and shall not be used beyond the date of expiration. Medications shall be kept out of the reach of children, and in locked storage.

703 Oral Health

A. In facilities where tooth brushing is an activity, each child shall have a personally labeled toothbrush. Toothbrushes shall be replaced when bristles have lost their tone. Toothbrushes shall be stored so that they do not drip on other toothbrushes, and shall be separate from one another. Bristles should be facing up and exposed to the air to dry, and not in contact with any surface.

B. Staff shall supply drinking water to children at all times. Children shall be offered drinking water after meals and snacks to counterbalance the cavity-causing effect of frequent exposure to food.
C. Staff should be trained in the prevention of “baby bottle syndrome”. Babies shall not be put to bed with a bottle, unless it is only filled with water. Bottles shall not be propped up for feeding. If a child uses a pacifier, it shall not be dipped in sweet substances.

704 **Illness and Injury**

A. Illness shall be handled to protect the health of all children in the facility.

B. Parents of an HIV-infected child shall be notified immediately if the child has been exposed to chicken pox, TB, or measles through other children in the facility.

C. A child whose immune system does not function properly to prevent infection and who is exposed to measles or chicken pox shall be referred immediately to his/her health care provider to receive the appropriate preventive measure (immune globulin) following exposure.

D. Caregivers known to be HIV-infected shall be notified immediately if they have been exposed to chicken pox, TB, or measles through children in the facility; they shall receive an appropriate preventive measure (immune globulin); Their return to work after exposure shall be determined jointly by the center director and the health care provider for the HIV-infected caregiver.

E. There shall be daily observation of each child on arrival at the facility by a person capable of recognizing common signs of communicable disease or other evidence of ill health. A child who is apparently ill shall not be allowed at the facility until he/she is in good health. If the child becomes ill after arrival at the facility, he/she shall be given a bed or cot away from the other children, and the child’s parents shall be called immediately. The child shall be supervised until he/she leaves the facility.

F. Staff must, upon registration of each child, inform parents of the need to notify the facility within 24 hours after the child has developed a known or suspected communicable disease, or if any member of the immediate household has a communicable disease, and to inform the facility of any other illness that is not a communicable disease or other absence experienced by the child when the child returns to the facility. Upon return to school, medical clearance is required. When the child has a disease requiring exclusion or dismissal, the parents must inform the facility of the diagnosis.

G. If there has been an exposure to an infectious disease or condition, parents of other children who attend the facility shall be informed that their child may have been exposed.

H. Admission or re-admission of any child who has recently suffered a communicable disease shall be allowed only if recommended in writing by a licensed physician.
I. In case of illness or injuries occurring at the facility, the parent must be notified as soon as reasonably possible and the child shall be given first aid, if needed. In the case of critical illness or injury, the physician named by the parents shall be called. If necessary, the child shall be taken to the nearest medical facility emergency room and the parents contacted immediately. Seek prior consent, if possible.

705 *Emergency Telephone Numbers*

A. The facility shall have a telephone and emergency telephone numbers and instructions must be posted. Cellular phone must be provided on field trips.

B. When an immediate response is required, the following emergency procedures shall be utilized:

1. First aid and CPR care shall be employed, and the emergency medical response team shall be called immediately, as indicated.

2. The facility shall have a plan of action for emergency transportation (i.e. ambulance) to arrive/deliver child or staff to local hospital or health care facility.

3. The parent or parent’s emergency contact person(s) shall be called.

C. The facility shall document that a child’s parent or legal guardian was notified immediately of an injury or illness that required professional medical attention.

D. If a facility experiences the death of a child or staff, the following shall be done:

1. If the child dies while at the facility:
   a. Immediately notify emergency medical personnel.
   b. Immediately notify the child’s parents
   c. Notify the licensing agency.
   d. Provide age-appropriate information for children and parents.
   e. Seek and provide to staff, children, and parents support from an appropriate health and/or mental health professional.

2. If the child dies while not at the facility:
   a. Provide age-appropriate information for children and parents.
   b. Make resources for support available to staff, parents and children.
E. The following telephone numbers shall be in a place accessible and readily available to the staff:

1. Telephone numbers where each child’s parents and emergency contact persons may be reached;

2. Telephone number of the physician of each child designated by the parents;

3. Telephone numbers where staff, their families, and designated physicians of staff members may be reached.

706 First Aid and CPR Certificates

A. All staff working with children shall receive training in Pediatric First Aid and certified in Child CPR, including management of a blocked airway and rescue breathing.

B. A first aid manual shall be readily accessible to all adults at the facility.

C. Minimum first aid equipment shall be maintained and properly stored, readily available to staff, and not accessible to children. An additional complete first aid kit shall be taken on field trips and outings away from site. First aid kits shall contain:

(1) Hand sanitizer
(2) Alcohol
(3) Band-aids or liquid bandages
(4) Tweezers
(5) Adhesive tape
(6) Absorbent cotton
(7) Non mercury containing thermometer
(8) Cotton tipped applicator or swab
(9) Tongue depressors
(10) Sterile gauze
(11) Bandage scissors
(12) Hydrogen peroxide
(13) Impervious disposable gloves

Additional first aid supplies are recommended:

(1) Sealed packages of alcohol wipes or antiseptic
(2) Safety Pins
(3) Eye dressing
(4) Pen/pencil and note pad
(5) Cold pack
(6) Insect sting preparation packets
(7) Telephone number for the poison control center or 911
(8) Distilled water
(9) Small plastic or metal splint
(10) Liquid Soap
707 Animals

A. Animals at the facility shall be vaccinated according to the recommendations of a licensed veterinarian. Documentation of such vaccinations shall be filed at the facility.

B. The facility and surrounding yard shall be kept free of stray animals and animal waste.

708 Smoking/Alcohol/Substance Abuse

A. Facilities shall have written policies specifying that smoking, use of alcohol, and use or possession of illegal substances or unauthorized potentially toxic substances are prohibited in the facility when children are in care.

B. The use of tobacco (in any form), alcohol, and illegal drugs shall be prohibited on the facility premises during the hours of operation.

709 Persons Permitted at the Facility

When children are present, no person whose behavior or health status endangers the health, safety or well-being of the children may be allowed at the facility. Any person with symptoms of contagious disease or physical or mental condition which would be harmful to the children or who appears to be intoxicated shall not be allowed at the facility while children are present.

SECTION 8
(800)
FIRE, HEALTH, BUILDING AND SAFETY

801 Emergency Procedures

A. In case of danger from fire, the first responsibility of the operator and staff of the facility shall be the evacuation of the children.

B. All facilities must have a certificate indicating that it meets Fire Service Regulations and has passed annual inspections including having required fire extinguishers on site (see appendix for current regulations).

C. An emergency evacuation plan, which has been approved by the Fire Service, must be posted. Staff members shall be instructed in emergency procedures by Fire Services personnel. Emergency drills shall be held monthly at unexpected times. Centers shall document all emergency drills and all such documentation shall be submitted with license renewal application.

1. The facility shall have a written procedure for reporting and responding to fire, flood, tornado, earthquake, hurricane, power failure, or other disaster that could create structural damages to the facility or pose health hazards. The facility shall also include procedures for staff training on this emergency plan.
2. The director or designee shall use a daily roster to check the evacuation and return to a safe indoor space, all children in attendance during an evacuation drill.

D. The facility shall have a written emergency plan outlining procedures for reporting and managing incidents or unusual occurrences that are threatening to the health, safety, or welfare of the children and/or staff. The facility shall also include procedures for ongoing staff training on this emergency plan. The following incidents, at a minimum, shall be addressed in the emergency plan.

1. Lost or missing child.

2. Sexual or verbal or physical abuse or neglect of a child (as mandated by the V. I. Code).

3. Injuries requiring medical, psychological or dental care.

4. Serious illness requiring hospitalization, death of a child enrolled in the facility, or death of a caregiver, including deaths that occur outside of child care hours.

   (a) Procedure for a caregiver to accompany a child to emergency care services and remain with the child until the parent or legal guardian assumes responsibility for the child; and provision for a backup caregiver or substitute to make this feasible. Child/staff ratios must be maintained at the facility during the emergency.

   (b) How to access emergency medical care – a hospital emergency room, clinic, or other constantly staffed facility known to caregivers and acceptable to parents.

   (c) Procedure for re-supply of first aid kits following each first aid incident, and maintenance of required contents in a serviceable condition, by a periodic review of the contents.

   (d) A plan for rapid response to choking, including posting of a chart near feeding areas showing choking response procedures for infants and young children.

E. Facilities providing services to children with special needs shall have a written plan for emergency, medical backup, medical procedures and training of staff. This plan shall describe situations that may arise due to the child’s condition and the appropriate procedures to be used with the child while he/she is in the care of the caregiver.

F. Smoke detectors shall be required and installed as specified by the V. I. Fire Code.

   1. Smoke detectors installed shall be tested monthly and the batteries shall be replaced yearly.
2. Smoke detectors older than 10 years old shall be discarded.

802 Health and Sanitation

A. The Child care Facility shall have an approved annual sanitation inspection by the Division of Environmental Health of the Department of Health. The health permit from the Department of Health shall be prominently displayed in the facility at all times.

B. All rooms used by children shall be cooled, and ventilated to maintain comfortable temperatures, humidity, and air exchange and to avoid accumulation of objectionable odors and harmful fumes. There shall be adequate light and ventilation in all areas of the center. Fixtures shall be shaded.

C. There shall be an adequate supply of drinking water of a safe quality standard, which shall be certified by the Division of Environmental Health at least two times per year. Drinking water shall be available to the children at all times.

D. Adequate and clean water for flushing toilets and washing hands shall be available. Staff and children shall wash their hands for at least ten (10) seconds with soap and running water at the following times including but not limited to:

1. Before and after food preparation, handling, or serving;
2. After toileting or changing diapers;
3. After assisting a child with toilet use;
4. Before setting the table;
5. Before and after eating meals or snacks;
6. After handling pets or other animals;
7. After engaging in any act of personal hygiene;
8. After exposure to blood or blood-containing body fluids and tissue for nose discharges.
9. Whenever hands are in contact with body fluids.

E. When plumbing is unavailable, the facility shall provide a hand-washing sink using a potable water supply.

F. Noses shall be blown or wiped with disposable, one-use tissue that are discarded in a plastic-lined and covered garbage container. Hands shall be washed after blowing as specified.
G. Food service utensils and equipment shall be properly cleaned and sanitized after each use. Hot water shall be used for proper sanitizing of dishes.

H. Paper and/or plastic plates and utensils shall be discarded after each use. No single service articles may be re-used.

I. Garbage shall be emptied into standard containers, which shall be fully covered and stored and emptied daily. There must be at least one (1) covered garbage container in each bathroom and kitchen.

J. Premises and child play areas shall be kept free of animal waste, insects, rodents, vermin or other pest infestations, and shall not provide shelter to pests.

K. Beds, cots, cribs, playpens or other furniture shall be sanitized and linens shall be cleaned and in good repair. Cots and linens shall be labeled and used for one (1) child only.

L. No child shall be permitted to remain in a wet bed.

M. Diaper changing procedures consistent with those recommended by the Centers for Disease Control shall be implemented and posted in the changing area.

N. Each room in which children who wear diapers are cared for shall have its own diaper-changing area.

O. Soiled diapers shall be stored in containers separate from other waste. Conveniently located, washable, plastic-lined, tightly covered receptacles, operated by a foot-pedal, shall be provided within arm’s reach of diaper-changing tables for soiled diapers. Separate containers shall be used for disposable diapers, cloth diapers (if used), and soiled clothes and linens.

P. Each waste and diaper container shall be labeled and kept clean and free of build-up of soil and odor. Waste-water from such cleaning operations shall be disposed of as sewage.

Q. The changing area shall never be located in food preparation areas and shall never be used for temporary placement or serving of food.

R. All frequently mouthed toys in rooms in which infants and toddlers are cared for shall be cleaned and disinfected daily with a water and bleach solution and left to air dry.

S. Thermometers and pacifiers shall not be shared among children. However, re-useable thermometers with disposable sanitary covers are acceptable for multiple uses.

T. Disposable towels or reusable towels, laundered between uses, shall be used for cleaning. Disposable towels shall be (sealed in a plastic bag and removed to outside garbage.) Cloth towels shall be placed in a closed, foot-operated receptacle until laundered.
U. Cleaning supplies, pesticides, medications, and other hazardous supplies shall be properly stored in a locked area away from food supplies.

V. Floors shall be cleaned daily and be in good condition and repair.

W. No person with any infection, cold or other contagious illness shall be involved in the preparation or service of food.

X. Each child shall have his own towel, wipes and other personal hygiene effects. Towels and washcloths must be washed in hot water or replaced daily. Paper towels are preferred but must be properly discarded after use.

Y. Changing tables with disposable covers must be used whenever children are changed. Covers must be changed after each use.

Z. One time use, disposable gloves (i.e., latex or latex free) must be used by all employees when coming in contact with body fluids and when changing diapers. Gloves should be changed after each child.

AA. Spills of body fluids (i.e., urine, feces, saliva, nasal discharge, eye discharge, and injury or tissue discharges) shall be immediately cleaned and disinfected. Gloves shall be used in these situations unless the amount of body fluid is so small that the material used for cleaning can easily contain it. If disposable gloves are used, they must be discarded immediately and hands washed. Gloves shall be used at all times in the presence of blood and shall be sanitized, washed, and dried after every use.

1. Mops shall be cleaned, rinsed in sanitizing solution, and then wrung as dry as possible and hung to dry.

2. Blood-contaminated material and diapers shall be disposed of in a special biohazard labeled plastic bag with a secure tie, and moved to the outside garbage receptacle.

803 Compliance With Building Code and Zoning Laws

A. Facilities shall be in compliance with the Virgin Islands Building Code, the Virgin Islands Zoning and Subdivision Law, and any and all other laws and regulations concerning land use and building standards.

B. Plans to erect new buildings, or to remodel existing buildings, shall be submitted to the Department of Planning and Natural Resources (DPNR), Department of Human Services, Fire Services, and any other appropriate government agency for review and approval in accordance with the law. Construction, renovation, remodeling, or alterations of structures during child care operations shall be done in such a manner as to prevent hazards or unsafe conditions.

C. The facility shall make reasonable accommodations for accessibility for children and/or parents with disabilities in accordance with the Americans with Disabilities Act of 1990 (ADA).
D. The structure of the facility shall permit children fast and safe exit in case of an emergency consistent with the evacuation plan.

1. Only the ground floor level of any building shall be occupied by children.

2. The facility must have a minimum of two (2) exits to the outside, located on different sides of the building. Exits must be kept free and clear of objects, debris, and other impediments at all times.

3. Exterior doors shall be a minimum of thirty-six (36) inches wide, and shall open outwardly, in direction of travel. Door openings shall be maintained to be easily opened from the inside.

4. At least one (1) egress (exit) window that readily opens in case of emergency shall be required in each room occupied by children.

804 Safety

A. The buildings, grounds, and equipment shall be properly repaired and maintained to protect the health and safety of the children.

1. Facilities shall be supplied with electric service that meets the basic requirements set forth in the V. I. Code.

2. All electric cords and appliances must be in safe working condition and must be UL approved. All wiring and electrical fixtures must be approved by fire inspectors. All electrical outlets accessible to children shall have electrical outlet safety covers.

3. Electric fans, if used, shall be mounted high on the wall or ceiling or shall be guarded to limit the size of the opening in the blade guard to less than a half (½) inch. Electric fans shall not be hung below light fixtures.

4. No window air conditioners shall be installed where children can reach working parts. Where 220-volt window unit connections are within children's reach, a screen or guard shall protect the connection.

5. Gas appliances shall have metal tubing and connections, unless otherwise approved by the fire inspectors.

6. Stairs and porches shall have railings (to prevent injuries) the children can reach. Railings and other wooden structures shall be free of splinters. Stairs shall be in compliance with DPNR regulations.

7. Garbage cans shall be covered at all times.

8. Combustible materials shall be kept away from light bulbs and other heat sources.
B. Indoor and outdoor equipment and materials shall be safe for the children. Kept in good repair and working condition and staff shall supervise all children to ensure they are using the equipment safely.

1. Equipment, materials, accessories, and furnishings shall be sturdy and free of sharp point corners, splinters, protruding nails or bolts, loose rusty parts, hazardous small parts, or paint that contains lead or other poisonous materials. The area surrounding indoor and outdoor equipment and materials shall be kept free from small parts that may become detached during normal use or reasonably foreseeable abuse of the equipment and that present a choking, aspiration, or ingestion hazard to a child.

2. Outdoor play equipment shall be away from high traffic areas in the yard, and shall be securely anchored, unless portable by design. All play equipment shall be constructed and installed in such a manner as to be safe for use by children according to recommendations by the United States Consumer Product Safety Commission.

3. Indoor and outdoor structures or equipment with hard or sharp surfaces or edges shall be covered with protective padding.

4. Anchored play equipment shall not be placed over, or immediately adjacent, to hard surfaces.

5. All pieces of playground equipment shall be surrounded by a resilient surface consistent with the guidelines established by the U.S. Consumer Product Safety Commission.

6. All pieces of playground equipment shall be designed to guard against entrapment or situations that may cause strangulation. Equipment should be designed too large for a child’s head to get stuck or too small for a child’s head to fit thru. Please refer to the guidelines in the U.S. Consumer Product Safety Commission Report.

7. Outdoor play equipment that is accessible to children shall not be coated or treated with toxic materials.

8. All outdoor activity areas shall be maintained in a clean and safe condition by removing abandoned cars, old appliances (e.g., refrigerators & stoves), debris, dilapidated structures, broken or worn play equipment, building supplies, glass, sharp rocks, twigs, toxic plants, and other injurious material. The play areas shall be free from anthills, or other visible insect hazards (e.g., wasps’ nest), unprotected ditches, wells, holes, grease traps, cisterns, cesspools, and unprotected utility equipment. Holes or abandoned wells within the site shall be properly filled or sealed. The area shall be well drained with no standing water.
9. Strings and cords (e.g., those that are parts of toys, or those that are found on window shades) that are long enough to encircle a child’s neck (6 inches or more) shall not be accessible to children.

10. Infants, toddlers, and preschool children shall not be permitted to inflate balloons, nor shall they have access to deflated or under-inflated balloons.

11. All children and adults shall wear approved safety helmets while riding bicycles at all times and shall wear safety helmets, elbow pads, and wrist guards while using skateboards and roller blades or in-line skates at all times. Approved helmets shall meet either the American National Standards Institute (ANSI) Z90.4 or Snell Memorial Foundation Standard.

12. Toys containing any explosive agency (such as “caps”) or that tend to propel a missile of any description (such as “darts” or “BB’s”) shall not be allowed.

C. Toxic substances, both indoors and out, shall not be accessible to children. All chemicals used inside or outside shall be stored in their original containers in a safe and secure manner, accessible only to authorized staff. They shall be used only according to the manufacturer’s instructions, and in a manner that will not contaminate play surfaces or articles. When not in use, such materials shall be kept in a place inaccessible to children and separate from stored medications and food. (The Environmental Protection Agency has a list of restricted chemicals unsuitable for use in a child care environment.)

1. All toxic pesticides shall be applied by a licensed exterminator in a manner approved by the Environmental Protection Agency. Application shall be directly observed by a member of the child care staff to be sure toxic chemicals applied on surfaces do not constitute a hazard to the children and staff. No pesticide shall be applied while children are present.

2. No restricted-use pesticide shall be stored on the premises and can only be applied by properly licensed persons. Only a licensed person shall be authorized to use pesticides.

3. Chlorine products shall never be combined with ammonium compounds, as they produce a poisonous gas when mixed together.

D. Glass doors must be properly marked to prevent accidents and injuries.

E. The facility shall not have any firearms, pellet or BB guns (loaded or unloaded), darts, or cap pistols within the premises at any time.

F. Matches and lighters shall be stored in a location that is inaccessible to children.

G. Gasoline and similar flammable materials shall be stored away from the children in a separate building.
H. All plastic bags, whether intended for storage, trash, diaper disposal, or any other purpose, shall be stored out of reach of children.

I. Environmental hazards, such as pits, abandoned wells, cisterns and abandoned appliances, that present a risk for entrapment or inhumation (burial) shall be covered or made inaccessible to children.

J. The poison control center and/or physician shall be called for advice about safe use of any toxic products (e.g., pesticides, plants, rat poison) or in any ingestion emergency, and advice from the poison control center shall be documented in the facility’s files.

K. When the manufacturer’s Material Data Safety Sheet shows the presence of any toxic effects, these materials shall be replaced with non-toxic substitutes. If no substitute is available, the product shall be eliminated.

L. Any asbestos that is friable or in a dangerous condition found within a facility shall be removed by a contractor certified to remove asbestos, encapsulated or enclosed, in accordance with existing regulation of the Environmental Protection Agency (EPA) the federal agency responsible for asbestos abatement.

M. Chemicals used in lawn care treatments shall be limited to those listed as non-restricted use.

N. No paint containing lead in excess of 0.06 percent shall be used when surfaces are repaired or when any new surfaces accessible to children are painted.

O. The soil in play areas shall not contain hazardous levels of any toxic chemicals or substances.

805 Toilets and Lavatory Facilities

A. There shall be a minimum of one flush toilet and one lavatory for every fifteen (15) children or fraction thereof.

B. The facility shall have inside toilets in bathrooms located and equipped so children can use them independently, and staff members can supervise when necessary. Children under the age of three must be supervised. Bathroom doors shall have no locks within the children’s reach.

C. Potty chairs may be used, but shall not be counted in the ratio of children to toilets. They must be emptied and sanitized immediately after each use.

D. Toilet seats, when used by adults, shall be covered with disposable seat covers or disinfected after each use.
SECTION 9  
(900)  
STAFFING, PROGRAMS AND FACILITIES  

901 Staff/Child Ratios and Maximum Group Size

A. In order to accommodate the individual differences in the needs of children enrolled, permit flexible groupings where necessary, and provide adequate adult supervision in cases of emergency, the following staff/child ratios and maximum group sizes shall be observed.

1. If children are grouped together by homogenous ages:

<table>
<thead>
<tr>
<th>Age of Child</th>
<th>Staff/Child Ratio</th>
<th>Group Size</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 to 12 months</td>
<td>1 adult for 5 children</td>
<td>10</td>
</tr>
<tr>
<td>12 to 24 months</td>
<td>1 adult for 6 children</td>
<td>12</td>
</tr>
<tr>
<td>1-2 years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2-3 years</td>
<td>1 adult for 8 children or partial group thereof</td>
<td>16</td>
</tr>
<tr>
<td>3 years</td>
<td>1 adult for 9 children or partial group thereof</td>
<td>18</td>
</tr>
<tr>
<td>4 years</td>
<td>1 adult for 10 children or partial group thereof</td>
<td>20</td>
</tr>
<tr>
<td>5 years</td>
<td>1 adult for 12 children or partial group thereof</td>
<td>24</td>
</tr>
<tr>
<td>6 to 14 years</td>
<td>1 adult for 12 children or partial group thereof</td>
<td>24</td>
</tr>
</tbody>
</table>

2. When there are mixed age groups in the same room, the child-staff ratio and group size shall be consistent with the age of most of the children in the group. Infants and/or toddlers (i.e. 0-36 months) are not permitted as parts of mixed older age groups.

B. The following child/staff ratios shall apply while children are wading or swimming:

<table>
<thead>
<tr>
<th>Age</th>
<th>Children</th>
<th>Adults</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-35 months old</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>3-5 years old</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>6-14 years old</td>
<td>4</td>
<td>1</td>
</tr>
</tbody>
</table>

C. Children of the operator and/or staff members shall be included in the number of children under care in determining the staff/child ratio and maximum group size.
902  **Space**

A. The minimum square footage of useable indoor space shall be consistent with the Virgin Islands Fire Department. The facility must meet ADA regulations. Kitchens, bathrooms, halls, and storage areas may not be counted in the space square footage per child.

B. There shall be a minimum of forty-five (45) square feet of useable enclosed outdoor play area per child in any group using the play area at one time. The area shall be properly maintained and shall be supervised at all times.

C. Public playgrounds may be substituted for outdoor area if they are located within safe walking distance from the center and meet safety requirements.

903  **Furnishings**

A. An individual covered cot or crib bed shall be provided for each child in a full day-program. Cots shall be available for children who attend for less than four hours, and may become sick or tired. Crib slots shall not be spaced more than 2-3/8 inches apart. Crib mattress shall be fitted so that no more than 2 fingers can fit between the mattress and crib side.

B. Each child’s clothing and personal effects shall be kept separate from those of other children (i.e. cubby holes or space in drawer).

C. Furnishings shall be of appropriate size and height for children’s comfort and reach.

904  **Equipment and Materials**

A. Equipment and materials shall be of sturdy, safe construction, easy to clean, and free of hazards that might be dangerous to the life or health of children. It shall be free of sharp points or corners, splinters, protruding nails, loose rusty parts, or paint containing lead or other poisonous substances.

B. Indoor and outdoor equipment and materials shall be provided that are appropriate to developmental needs, individual interests, and ages of the children. Equipment for infants shall include mobiles, soft toys, and other appropriate toys to stimulate infant development. Small objects, toys, and toy parts available to infants and toddlers shall meet the Federal small parts standards for toys and shall be cleaned and disinfected daily.

C. There shall be a sufficient amount of equipment and materials so that there is not excessive competition among the children or long waits for materials. Activity centers shall include, but not be limited to:

   (1) Developmentally appropriate books

   (2) Art materials
(3) Music materials and instruments
(4) Manipulative materials to enhance fine motor skills
(5) Blocks and block accessories
(6) Science materials
(7) Dramatic play materials including homemaking equipment and dolls
(8) Equipment to enhance gross motor skills

905 Program and Activities

A. The program of the facility shall meet the basic developmental needs of the children enrolled. There shall be a written plan of daily activities which reflects the ages, interests, and abilities of the children. Caregivers shall provide:

1. Opportunities for each child to develop a personal and affectionate relationship with a small number of caregivers. Caregivers’ responsiveness to each child should ensure relief from distress, offering experiences of comfort and social interaction. Caregivers shall provide:
   
   a. Hold and comfort the child who is upset;
   
   b. Engage in social interchanges such as smiling, talking, and touching; and
   
   c. Be play partners as well as protectors.
   
   d. Limit exposure to television and videos which shall not exceed five (5) hours per week and shall be: (1) in the presence of staff; (2) educational; and (3) appropriately rated for viewing by children. Age appropriate alternatives shall be available.

2. Space, engaging materials, and indoor and outdoor equipment arranged to support learning and optimize:

   a. Opportunities for the child to act upon the environment; to confront new opportunities; to learn to manage inner feelings; to develop inner resources; and to manage occurrences and demands of the outer world.
   
   b. Opportunities for play that serve to reduce anxiety and to help each child adapt to reality, resolve conflicts, and construct knowledge and systems of symbols.
   
   c. Opportunities for children to observe, explore, make mistakes and find solutions, and move from the concrete to the abstract in learning.
3. Opportunities for children to develop and practice language skills and build vocabulary, thereby setting the foundation for literacy.

4. A cooperative rather than a competitive atmosphere. There shall be encouragement of verbal skills and attentiveness to the needs of individuals and the group as a whole.

5. Developmentally appropriate practices based on an understanding of the developmental characteristics of birth to six (6) years, individual developmental needs, and the cultural contexts in which each child is developing. Caregivers shall support children’s developing independence, social competence, and increasing ability to adapt to their environment and cope with stress.

B. Children shall be supervised at all times.

C. There must be daily indoor and outdoor periods, weather permitting, which provide for:

   1. Alternating active and quiet activities; and
   2. Opportunities for individual, small, and large group activities.

D. A quiet time to encourage a relaxed and friendly atmosphere shall be provided before mealtimes during which quiet conversation is encouraged.

E. Physical care routines appropriate to the developmental needs of the child shall include a supervised nap for children less than five (5) years who remain at the facility for more than four (4) hours. Children who are at the facility for less than four (4) hours shall be granted a rest period if desired.

F. Infants and toddlers should have opportunities to explore their environment and develop their physical and loco motor skills. Children should only be in cribs or playpens when sleeping.

G. The children’s safety shall be ensured on field trips or excursions. Children shall be accounted for before, during, and after field trips or excursions.

H. Adequate adult supervision that is consistent with child/staff ratios defined in Section 901, shall be provided at all times.

906 Transportation

If a facility arranges for or provides transportation to or from the facility, or on field trips or excursions, the following rules shall apply:

A. Any driver shall operate the vehicle consistent with V.I. law and with the rules and regulations prescribed by the Department of Public Safety, including, but not limited to, a current V.I. driver’s license that authorizes the driver to operate the vehicle driven.
B. Children shall be loaded and unloaded at the curbside of the vehicle or in a protected parking area or driveway.

C. A first aid kit shall be in all vehicles transporting children.

D. Children shall not be transported in the open back of a truck regardless of age.

E. Children over the age of ten (10) are permitted to ride in a safari with adult supervision. Children ages 0-10 shall not be transported in a safari.

F. When children are driven in a motor vehicle other than a bus or school bus operated by a common carrier, the following shall apply:

1. A child may be transported only if the child is fastened in an approved safety seat, seat belt, or child safety seat appropriate to the child’s weight and height and the restraint is installed and used in accordance with the manufacturer’s instructions. Each child must have an individual seat belt.

2. A child under the age of 4 shall be transported only if the child is securely fastened in a child passenger restraint system that meets the federal motor vehicle safety standards and the V. I. Code.

G. The drivers, vehicles, and passengers shall be adequately insured at all times.

H. Child/staff ratios established for out-of-home child care shall be maintained during all transportation provided for or arranged by the facility. No child of any age shall be left unattended in a vehicle.

I. Vehicles shall accommodate the placement of wheelchairs, if necessary, with four (4) tie-downs affixed according to manufacturer’s instructions. Wheelchair occupants shall be secured by the wheelchair-restraining belt during transport.

J. Drivers shall not have used alcohol or illegal drugs within twelve (12) hours prior to transporting children. Drivers shall ensure that prescription drugs will not impair their ability to drive. The center director shall require alcohol and drug testing when noncompliance is suspected.

907 Children With Special Needs

Early childhood program in facilities are considered public accommodations and must comply with the Americans with Disabilities Act (ADA) rules effective January 26, 1992.

A. All child care facilities are prohibited from discriminating against any child because of a disability or type of disability.

B. A child’s enrollment may be terminated if the child’s participation poses a significant risk to the health and safety of the other children in care.

C. Program fees cannot discriminate against children with disabilities.
D. When a child with special needs is admitted, the staff is encouraged to consult with the child’s parents, the child’s source of professional health care, or where appropriate, other health and professional consultants. If a child has an IFSP (Individual Family Service Plan) or IEP (Individualized Educational Program) and the family has shared it with staff, staff should use that information to plan to meet the individual needs of the child while he/she is at the facility.

E. Staff of the facility shall seek training in the appropriate plan of care according to the child’s needs, potential for growth and development.

F. Where the nature of the special need, or the number of children with special needs warrants added care, the facility shall add sufficient staff and equipment as necessary to meet the child’s needs and comply with the staff/child ratio.

G. When child care facilities enroll children with special needs, the director shall ensure that staff members have been oriented in understanding children with special needs and in ways of working with children with special needs in group settings.

H. Medical information provided by the child’s health care provider must be available to caregivers so that they can plan appropriately for children with special needs. Protocols for handling medical emergencies must be created, with input from the child’s health care provider and parents, and all staff that interact with children on a regular basis must be trained, so that, in case of emergencies, staff are equipped to respond appropriately. This includes children with seizure disorders, asthma, diabetes, feeding tubes, and other chronic conditions or procedures.

I. Staff shall denote the type and frequency of observed seizures and other emergency treatments in the child’s record. Parents shall be notified of any changes in behavior or treatments given related to the child’s medical condition.

J. If the director or staff has a concern about a child’s development, after consultation with and with prior consent from the parent/guardian, a referral for evaluation shall be made to the appropriate agency, i.e., the Department of Health Infants and Toddlers Program or the Department of Education Early Childhood Special Education Program.

K. Children with disabilities shall be included in all activities with appropriate accommodations, modifications and support.

L. The operator shall permit professionals who provide specialized services to a child with special needs to provide those services on the facility premises as specified in the child’s IEP, IFSP, or written behavioral plan.

908 School Age Children

A. If children of school age are enrolled, the center shall contain a separate area, which includes study space for those children who wish to study.
B. Where adequate space and staff exist, children under seven (7) years of age may be part of preschool group, in accordance with Section 901 staff/child ratio and maximum group size.

909 **Evening and Night Care**

Any child care facility offering care after 7:00 P.M., but not less than 24 hours, shall have approval from the Department and shall provide program modifications for the special needs of children during the night. The following requirements shall apply:

A. Bedtime schedules shall be established for children in consultation with their parents.

B. Sleeping equipment shall be appropriate to the age and size of each child. Each child must have his own crib, bed or cot, clean linens, and cover. A pillow shall be available to children two (2) years and older upon request.

C. Staff members shall be awake at all times, and shall be within listening distance in order to provide for the needs of children and respond to an emergency.

D. A program of quiet and restful activity shall be provided for each child arriving before bedtime.

E. Meals shall be served to children who are in the facility at ordinary meal times and who have not been served an evening meal before arriving or who remain through time for serving breakfast.

F. Sleeping areas shall not be completely darkened at any time.

G. No child shall be allowed to remain sleeping in a wet bed or crib. Sheets shall be changed and cots washed after each wetting.

910 **Part-Time Programs**

A. If a center admits children on an irregular or part-time basis, the same requirements shall be met as apply to children enrolled on a full-time basis.

B. Attendance records shall include children to whom part-time service is provided. The number of children in the center at any one time shall not exceed the maximum capacity specified on the license.

911 **Water Activities**

A. If a child care facility provides opportunities for beach trips or other water activities, children shall be supervised at all times. At least one adult who holds a current CPR certificate shall be present at the site, and additionally staff members who are able to swim (certified swimmers) must be in the water with children at all times. An adult, who knows the pool pump location and how to use same, should be present when children are in the pool. A written procedure and
method for supervising children in the water shall be established and enforced. The child/staff ratio specified in Section 901 shall be maintained.

B. All children participating in swimming or water activities shall be outfitted with an approved flotation device appropriate to the age of the child.

C. Above-ground pools shall have non-climbable sidewalls that are four (4) feet high or shall be enclosed with an approved fence. When the pool is not in use, steps shall be removed from the pool or otherwise protected to ensure that they cannot be accessed.

D. Children shall not be permitted in hot tubs, spas, or saunas.

E. No child shall be left unattended in areas where there is any body of water.

912 Discipline and Guidance

A. Discipline and guidance shall be consistent, shall be based on an understanding of individual needs and development, and shall promote self-discipline and acceptable behavior.

B. No child shall be subject to corporal punishment, verbal abuse, ridicule, or threats. Punishment shall not be associated with food, naps, or toilet training.

C. Children shall not be punished for toilet accidents or bed-wetting.

D. Children shall not be placed in a locked room without adult supervision. When a child is removed from the group for disciplinary reasons, he/she must never be out of sight of a staff member.

E. Children shall not be humiliated or subjected to abusive or profane language. Staff shall not make derogatory remarks about the children or their family members.

F. Infants and toddlers must never be shaken under any circumstances. Caregivers shall avoid picking up infants and toddlers by their hands or feet or in any inappropriate manner.

SECTION 10
(1000)
FOOD SERVICE AND NUTRITION

1000 Meals Provided by the Facility

A. The food preparation area of the kitchen shall be separate from the eating, play, toilet, and bathroom areas and from areas where animals are kept, and shall not be used as a passageway while food is being prepared. Food preparation areas shall be separated from areas used by the children for activities unrelated to food by a door, gate, counter, or room divider.
B. All kitchen equipment shall be cleaned, in good operable condition, and shall be properly maintained.

C. No worker who has signs or symptoms of illness shall be responsible for food handling. Food preparation by workers with open or infected injuries shall not be allowed.

D. Food from dented, rusted, bulging, or leaking cans, and food from cans without labels shall not be used.

E. Raw and un-pasteurized milk and its products shall not be given to children or used in the preparation of meals.

F. Meat, fish, poultry, milk, and egg products shall be refrigerated according to standards.

G. Staff members who are responsible for changing diapers shall prepare or serve food only after thoroughly washing their hands. Caregivers who prepare food shall practice careful hand washing before handling food, including infant bottles of formula or breast milk.

H. Written policies about infant feeding shall be developed with the input and approval of a child’s parent or guardian and shall include the following:

1. Storage and handling of expressed breast milk;
2. Determination of the kind and amount of commercially prepared formula to be prepared for infant consistent with direction on can or bottle;
3. Preparation, storage, and handling of formula;
4. Use and proper disinfecting of feeding chairs and of mechanical food preparation and feeding devices, including blenders, feeding bottles, and food warmers;
5. Whether formula or baby food shall be provided from home, and if so, how such food will be transported, stored, and handled;
6. A prohibition against bottle propping or forced feeding;
7. A prohibition against allowing children to have their bottles at times other than when they are held or while seated for feeding;
8. No more than two (2) children shall be fed by an adult at one time. Eating utensils or food from one plate shall not be shared between children;
9. Handling of food intolerance or allergies;
10. Responding to infants’ need for food in a flexible fashion to approximate demand feedings;
11. Only cleaned and disinfected bottles and nipples shall be used. All filled bottles of breast milk or formula shall be refrigerated until ready to use. Any contents remaining after a feeding shall be discarded. Prepared bottles of formula shall be refrigerated, and shall be discarded after 24 hours if not used. An open container of formula shall be covered, refrigerated, and discarded after forty-eight (48) hours if not used. Unused expressed breast milk shall be discarded after twenty-four (24) hours if refrigerated or after two (2) weeks if frozen. Bottles of breast milk and formula shall be dated. When there is more than one bottle-fed infant, all bottles shall be labeled with the child’s name. All formula and breast milk shall be used only for that intended child.

12. If breast milk or formula is to be warmed, bottles shall be placed in a pan of hot (not boiling) water for five (5) minutes, after which the bottle shall be shaken well and the milk temperature tested before feeding. Bottles of formula or breast milk shall never be warmed in a microwave oven.

13. For infants, all foods should be pureed or mashed softly.

I. All facilities providing meals shall follow the meal pattern and nutrition guidelines according to the Department of Agriculture’s New Food Pyramid.

J. Children who are at the facility for four (4) to six (6) hours shall have at least one (1) meal and one (1) snack that meets one-third of the Recommended Dietary Allowance appropriate to their age.

K. Children who spend eight (8) or more hours at the facility shall have at least two (2), meals and one snack that meet two-thirds of the Recommended Dietary Allowance appropriate for their age.

L. Breakfast shall be served at least two and one half hours before lunch, and snacks shall be served at least one and one half hours before the following meal. Servings should be small in accordance with the recommended meal patterns, and second servings shall be allowed if desired.

M. Nutritious meals and snacks should be prepared that are high in nutrients, low in sugar, salt, and fat.

N. All children just learning to feed themselves shall be supervised by an adult who is seated at the same table or adjacent to the child’s feeding chair.

O. Foods that are round, hard, small, thick and sticky, smooth, or slippery shall not be offered to children less than four (4) years of age. To avoid choking or other injuries, the following food should be avoided. Examples of such foods include, but are not limited to: hot dogs (sliced into rounds), whole grapes, hard candy, nuts, seeds, raw peas, dried fruit, pretzels, chips, peanuts, popcorn, marshmallows, spoonfuls of peanut butter, and large pieces of meat (non bite size).
P. Fruit drinks and beverages made from fruit-flavored powders and high fructose corn syrups shall not be substituted for juices. Foods shall be prepared so that they are easy to chew. Bones shall be removed from fish, chicken, and meat.

Q. For toddlers, foods shall be cut up in small pieces no larger than ¼ inch cubes.

1002 **Meals Provided by Parents**

A. Meals may be provided by the parent(s) upon agreement between the parent(s) and the facility director or staff. However, in the event of such an agreement, for children who are no longer on formulas or special diets, the care provider shall encourage parent(s) to provide nutritious snacks and meals.

B. Parents shall not be permitted to bring uncooked meat (chicken, beef, fish, pork or goat) or eggs to the facility to be served to a child. All foods in the lunch container shall be properly stored prepared items.

C. All lunch containers shall be labeled with the child’s name.

D. The facility must have a means for providing a nutritious meal to a child whose parent(s) fail to send a nutritionally adequate lunch.

1003 **Storage of Foods**

A. Storage areas shall be kept clean and dry. The “First-In, First-Out” rotation method shall be utilized.

B. Food in dry storage shall be protected from insects, rodents, and the elements. No food shall be stored or placed on the ground. All food shall be stored in an appropriate container and shall be tightly covered. Non-food items, especially cleaning supplies, must not be stored in the same space or in the vicinity of food.

C. Refrigerated food must be properly labeled and stored. Refrigerators must be maintained at 40 degrees Fahrenheit and freezers at 0 degrees Fahrenheit.

1004 **Source of Food**

Food must be procured from food sources that maintain a valid Virgin Islands Health Permit and business license.

1005 **Menus**

Menus shall be developed according to the recommendations and guidelines from the U.S. Department of Agriculture New Food Pyramid, and shall be posted in a conspicuous place in the facility.

1006 **Appropriate Mealtime Attitudes**

A. Children shall be encouraged, but not forced to eat. Adults shall set a good example and a positive attitude towards food.
B. Foods shall never be used as a form of punishment or reward.

1007 Drinking Water

A. Safe drinking water must be available at all times.

B. Children shall be encouraged to drink water, especially before and after physical activities.

SECTION 11 AMENDMENTS TO RULES AND REGULATIONS
(1100)
1100 AMENDMENTS TO RULES AND REGULATIONS

SECTION 12 EFFECTIVE DATE OF RULES AND REGULATIONS
(1200)
1200 Revised Rules and Regulations for Child Care Facilities adopted by Commissioner of the Department of Human Services, Christopher E. Finch, this 1st day of April, 2011.

Christopher E. Finch
Commissioner
Department of Human Services
APPENDIX FORM I

Privacy and Security of Protected Health Information, Confidential and Other Sensitive Information

Section ____Privacy and Security of Protected Health Information, Confidential and Other Sensitive Information

Section ____ DHS Office of Child Care and Regulatory Services Policy for Compliance with the Health Insurance Portability Act of 1996 (HIPAA)

According to the requirements of HIPAA, the DHS Office of Child Care and Regulatory Services (OCCRS) and the child care facilities that are licensed by the DHS are neither a covered entity nor a business associate. However, OCCRS and other child care providers must protect the privacy of health information because OCCRS and child care providers conduct business with covered entities and business associates, and therefore come into contact with their protected health information. Child care providers and the OCCRS come into contact with protected health information through the required application documents (physician’s statements, TB skin tests and other health records) for children and their parents. The OCCRS staff will review child health records and immunization records of children in care of the licensed, certified, and registered providers. OCCRS staff also comes in contact with protected health information that is in hard copy case records during investigations of complaints or during monitoring of licensed health care providers.

The Health Insurance Portability and Accountability Act (HIPAA) of 1996 [referenced at 42 United States Code Section 1320d, Public Law 104-191, Title II, Subtitle F] protected health, confidential and sensitive information is information that is either protected by law or is of such personal or private nature that it is normally not treated as public record. With respect to confidential information provided to child care providers about children and their families, the following serves as a guide to HIPAA compliance. Providers are, however, advised to seek the advice of independent legal counsel with respect to their forms, as well as to all operational policies and procedures.

Sample HIPAA forms for use by both the Department of Human Services and child care providers are included in the Appendix to these Rules and Regulations.

Responsibility

An individual’s responsibility extends to all situations where the individual is accessing, using, circulating, maintaining, disclosing and disposing of reports or documents that contain protected, confidential or sensitive information.

Adopted April 1, 2011
Specifically,

1) Individuals shall not release protected health, confidential and sensitive information to themselves or to other persons, entities or employees outside the scope of their duties.

2) Individuals shall not seek access to, or inquire about protected health, confidential or sensitive information in excess of the minimum necessary to efficiently discharge responsibilities within the scope of their duties.

3) Individuals shall familiarize themselves with the laws pertaining to confidential information in order to comply with those restrictions.

4) Individuals shall familiarize themselves with what types of information are considered protected health information, confidential, personal or other sensitive information and do their utmost to protect it. For an example, when documents or reports are circulated that contain such information, the sender will alert the receiver(s) to insure the confidentiality of the data.

5) Individuals shall not include protected health information, confidential, personal or other sensitive information on documents or reports if it is not necessary.

6) Individuals, when sending mail or other correspondence containing protected health information, confidential, personal or other sensitive information to any person, shall indicate “Personal and Confidential” on the envelope to insure that only the addressee opens it.

7) Individuals shall take reasonable and appropriate measures to protect identifying numbers. Of particular concern is the social security number and all individuals shall do their utmost to safeguard it.

8) When no specific guidance is provided regarding responding to requests for information and a written request for information is received, only employees, not volunteers or other parents, of the child care center shall release the information and only after receiving the written authorization of the affected party.

9) When no specific guidance is provided regarding responding to an oral or unwritten request for information - where no written request for information is received - only employees, not volunteers or other parents, of the child care center shall release the information, and only after verifying and documenting the authorization of the affected party.

10) Whenever reasonable and practical, restricted, protected, internal or privileged reports and documents shall be maintained in a secured container.

11) Individuals shall dispose of documents that contain protected health information, confidential, personal or other sensitive information correctly. The documents or reports shall be placed in a “shred” box that is removed from the work site and destroyed prior to disposal or recycling, rather than placing the documents in a regular solid waste or recycling receptacle.
12) Individuals shall not disclose protected health information, confidential, personal or other sensitive information even after their employment with the child care facility ceases. State and Federal law regarding protected health information, confidential, personal or sensitive information also applies OUTSIDE the employment relationship and criminal or civil penalties including fines and imprisonment could apply.

13) Individuals shall be aware that disregard of the privacy and security of protected health information, confidential, personal or other sensitive information shall result in disciplinary action, up to and including dismissal. Additionally, individuals may subject themselves to civil and criminal liability for the disclosure of confidential information to unauthorized persons.

Examples of Safeguards

Examples of safeguards that apply to covered entities are (1) shredding documents prior to disposal, (2) locking doors or cabinets where medical records are kept, and (3) limiting access to the keys or combinations of the locks for these doors and cabinets. Other examples of safeguarding the privacy of health information and all other confidential information is listed below:

(1) Turn computer screens away from public view;

(2) Lock or log off computer monitors when they are not being used;

(3) Never give health information to a third party who is not an authorized representative [an authorized representative is a person who has either: signed a confidentiality agreement, is a member of a law enforcement agency, or a judicial official];

(4) Monitor the duplication and transmission of health records on fax machines, photocopiers, and printers;

(5) Keep records containing health information face down on desks and tables;

(6) When sending a fax containing health information, first call the recipient so the fax will be picked up immediately; and

(7) Speak softly so that others do not overhear health information.
Government of the Virgin Islands of the United States
Department of Human Services
Office of Child Care & Regulatory Services
Application For
Child Care License

Return ALL applications and supporting documentation to the island where your facility is located.

CHECK TYPE OF APPLICATION: □ NEW □ REVISION □ RENEWAL □ SUMMER

FOR OFFICE USE ONLY
LICENSE NUMBER

CHILD CARE CENTER BASED
□ DAY CARE CENTER □ AFTER SCHOOL □ CERTIFICATION □ NIGHT CARE □ SUMMER CAMP

FAMILY BASED
□ FAMILY DAY CARE HOME □ GROUP DAY CARE HOME

RESIDENTIAL CHILD CARE
□ GROUP HOME

PROGRAM NAME: __________________________ PHONE __________________

PHYSICAL LOCATION:
STREET __________________________
CITY/TOWN __________________________ STATE __________________________ ZIP CODE __________________

MAILING ADDRESS:
STREET __________________________
CITY/TOWN __________________________ STATE __________________________ ZIP CODE __________________

NAME OF APPLICANT/OWNER: __________________________

MAILING ADDRESS:
STREET __________________________
CITY/TOWN __________________________ STATE __________________________ ZIP CODE __________________

APPLICANT/OWNER’S PHONE NUMBER: __________________________ E-MAIL ADDRESS: __________________________

SOCIAL SECURITY NUMBER (IF APPLICANT IS AN INDIVIDUAL): __________________________

FEDERAL TAX I.D. NUMBER (IF ONE HAS BEEN ASSIGNED): __________________________

NUMBER & AGE RANGE OF CHILDREN TO BE CARED FOR: (USE ADDITIONAL PAPER IF NECESSARY)

IF YOU WANT A SINGLE LICENSE TO INCLUDE MULTIPLE BUILDINGS (CHILD CARE PROGRAMS ON THE SAME OR CONTIGUOUS PROPERTY) (RESIDENTIAL FACILITIES IN SAME GEOGRAPHICAL REGION), YOU MUST PROVIDE THE FOLLOWING FOR EACH BUILDING:
1. A MEANS BY WHICH WE CAN IDENTIFY THE BUILDING, I.E. BUILDING #1 & 2, FRONT BUILDING, BACK BUILDING OR, IF APPROPRIATE, THE NAME OF THE BUILDING;
2. THE MAXIMUM NUMBER OF CHILDREN AND AGE RANGE THAT WILL BE CARED FOR IN THE BUILDING.

<table>
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<tr>
<th>BUILDING IDENTIFIER</th>
<th>MAXIMUM NUMBER OF CHILDREN</th>
<th>AGE RANGE TO BE CARED FOR IN EACH BUILDING</th>
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MONTHS OF OPERATION: 
DAYS OF OPERATION: 
OPERATING HOURS: From: To: 

FEE SCHEDULE - REGISTRATION - INSURANCE: (USE ADDITIONAL PAPER IF NECESSARY)
INDICATE ANY VARIATIONS IN ESTABLISHED FEE, i.e., FOR MORE THAN ONE (1) CHILD IN SAME FAMILY.

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<tr>
<th>MONTHLY FEE</th>
<th>REGISTRATION FEE</th>
<th>INSURANCE FEE</th>
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RESIDENTIAL CHILD CARE PROGRAMS MUST COMPLETE THIS SECTION; CHILD CARE PROGRAMS MUST COMPLETE THIS SECTION IF THEY ARE INCORPORATED.

NAME OF CORPORATION: (IF INCORPORATED) 

☐ NON PROFIT ☐ FOR PROFIT 

OFFICERS OF CORPORATION: (USE ADDITIONAL PAPER IF NECESSARY)

<table>
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<tr>
<th>NAME</th>
<th>TITLE/POSITION</th>
<th>TELEPHONE NUMBER</th>
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CENTER DIRECTOR – CENTER BASED PROGRAMS 
PROGRAM DIRECTOR – RESIDENTIAL PROGRAMS

INSTRUCTIONS:
☐ CHECK HERE AND SKIP TO THE NEXT SECTION IF THE CENTER DIRECTOR/PROGRAM DIRECTOR IS THE SAME AS ON THE PREVIOUS PAGE.

THE FOLLOWING SECTION REGARDING CENTER DIRECTOR/PROGRAM DIRECTOR MUST BE COMPLETED BY ALL NEW APPLICANTS AND BY APPLICANTS FOR RENEWAL OR REVISION IF THERE HAS BEEN A NEW CENTER DIRECTOR/PROGRAM DIRECTOR SINCE THE LAST APPLICATION WAS FILED. YOU MUST ALSO SUBMIT WITH THIS APPLICATION, DOCUMENT OF EDUCATION AND EXPERIENCE AS REQUIRED BY LICENSING RULES.

NAME OF CENTER DIRECTOR/PROGRAM DIRECTOR: 
DATE OF BIRTH: 

DATE THE ABOVE NAMED INDIVIDUAL BEGAN WORKING AS CENTER DIRECTOR/PROGRAM DIRECTOR: MONTH DAY YEAR 

PLEASE CIRCLE HIGHEST SCHOOL GRADE COMPLETED: 8 9 10 11 12 or GED

POST SECONDARY EDUCATION: TRANSCRIPTS MUST BE SUBMITTED WITH THIS APPLICATION FOR CENTER DIRECTORS/PROGRAM DIRECTORS, UNLESS ALREADY ON FILE AT THE DEPARTMENT OF HUMAN SERVICES.

<table>
<thead>
<tr>
<th>NAME OF SCHOOL</th>
<th>MAJOR</th>
<th>DEGREE OR CERTIFICATE ACHIEVED OR NUMBER OF CREDITS EARNED</th>
<th>DATES ATTENDED</th>
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RELATED EXPERIENCE

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<th>EMPLOYER</th>
<th>JOB TITLE</th>
<th>DESCRIPTION OF RESPONSIBILITIES, INCLUDING AGES OF CHILDREN CARED FOR</th>
<th>DATE OF EMPLOYMENT</th>
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Department of Human Services
Application for Child Care License 
Page 2 of 5

Adopted April 1, 2011
**Family Child Care Provider**

**Date of Birth:**

**If under 21 years of age, you must complete the education section below and submit with the application, documentation of additional education as required by the Department of Human Services (DHS) Child Care Program Licensing Rules and Regulations.**

<table>
<thead>
<tr>
<th>Name of School</th>
<th>Name of Course(s)</th>
<th>Degree or Certificate Achieved or Number of Credits Earned</th>
<th>Dates Attended</th>
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**All Applicants Must Complete This Section**

**Child Care Programs Located in a Home** must list all household members, regardless of age or amount of contact with enrolled children.

**Residential Child Care Programs** must list all household members who reside in the program, except for children enrolled in the program, regardless of age or amount of contact with enrolled children.

**Other Individuals, Age 17 and Older, All Child Care Programs and Residential Child Care Programs** must list any individuals who will have daily contact with children enrolled in the program, other than child care personnel.

<table>
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<tr>
<th>Name</th>
<th>Sex</th>
<th>Relationship</th>
<th>Date of Birth</th>
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**Criminal Convictions or Current Criminal Charges**

**Child Abuse or Neglect Findings or Current Investigation**

**Instructions:** All participants must complete this section, by checking Yes or No and, if Yes, providing the requested information.

To the best of your knowledge, after questioning all parties, are there any current criminal charges, or history of criminal convictions, or current investigation or previous findings of child abuse or neglect, or any current investigations or previous adjudications or juvenile delinquency, involving any applicant, owner, provider, household member, child/care personnel, board member or any other individual who will have daily contact with children?

- [ ] No (If no, move to the next section.)

- [ ] Yes (If yes, complete the following sections, providing as much detail as possible. Use additional paper if necessary)

<table>
<thead>
<tr>
<th>Name and Position or Affiliation of Individual</th>
<th>Indicate Whether This is a Charge, Allegation, Conviction, Finding, or Current Investigation</th>
<th>Name &amp; City of Court or Office in Which Case Was Handled</th>
<th>Date of Conviction or Finding</th>
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Department of Human Services
Application for Child Care License
Page 3 of 5

Adopted April 1, 2011
**REFERENCES: NEW APPLICANTS ONLY (USE ADDITIONAL PAPER IF NECESSARY)**

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**PLEASE CAREFULLY READ EACH STATEMENT BEFORE SIGNING. ANY APPLICATION WHICH IS NOT COMPLETED AND SIGNED AS REQUIRED, OR WHICH IS MISSING ANY OF THE ATTACHMENTS REQUIRED BY THE (DHS) CHILD CARE PROGRAM LICENSING RULES AND REGULATIONS, WILL NOT BE ACCEPTED AS A COMPLETE APPLICATION AND WILL BE RETURNED TO THE APPLICANT FOR COMPLETION.**

**APPLICANTS FOR LICENSE RENEWAL MUST, IN ADDITION TO THE SIGNATURE BELOW, COMPLETE AND SIGN THE FOLLOWING:**

I CERTIFY THAT I HAVE READ THE RULES APPLICABLE TO THE PROGRAMS FOR WHICH I AM SEEKING A LICENSE (DHS’ CHILD CARE PROGRAMS AND RESIDENTIAL CHILD CARE PROGRAMS), AND THAT THE CHILD CARE PROGRAM/RESIDENTIAL CHILD CARE PROGRAM NAMED ON THIS APPLICATION IS IN COMPLIANCE WITH ALL CRITICAL RULES.

**SIGNATURE OF APPLICANT/LICENSEE**  
**DATE SIGNED**

**BY SIGNING BELOW, I HEREBY CERTIFY THAT:**

I UNDERSTAND THAT THE DEPARTMENT OF HUMAN SERVICES MAY INVESTIGATE ANY CRIMINAL CONVICTON RECORDS, FINDING OF CHILD ABUSE OR NEGLECT, OR INVESTIGATION OF OR FINAL DETERMINATION REGARDING ANY JUVENILE DELINQUENCY AND WILL MAKE A DETERMINATION REGARDING WHETHER THE INDIVIDUAL POSES A CURRENT RISK TO THE HEALTH, SAFETY OR WELL BEING OF CHILDREN;

I UNDERSTAND THAT THE DEPARTMENT OF HUMAN SERVICES MAY DELAY ITS DECISION TO APPROVE OR DENY THIS APPLICATION PENDING THE OUTCOME OF ANY INVESTIGATION, WHEN THE APPLICANT, OWNER, FAMILY CHILD CARE PROVIDER, CENTER DIRECTOR, OR PROGRAM DIRECTOR ARE NAMED AS THE PERPETRATOR IN ANY CURRENT INVESTIGATION OF ANY CRIME, OR IN AN ALLEGATION OF ABUSE OR NEGLECT;

I UNDERSTAND THAT PROVIDING FALSE INFORMATION ON THIS APPLICATION OR ANY OF THE ATTACHMENTS, OR FAILING TO DISCLOSE ANY INFORMATION REQUIRED ON THE APPLICATION, OR REQUIRED TO BE SUBMITTED WITH THIS APPLICATION, SHALL BE CONSIDERED GROUNDS FOR LICENSE DENIAL OR REVOCATION;

I HAVE RECEIVED, AND READ THE DEPARTMENT OF HUMAN SERVICES CHILD CARE PROGRAM LICENSING RULES AND REGULATIONS, AND UNDERSTAND THAT FAILURE TO MAINTAIN MY PROGRAM IN COMPLIANCE WITH THE APPLICABLE RULES, MAY JEOPARDIZE MY LICENSE/CERTIFICATION AND/OR RESULT IN FINES BEING ASSESSED BY THE DEPARTMENT OF HUMAN SERVICES;

I AUTHORIZE ANY POLICE DEPARTMENT, COURT SYSTEM OR HUMAN SERVICE AGENCY IN THIS OR ANY OTHER JURISDICTION TO RELEASE COPIES OF ANY CRIMINAL RECORDS OR CHILD ABUSE OR NEGLECT RECORDS TO THE DEPARTMENT OF HUMAN SERVICES; AND,

ALL INFORMATION PROVIDED AS PART OF THIS APPLICATION AND IN THE REQUIRED ATTACHMENTS IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

**SIGNATURE OF APPLICANT**  
**DATE SIGNED**

**SIGNATURE OF CENTER DIRECTOR/PROGRAM DIRECTOR**  
**DATE SIGNED**

Department of Human Services  
Application for Child Care License  
Page 4 of 5
INDOOR & OUTDOOR CHILD CARE SPACE

INSTRUCTIONS: COMPLETE THIS SECTION IF YOU ARE A NEW APPLICANT OR YOU ARE AN APPLICANT FOR RENEWAL OR REVISION AND THERE HAVE BEEN CHANGES TO CHILD CARE SPACE. YOU MUST COMPLETE A SEPARATE PLAN FOR EACH BUILDING WHEN THERE ARE MULTIPLE BUILDINGS. (YOU MAY COPY THIS PAGE, OR ATTACH SEPARATE SHEETS FOR EACH BUILDING.)

THE PLAN MUST IDENTIFY: (ATTACH FLOOR PLAN)
A. FOR INDOOR SPACE: FOR EACH BUILDING THAT WILL BE USED AS CHILD CARE SPACE, THE FLOOR PLAN SHALL INCLUDE:
   1. ROOM DIMENSIONS;
   2. LOCATION OF EXITS;
   3. HOW EACH ROOM WILL BE USED;
   4. THE LOCATION OF BATHROOMS AND BATHROOM FIXTURES (TOILETS & SINKS); AND,
   5. THE LOCATION OF OTHER HAND WASHING SINKS.
B. FOR OUTDOOR PLAY SPACE:
   1. THE OVERALL DIMENSIONS OF OUTDOOR PLAY SPACE;
   2. THE LOCATION OF EXITS, GATES, AND STATIONARY PLAY EQUIPMENT;
   3. THE LOCATION OF THE OUTDOOR PLAY SPACE IN RELATION TO THE INDOOR SPACE; AND,
   4. THE PRESENCE OF, AND LOCATION OF ANY POOLS, FONDS, STREAMS, RIVERS, OCEANS, STREETS, ROADS OR OTHER HAZARDS THAT ARE IN CLOSE PROXIMITY.

☐ APPLICANTS FOR RENEWAL OR REVISION MUST CHECK HERE IF THERE HAVE BEEN NO CHANGES TO CHILD CARE SPACE.

DIRECTIONS TO FACILITY
### UNIVERSAL CHILD HEALTH RECORD

Endorsed by the Virgin Islands Department of Human Services

#### SECTION I - TO BE COMPLETED BY PARENT(S)/ GUARDIAN

<table>
<thead>
<tr>
<th>Child's Name (Last)</th>
<th>(First)</th>
<th>Gender</th>
<th>Date of Birth</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>0 Male</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>0 Female</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Does the child have health insurance</th>
<th>If yes, Name of Child's Health Insurance Carrier</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 Yes</td>
<td></td>
</tr>
<tr>
<td>0 No</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Parent/ Guardian Name</th>
<th>Home Telephone Number</th>
<th>Work Telephone or Cell Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Parent/ Guardian Name</th>
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</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

_I give consent for my child’s Health Care Provider and Child Care Provider/School Nurse to discuss information on this form._

**Signature/Date**

This form may be released to the Y.I. Department of Human Services

0 Yes 
0 No

#### SECTION II - TO BE COMPLETED BY HEALTH CARE PROVIDER

<table>
<thead>
<tr>
<th>Date of Physical Examination</th>
<th>Results of physical examination normal?</th>
</tr>
</thead>
</table>
|                              | 0 Yes 
|                              | 0 No                                     |

Abnormalities Noted:

<table>
<thead>
<tr>
<th>IMMUNIZATIONS</th>
<th>0 All recommended immunizations are up to date</th>
<th>0 A catch-up schedule for immunizations has been initiated</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 Immunization Record Attached</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**MEDICAL CONDITIONS**

<table>
<thead>
<tr>
<th>Chronic Medical Conditions/ Related Surgeries</th>
<th>0 None</th>
<th>0 Special Care Plan Attached</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>List medical conditions and ongoing surgical concerns</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Medications/Treatments</th>
<th>0 None</th>
<th>0 Special Care Plan Attached</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>List medications/treatments</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Limitations to Physical Activity</th>
<th>0 None</th>
<th>0 Special Care Plan Attached</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>List limitations/ special considerations</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Special Equipment Needs</th>
<th>0 None</th>
<th>0 Special Care Plan Attached</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>List items needed for daily activities</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Allergies/ Sensitivities</th>
<th>0 None</th>
<th>0 Special Care Plan Attached</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>List allergies</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Special Diet</th>
<th>0 None</th>
<th>0 Special Care Plan Attached</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>List dietary specifications</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Behavioral Issues/ Mental Health Concerns</th>
<th>0 None</th>
<th>0 Special Care Plan Attached</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>List behavioral/mental health issues</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Emergency Plans</th>
<th>0 None</th>
<th>0 Special Care Plan Attached</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>List emergency plan that might be needed and the signs/symptoms to watch for:</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

0 I have examined the child listed above and reviewed his/her health history. It is my opinion that he/she is medically cleared to participate fully in all child care/school activities, including physical education and competitive contact sports, unless noted above.

Name of Health Care Provider

Address of Health Care Provider

Signature/Date

Phone Number of Health Care Provider

Distribution: Original - Child Care Provider
Yellow Copy - Parent/Guardian
Pink Copy - Health Care Provider

Adopted April 1, 2011
Instructions for Completing the Universal Child Health Record

Section 1 - Parent

Please have the parent/guardian complete the top section and sign the consent for the child care provider/school nurse to discuss any information on this form with the health care provider.

Section 2 – Health Care Provider

1. Please enter the date of the physical exam that is being used to complete the form. Note significant abnormalities especially if the child needs treatment for that abnormality (e.g., creams for eczema; asthma medications for wheezing, etc.).
   a. Weight - Please note pounds vs. kilograms.
   b. Blood Pressure - Only enter if the child is 3 years or older.

2. Immunization - A copy of an immunization record must be attached.

3. Medical Conditions - Please list any ongoing medical conditions that might impact the child’s health and well being in the child care or school setting.
   a. Note any significant medical conditions or major surgical history. If the child has a complex medical condition, a special care plan should be completed and attached for any of the medical issue blocks that follow.
   b. Medications - List any ongoing medications. Include any medications given at home if they might impact the child’s health while in child care (seizure, cardiac or asthma medications, etc.).
   c. Limitations to normal activity - Please be as specific as possible and include dates of limitation as appropriate. Any limitation to field trips should be noted. Note any special considerations such as avoiding sun exposure or exposure to allergens. Potential severe reaction to insect stings should be noted. Special considerations such as back-only sleeping for infants should be noted.
   d. Special Equipment - Enter if the child wears glasses, orthodontic devices, orthotics, or other special equipment. Children with complex equipment needs should have a care plan.
   e. Allergies/Sensitivities – Children with life-threatening allergies should have a special care plan. Severe allergic reactions to animals or food (wheezing, etc.) should be noted.
   f. Special Diets - Any special diet and/or supplements that are medically indicated should be included. Exclusive breastfeeding should be noted.
   g. Behavioral/Mental Health Issues – Please note any significant behavioral problems or mental health diagnoses such as autism, breath holding, or ADHD.
   h. Emergency Plans – May require a special care plan if interventions are complex. Be specific about signs and symptoms to watch for. Use simple language and avoid the use of complex medical terms.

4. Physical Activity – This form may be used for clearance for sports or physical education. As such, please check the box above the signature line and make any appropriate notations in the Limitation to Physical Activities block.

5. Please sign and date the form with the date the form was completed (note the date of the exam, if different).
   a. Print the health care provider’s name.
   b. Indicate health care site’s name, address, and phone number.

Adopted April 1, 2011
<table>
<thead>
<tr>
<th>Division 3</th>
<th>Business Organization of Facilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>s381-301</td>
<td>Written purpose and scope of service submitted to Department</td>
</tr>
<tr>
<td>s381-302</td>
<td>Copies of Articles of Incorporation, By Laws &amp; Amendments Submitted.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Division 4</th>
<th>General Administration</th>
</tr>
</thead>
<tbody>
<tr>
<td>s381-401</td>
<td>Persons responsible for compliance named.</td>
</tr>
<tr>
<td>s381-402</td>
<td>License is displayed.</td>
</tr>
<tr>
<td>s381-403</td>
<td>Rules &amp; Regulations are available.</td>
</tr>
<tr>
<td>s381-404</td>
<td>Department notified of serious occurrence.</td>
</tr>
<tr>
<td>s381-405</td>
<td>Department notified of change in operation.</td>
</tr>
<tr>
<td>s381-406</td>
<td>Suspected Child Abuse /Neglect reported in accordance with the law.</td>
</tr>
<tr>
<td>s381-407</td>
<td>No discrimination against child, employees, or other persons.</td>
</tr>
<tr>
<td>s381-408</td>
<td>Working telephones with listed number available.</td>
</tr>
<tr>
<td>s381-409</td>
<td>Complete record maintained on each child. Record includes:</td>
</tr>
<tr>
<td>s381-409(a)</td>
<td>Complete enrollment information.</td>
</tr>
<tr>
<td>s381-409(c)</td>
<td>Persons authorized to take child from facility.</td>
</tr>
<tr>
<td>s381-409(d)</td>
<td>Written permission for emergency medical attention.</td>
</tr>
<tr>
<td>s381-409(e)</td>
<td>Permission for field trips.</td>
</tr>
<tr>
<td>s381-410</td>
<td>Daily attendance records maintained.</td>
</tr>
<tr>
<td>s381-411</td>
<td>Complete record maintained for each staff, substitute and volunteer.</td>
</tr>
<tr>
<td>s381-412</td>
<td>Written staffing pattern maintained.</td>
</tr>
<tr>
<td>s381-413</td>
<td>All records available to parents.</td>
</tr>
<tr>
<td>s381-414</td>
<td>Policy statements available to parents.</td>
</tr>
<tr>
<td>s381-415(a)</td>
<td>Maximum capacity not exceeded.</td>
</tr>
<tr>
<td>s381-415(b)</td>
<td>No child under 24 months present.</td>
</tr>
</tbody>
</table>
### Division 5

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>s381 - 501 (a)</td>
<td>All staff have character reference and demonstrate competency in working with children.</td>
</tr>
<tr>
<td>s381 - 501 (b)</td>
<td>Criminal record check on file for each staff.</td>
</tr>
<tr>
<td>s381 - 502 (a) 1</td>
<td>Operator is between 21 years and 70 years.</td>
</tr>
<tr>
<td>s381 - 502 (a) 2</td>
<td>Operator has high school diploma or equivalent.</td>
</tr>
<tr>
<td>s381 - 502 (a) 3</td>
<td>Operator has had training or experience in early childhood education.</td>
</tr>
<tr>
<td>s381 - 502 (a) 4</td>
<td>3 references on file for operator.</td>
</tr>
<tr>
<td>s381 - 503 (a)</td>
<td>Written plan for staff orientation on file.</td>
</tr>
<tr>
<td>s381 - 503 (a)</td>
<td>Staff members are between 18 and 70 years.</td>
</tr>
<tr>
<td>s381 - 504 (a)</td>
<td>Staff members over 60 years have current medical on file.</td>
</tr>
<tr>
<td>s381 - 504 (b)</td>
<td>All staff members have current food handlers card.</td>
</tr>
<tr>
<td>s381 - 505</td>
<td>Staff relate to children with courtesy.</td>
</tr>
<tr>
<td>s381 - 506</td>
<td>Child / staff ratio inclusive of persons between 18 - 70 years only.</td>
</tr>
<tr>
<td>s381 - 507</td>
<td>Written description of 2 training programs or workshops for staff is on file.</td>
</tr>
<tr>
<td>s381 - 508</td>
<td>Substitute’s name, telephone and current food handlers card on file.</td>
</tr>
</tbody>
</table>

### Division 6

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>s381 - 601</td>
<td>Current and complete medical record on file for each child. Record includes:</td>
</tr>
<tr>
<td>s381 - 601 (2) and (3)</td>
<td>Complete immunization and lab work.</td>
</tr>
<tr>
<td>s381 - 601 (4)</td>
<td>Instruction for care of chronic or handicapped condition.</td>
</tr>
<tr>
<td>s381 - 601 (5)</td>
<td>Recommendation that child may participate in group care.</td>
</tr>
<tr>
<td>s381 - 601 (6)</td>
<td>Signature of licensed physician.</td>
</tr>
<tr>
<td>s381 - 602</td>
<td>Medication properly stored and administered.</td>
</tr>
<tr>
<td>s381 - 603 (a)</td>
<td>Sick children not admitted.</td>
</tr>
<tr>
<td>s381 - 603 (b)</td>
<td>Sick children isolated and properly cared for.</td>
</tr>
<tr>
<td>s381 - 603 (c)</td>
<td>First aid manual and necessary supplies accessible.</td>
</tr>
<tr>
<td>s381 - 604</td>
<td>Emergency telephone numbers posted.</td>
</tr>
<tr>
<td>s381 - 605 (a)</td>
<td>Vet’s statement on animals on file.</td>
</tr>
<tr>
<td>s381 - 605 (b)</td>
<td>Center and yard free of stray animals.</td>
</tr>
<tr>
<td>s381 - 606</td>
<td>Smoking prohibited.</td>
</tr>
<tr>
<td>s381 - 607</td>
<td>No endangering persons present.</td>
</tr>
</tbody>
</table>

### Division 7

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>s381 - 701 (b)</td>
<td>Approved fire inspection report on file.</td>
</tr>
<tr>
<td>s381 - 701 (c)</td>
<td>Adequate, working fire extinguishers.</td>
</tr>
<tr>
<td>s381 - 701 (d)</td>
<td>Evacuation plan posted, fire drills held.</td>
</tr>
<tr>
<td>Code</td>
<td>Description</td>
</tr>
<tr>
<td>------</td>
<td>-------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>s381 - 701 (e) (1)</td>
<td>Only ground floor level occupied by children.</td>
</tr>
<tr>
<td>s381 - 701 (e) (2)</td>
<td>Minimum of 2 exits.</td>
</tr>
<tr>
<td>s381 - 701 (e) (3)</td>
<td>Doors open outwardly.</td>
</tr>
<tr>
<td>s381 - 701 (h)</td>
<td>Doors and pathways clear of obstruction.</td>
</tr>
<tr>
<td>s381 - 702 (a)</td>
<td>Approved sanitation inspection report on file.</td>
</tr>
<tr>
<td>s381 - 702 (b)</td>
<td>Light and ventilation adequate.</td>
</tr>
<tr>
<td>s381 - 702 (c)</td>
<td>Safe drinking water available.</td>
</tr>
<tr>
<td>s381 - 702 (e)</td>
<td>Adequate, clear water for washing hands and flushing.</td>
</tr>
<tr>
<td>s381 - 702 (f), (h)</td>
<td>Hot water available.</td>
</tr>
<tr>
<td>s381 - 702 (g)</td>
<td>Dishes clean and sanitary and properly stored.</td>
</tr>
<tr>
<td>s381 - 702 (i)</td>
<td>Disposable utensils discarded after use.</td>
</tr>
<tr>
<td>s381 - 702 (j)</td>
<td>Children and staff wash hands after toileting.</td>
</tr>
<tr>
<td>s381 - 702 (j)</td>
<td>Garbage properly covered and stored.</td>
</tr>
<tr>
<td>s381 - 702 (k)</td>
<td>Outside openings screened.</td>
</tr>
<tr>
<td>s381 - 702 (l)</td>
<td>Premises free of rodents, vermin, etc.</td>
</tr>
<tr>
<td>s381 - 702 (m)</td>
<td>Furniture, equipment and supplies clear and in good repair.</td>
</tr>
<tr>
<td>s381 - 702 (n)</td>
<td>Hazardous supplies stored in locked area.</td>
</tr>
<tr>
<td>s381 - 702 (o)</td>
<td>Floors clear and in good repair.</td>
</tr>
<tr>
<td>s381 - 702 (p)</td>
<td>Persons with contagious diseases not involved in food preparation.</td>
</tr>
<tr>
<td>s381 - 702 (q)</td>
<td>Each child has own personal hygiene effects.</td>
</tr>
<tr>
<td>s381 - 703 (a)</td>
<td>Approved Public Works inspection report on file.</td>
</tr>
<tr>
<td>s381 - 703 (b)</td>
<td>Department notified of plans to remodel or change existing building.</td>
</tr>
<tr>
<td>s381 - 704 (a) (1)</td>
<td>Electrical outlets covered.</td>
</tr>
<tr>
<td>s381 - 704 (a) (2)</td>
<td>Fans and air conditioners out of children's reach.</td>
</tr>
<tr>
<td>s381 - 704 (a) (3)</td>
<td>Stairs and porches have railings and are free of splinters.</td>
</tr>
<tr>
<td>s381 - 704 (a) (5)</td>
<td>Play area enclosed and free of sharp objects and dangerous areas.</td>
</tr>
<tr>
<td>s381 - 704 (b) (1)</td>
<td>Play equipment safe.</td>
</tr>
<tr>
<td>s381 - 704 (b) (2)</td>
<td>No explosive toys permitted.</td>
</tr>
<tr>
<td>s381 - 704 (b) (3)</td>
<td>Toxic substances not accessible chlorine products not combined with ammonia.</td>
</tr>
<tr>
<td>s381 - 704 (d)</td>
<td>Glass doors marked at children's eye level.</td>
</tr>
<tr>
<td>Division 8</td>
<td>Staffing, Programs - Facilities</td>
</tr>
<tr>
<td>-----------</td>
<td>---------------------------------</td>
</tr>
<tr>
<td>s381 - 801 (a)</td>
<td>Staff / Child ratio met</td>
</tr>
<tr>
<td>s381 - 801 (b)</td>
<td>All children present included in determining staff / child ratio</td>
</tr>
<tr>
<td>s381 - 801 (c)</td>
<td>Volunteers excluded in determining staff / child ratio</td>
</tr>
<tr>
<td>s381 - 802 (a)</td>
<td>Minimum of 25 sq' of indoor space.</td>
</tr>
<tr>
<td>s381 - 802 (b)</td>
<td>Outdoor play space sufficient, enclosed, and properly supervised.</td>
</tr>
<tr>
<td>s381 - 802 (c)</td>
<td>Public playground within safe walking distance if used.</td>
</tr>
<tr>
<td>s381 - 803 (a)</td>
<td>1 toilet and lavatory per 15 children.</td>
</tr>
<tr>
<td>s381 - 803 (b)</td>
<td>Children can use toilets independently</td>
</tr>
<tr>
<td>s381 - 803 (c)</td>
<td>Potty chairs are emptied after each use.</td>
</tr>
<tr>
<td>s381 - 804 (a)</td>
<td>Each child has individual, covered, cot, pad, or bed.</td>
</tr>
<tr>
<td>s381 - 804 (b)</td>
<td>Each child has space for personal belongings.</td>
</tr>
<tr>
<td>s381 - 804 (c)</td>
<td>Furnishings are child size.</td>
</tr>
<tr>
<td>s381 - 805</td>
<td>Equipment / materials are safe, sufficient, and appropriate to developmental needs.</td>
</tr>
<tr>
<td>s381 - 806 (b)</td>
<td>Written plan of daily activities.</td>
</tr>
<tr>
<td>s381 - 806 (a), (c)</td>
<td>Program meets children’s needs. Indoor and outdoor play and variety of types of activities provided.</td>
</tr>
<tr>
<td>s381 - 806 (d)</td>
<td>Supervised nap period scheduled.</td>
</tr>
<tr>
<td>s381 - 806 (e)</td>
<td>Safety ensured on field trips.</td>
</tr>
<tr>
<td>s381 - 807</td>
<td>Tranported children protected.</td>
</tr>
<tr>
<td>s381 - 807 (a)</td>
<td>Driver has valid license</td>
</tr>
<tr>
<td>s381 - 807 (d)</td>
<td>First aid kit in vehicle</td>
</tr>
<tr>
<td>s381 - 807 (f)</td>
<td>Vehicle adequately insured.</td>
</tr>
<tr>
<td>s381 - 808</td>
<td>Recommendations followed for children with special needs.</td>
</tr>
<tr>
<td>s381 - 809</td>
<td>School - age children have study space</td>
</tr>
<tr>
<td>s381 - 809</td>
<td>School - age children may nap</td>
</tr>
<tr>
<td>s381 - 810</td>
<td>Evening care approved by Dept.</td>
</tr>
<tr>
<td>s381 - 810 (a)</td>
<td>Established bedtime adhered to</td>
</tr>
<tr>
<td>s381 - 810 (b)</td>
<td>Furnishings and equipment appropriate</td>
</tr>
<tr>
<td>s381 - 810 (c)</td>
<td>Staff members awake.</td>
</tr>
<tr>
<td>s381 - 810 (d)</td>
<td>Guest and restful activities provided</td>
</tr>
<tr>
<td>s381 - 810 (e)</td>
<td>Meals and bedtime snack if needed.</td>
</tr>
<tr>
<td>s381 - 810 (f)</td>
<td>Bedroom area not completely darkened.</td>
</tr>
<tr>
<td>s381 - 810 (g)</td>
<td>Wet bed sheets changed</td>
</tr>
<tr>
<td>s381 - 811 (a)</td>
<td>Drop in children have enrollment and medical records.</td>
</tr>
<tr>
<td>s381 - 811 (b)</td>
<td>Drop in children are counted in enrollment.</td>
</tr>
<tr>
<td>s381 - 812 (a)</td>
<td>Water activities supervised.</td>
</tr>
<tr>
<td>s381 - 813</td>
<td>1 adult holds life saving certificate</td>
</tr>
<tr>
<td>s381 - 813</td>
<td>Additional staff members can swim</td>
</tr>
<tr>
<td>s381 - 813</td>
<td>Positive discipline used</td>
</tr>
<tr>
<td>s381 - 813</td>
<td>No corporal punishment, ridicule, threats, or humiliating</td>
</tr>
<tr>
<td>s381 - 813</td>
<td>Children not punished for toilet accidents</td>
</tr>
<tr>
<td>s381 - 813</td>
<td>No children placed in locked room.</td>
</tr>
<tr>
<td>Division 9</td>
<td>Food Service and Nutrition</td>
</tr>
<tr>
<td>-----------</td>
<td>-----------------------------</td>
</tr>
<tr>
<td>a381 - 901</td>
<td>• Meals are nutritious and supply not less than 1/3 of daily food needs.</td>
</tr>
<tr>
<td>a381 - 902</td>
<td>• Nutrition information provided to parents who send lunch.</td>
</tr>
<tr>
<td>a381 - 903</td>
<td>• Lunch available to children who forget meals.</td>
</tr>
<tr>
<td>a381 - 904</td>
<td>All food properly labeled and stored.</td>
</tr>
<tr>
<td>a381 - 905</td>
<td>All food properly procured and prepared.</td>
</tr>
<tr>
<td>a381 - 906</td>
<td>Approved menus posted.</td>
</tr>
<tr>
<td>a381 - 907</td>
<td>Children not forced to eat.</td>
</tr>
<tr>
<td></td>
<td>Drinking water always available</td>
</tr>
</tbody>
</table>
**EMPLOYEE RECORD**

**NAME OF FACILITY:** __________________________

**NAME:** __________________________

**ADDRESS:** __________________________ **TELEPHONE No.:** __________________________

**SOCIAL SECURITY No.** __________________________ **DATE OF BIRTH:** __________________________ **MARTIAL STATUS:** __________________________

**NUMBER OF CHILDREN:** __________________________ **AGES:** __________________________

**CITIZENSHIP:** __________________________ **VISA # (if applicable)** __________________________

**LAST SCHOOL ATTENDED:** __________________________

**GRADE COMPLETED OR DEGREE EARNED:** __________________________

### WORK EXPERIENCE

<table>
<thead>
<tr>
<th>TITLE OR JOB</th>
<th>EMPLOYER</th>
<th>LOCATION</th>
<th>TO</th>
<th>FROM</th>
<th>IMMEDIATE SUPERVISOR</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

### REFERENCES

<table>
<thead>
<tr>
<th>NAME</th>
<th>TITLE OR POSITION</th>
<th>ADDRESS</th>
<th>TELEPHONE No.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

### TO BE COMPLETED BY EMPLOYER

**DATE HIRED:** __________________________ **POSITION:** __________________________

**FULL TIME:** ________ **PART TIME:** ________ **DATE TERMINATED:** __________________________

**REASON:** __________________________
Medical Examination Form

Date: ______________________

PATIENT'S NAME: ____________________________

ADDRESS: __________________________________

PHONE NO. ___________________________ CELL ___________________________

DATE OF BIRTH ___________________________ SOCIAL SECURITY NUMBER: ___________________________

APPLICANT'S PHOTO IDENTIFICATION VERIFIED BY:

Driver's License [No., State & Expiration] ___________________________

Passport [No., Country Issued & Expiration] ___________________________

Government Issued I.D. ___________________________

Other: ___________________________

1. Height: _____ Weight: _____ Blood Pressure: _____ Pulse: _____

2. Check all abnormalities or history of such in the following areas:

☐ Eyes ☐ Gonads ☐ Abdominal Organs
☐ Nose & Throat ☐ Chest/Breasts ☐ Genitourinary Tract
☐ Heart ☐ Nervous System ☐ Extremities
☐ Lungs ☐ Skin ☐ Hypertension

Comment on the above findings: ___________________________

3. Does the patient have any physical limitations? ☐ Yes ☐ No (If yes, please specify): ___________________________

4. Dietary restrictions or requirements? ☐ Yes ☐ No (If yes, please specify): ___________________________

(Turn Over)
5. Blood Serology: □ Negative □ Positive

6. Does urinalysis indicate any problems? □ Yes □ No (If yes, please specify):

________________________________________________________________________

________________________________________________________________________

7. Is there evidence of excessive use of drug? □ Yes □ No

8. Is there evidence of excessive use of alcohol? □ Yes □ No

9. Do results of skin test for TB indicate that a Chest X-Ray should be made? □ Yes □ No

10. Is patient free of parasites? □ Yes □ No

11. How long have you known this patient?

________________________________________________________________________

12. Do you consider this person physically and emotionally fit work with young children? □ Yes □ No
(If no, please specify):

________________________________________________________________________

________________________________________________________________________

DATE: ____________________________

PHYSICIAN'S NAME (Print)

________________________________________________________________________

PHYSICIAN'S NAME (Signature)
CONSENT FOR THE RELEASE OF INFORMATION

Name: ____________________________________________

Name of Facility and License Number: _________________________________________

Please return requested information to ____________________________________________

(Department of Human Services Worker)

IN ORDER FOR THE OFFICE OF CHILD CARE & REGULATORY SERVICES, DEPARTMENT OF HUMAN SERVICES, TO OBTAIN FROM OR RELEASE TO OTHER PARTIES ANY INFORMATION ABOUT YOU, FEDERAL AND STATE LAW REQUIRES YOUR SPECIFIC AUTHORIZATION. PLEASE COMPLETE AND INITIAL ALL APPLICABLE SECTIONS BELOW.

I, ____________________________________________, authorize you to release to the Office of Child Care & Regulatory Services, Department of Human Services to release personal and confidential information about me (as specified below) to assist in the receipt of Social Services that I have requested. I understand I may revoke this authorization at any time before the information has been released. I further understand that this authorization will expire upon receipt of written revocation.

(Initial) (Please check appropriate boxes)

☐ Medical Records
☐ Geriatric Exam and Assessment records
☐ Mental health records (psychological or psychiatric)
☐ Financial records (disclosure of my income and/or assets, bank records, etc.)
☐ Disclosure of my receipt of benefits (Social Security, Veteran’s, or Other)
☐ Medicare Provider
☐ Medicaid Provider of Home Health Care
☐ Social Security Administration
☐ Mental Health Provider
☐ Geriatric Assessment Team (I understand that I am being referred for a Geriatric medical exam assessment.)

- Turn over -
The undersigned further consent to the **Office of Child Care & Regulatory Services, Department of Human Services** disclosing to another government agency or agencies, both federal and local or private entity, information I have given or may give concerning myself and my family, when such disclosure is necessary and pertinent to the determination of confirmation of the eligibility of myself and/or members of my family to receive benefits or service from the **Office of Child Care & Regulatory Services, Department of Human Services**.

I further waive all privileges of confidential communication I may have with regard to the foregoing and expressly permit any doctor, financial institution, employer, Social Security Administration, Veteran's Administration and educational institution to answer questions regarding any services received by me.

I understand that this authorization shall be valid through _______________, but that I may revoke it in writing at any time; any such revocation shall have no effect on disclosures made previously.

This release will include records up to the date of signature unless notified differently here. _______________

I understand that I have the right to inspect and copy the information to be released.

I understand that if I refuse to consent to disclosure of information, the **Office of Child Care & Regulatory Services, Department of Human Services** may be unable to serve me and/or may be unable to provide the most appropriate care for me.

I understand that the release of information may not be re-released to any other person or organization without my written consent.

A **Photo Static Or Carbon Copy Of This Authorization Shall Be Considered As Effective And Valid As The Original.**

Dated: ________________________________

(Signature)

Witness No. 1 Signature

(Print Name)

Witness No. 1 Print Name

(relationship to recipient)

Witness No. 2 Signature

Address: ________________________________

Witness No. 2 Print Name

Date of Birth: __________________________

Social Security No.: ___________________

DHS

Consent For Release Of Information

Page 2
Office of Child Care & Regulatory Services
Child Care Checklist

- Child Care Application
- Copy of High School Diploma & Early Childhood Credentials
- Trade Name
- IRB Clearance Letter
- Written Purpose & Scope of Services
- Statement of Ownership (Proprietor/Partnership only)
- CPR Certification
- Current Health Cards
- Daily Activity Schedule
- Floor Plan
- References
- Employee Record Forms
- Public Safety (Police Report)
- All Forms & Brochures
- Inspection Forms (Fire, Sanitation & DPNR)

- Letter of Good Standing (Churches)
- Articles of Incorporation (Corporations)
- Name and Addresses of Board Members
- By-Laws
- Tax Exempt Certificate
NOTICE:

Effective May 16, 2010, the following Documents are required prior to conducting a fire safety inspection for any Daycare business license applicants involved in the renewal process.

FIRE SAFETY INSPECTION APPLICANTS - Renewal of Business License

Business license renewal applicants requiring a fire safety inspection are required to submit copies of the following documents:

1. Copy of the last Business Licenses from Human Services.
2. A completed form LIC4 (V.I. Fire Services Certification) from the Bureau of Internal Revenue
3. Copy of last Certificate of Inspection from the Virgin Islands Fire Service

A fire safety inspection will not be conducted unless copies of these documents are provided.

[Signature]
Mr. Victor Browne, Director
Virgin Islands Fire Service

Adopted April 1, 2011
# Virgin Islands Fire Service
## Inspection Application Form

- **St. Croix - Tel: 340-773-8050**
- **St. Thomas - Tel: 340-774-7610**
- **St. John - Tel: 340-776-6333**

### Fees - Commercial Establishments
- Gross Receipts of under $150,000 per year: $100.00
- Gross Receipts of over $150,000 per year: $200.00
- Time Consumption Fee: Class “A” $180.00 (15,001 sq. ft. or more) / Class “B” $50.80 (3001 – 15,000 sq. ft.)
- Late Fee – 10% of Inspection Fee per month past expiration date
- Failed Business Re-Inspection: $50.00

---

**PLEASE PRINT CLEARLY SO THAT YOUR APPLICATION MAY BE PROCESSED PROMPTLY**

<table>
<thead>
<tr>
<th>Type of Business Inspection:</th>
<th>New</th>
<th>Existing</th>
<th>Home</th>
<th>Government</th>
<th>Fire Occupancy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Licensee:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Licensee Phone:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Business Name:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Business Physical Address:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Business Phone:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Business Mailing Address:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Business Operational Hours:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Occupancy Square Footage:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contact Person:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contact Person Phone:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Type of Business:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Hazardous Materials: Ex. (LP Gas, Chlorine, Flammable Liquids, Solvents etc.)
- Yes
- No
- Type(s): ______________________________
- Quantities: ____________________________

Sprinkler System:
- Yes
- No

Fire Alarm:
- Yes
- No

Fire Pump:
- Yes
- No

Fire Alarm Company: ____________________________

Applicant’s Signature: ____________________________

Date: ______________

---

Official Use Only

- Inspection Fee
- Late Fee
- Citation Fee
- Total Paid
- Date Paid
- Receipt #
- Certificate No.
- Expiration Date
- Proposed Inspection Date
- Inspected By: ____________________________ Date: ______________
- Re-Inspected By: ____________________________ Date: ______________

- Approved
- Disapproved

Adopted April 1, 2011
Virgin Islands Department of Health, Division of Environmental Health
Human Services Sanitation Inspection Assurance

Name of Facility: ____________________________  Operator of Facility: ____________________________
Physical Address of Facility: ____________________________
Mailing Address of Operator: ____________________________
Phone Number of Facility: ____________________________  Phone Number of Operator: ____________________________
Date Completed: ____________  Fax Number: ____________________________

Please provide responses to the following list of questions. After you have completed your responses please have the document notarized and return it to the offices of the Division of Environmental Health, Department of Health on the respective island of St. Croix or St. Thomas. For faster review, you can fax your document to 340-718-5277. A letter from the Department of Health will be sent to inform you as to whether your assurance has passed the review process.

1. Do you prepare food at your facility?
2. Do you currently have a Health Permit?
3. Do you and all staff/volunteers have valid Health Cards?
4. How many staff persons/volunteers do you have?
5. Approximately how many children/persons will be served at your facility?
6. Are the floors in good repair, for example, holes in tiles/cement?
7. Describe how you plan to keep the floors in your facility clean and in good repair:

8. Describe how you provide adequate lighting for the area(s) you use for your program, include information about the number of rooms and the type of lighting available in each room:

9. Describe how you provide ventilation for the area(s) you use for your program, include information on the number of rooms and windows in each room:

10. If using fans, where are they located?
11. If air conditioners are used, where are they located?
12. a. How many toilets are available for use in your facility?
   b. How many sinks do you have in your facility?
   c. Are the fixtures adequate, in good repair, and clean?
   d. How do you provide a way to wash and dry hands after bathroom use?
   e. Do the lavatory doors have self-closing hinges?
   f. Do you have hot and cold water available for washing of hands?
13. Describe the source the water used in the toilets and sinks:

Division of Environmental Health
Human Services Sanitation Inspection Assurance

Adopted April 1, 2011
14. Describe the source of the drinking water available to the children/staff in the facility: ________________________________

15. Describe how sewage and liquid waste are disposed:

16. Garbage:  
   a. How is garbage stored and in what type of containers? ________________________________
   b. Describe where the garbage is stored? ________________________________

17. Are outside openings screened or otherwise protected against entrance of flying insects? ________________________________

18. Describe your procedures for keeping the premises clean and free of roaches and mice/rats: ________________________________

19. How do you clean and how often do you clean your beds, cots, mats, furniture and linen? ________________________________

20. Describe your facilities for storage of clothes, toy supplies, etc: ________________________________

21. Where do you store medications, cleaning supplies, pesticides, and other hazardous supplies? ________________________________

22. Are these storage areas locked? ________________________________

23. Describe where food service utensils are stored: ________________________________

24. Describe the process for cleaning food service utensils: ________________________________

25. Describe where your food products are stored in the facility, include information about storing products that require refrigeration: ________________________________

26. Describe how you plan to label food products that have been used and require storage: ________________________________

Signature: ________________________________ Notary Public: ________________________________

Child Care Owner/Director: ________________________________

Division of Environmental Health
Human Services Sanitation Inspection Assurance
SANITATION INSPECTION REPORT FOR CHILD CARE FACILITIES

Requested by the Department of Human Services. Under the authority of the Virgin Islands Code Title 3, Section 377, Subsection B (7) and (8).

<table>
<thead>
<tr>
<th>Name of Facility</th>
<th>Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing Address</td>
<td>Operator of Facility</td>
</tr>
<tr>
<td>Telephone No.</td>
<td>Direction to Facility</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ITEMS OF INSPECTION</th>
<th>S-Satisfactory</th>
<th>U-Unsatisfactory</th>
<th>S</th>
<th>U</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Annual Health Permit</td>
<td>Easliy cleanable; in good repair; kept clean.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Floors</td>
<td>Adequate in all areas, all windows and light shaded.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Lights &amp; Ventilation</td>
<td>Fixtures adequate, in good repair, and clean, training chain clean, liquid soap &amp; disposable towels, lavatory doors should have self-closing hinges.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Toilet &amp; Lavatory Facilities</td>
<td>Approved; hot &amp; cold supply adequate; plumbing installed and maintained in approved manner.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Water Supply</td>
<td>Adequate and accessible to children.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Drinking Water Supply</td>
<td>Sewage and other liquid wastes disposed by approved method.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Liquid Waste</td>
<td>Garbage in standard containers, properly covered and stored.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Solid Waste</td>
<td>Outside openings screened or otherwise protected against entrance of biting insects; Effective control of rodents and other vermin; premises clean and free of vermin and breeding areas.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Animal &amp; Vermin Control</td>
<td>Clean and in good repair.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Bed, Cots, Mats Furniture and Linen</td>
<td>Adequate facilities for storage of clothes, toys, supplies, etc.: medications, cleaning supplies, pesticides, and other hazardous supplies properly stored, locked.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Storage</td>
<td>Clean and properly stored.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Food Service Units And Equipment</td>
<td>All food clean &amp; properly stored and labeled, wholesome, no spoilage, from approved sources.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. Food Supplies</td>
<td>Hold current Food Handler's Certificate.</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

Approved: Not Approved: Remarks:

Inspected By: Date of Inspection:

Inspection Requested By:

Signature of Applicant

Signature of Licensing Worker
Department of Human Services

Adopted April 1, 2011
### ZONING AND BUILDING CODE VERIFICATION

<table>
<thead>
<tr>
<th>Child Day Care Agency Name:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Child Day Care Agency Type (s):</td>
<td></td>
</tr>
<tr>
<td>Location Address:</td>
<td></td>
</tr>
<tr>
<td>Applicant's Name:</td>
<td></td>
</tr>
<tr>
<td>Mailing Address:</td>
<td></td>
</tr>
<tr>
<td>Telephone:</td>
<td></td>
</tr>
</tbody>
</table>

Zoning District Classification: __________________________

☐ The child day care agency at the above referenced address conforms to the zoning and building code requirements of the Virgin Islands.

**Comments/Restrictions (if applicable):**

☐ The child day care agency at the above referenced address must conform to the zoning and building code requirements of the Virgin Islands. Any discrepancies are noted below or on attached.

**Comments/Restrictions (if applicable):**

---

Director, Division of Building Permits  
Department of Planning and Natural Resources  

Date

---

Adopted April 1, 2011
GOVERNMENT OF
THE VIRGIN ISLANDS OF THE UNITED STATES
--O--
VIRGIN ISLANDS BUREAU OF INTERNAL REVENUE
APPLICATION FOR
TAX FILING AND PAYMENT STATUS REPORT-LICENSING

Date: __________________________

This applicant identified below hereby requests a letter certifying his or her tax filing and payment status for the purpose of receiving a new or renewal license from the Department of Licensing and Consumer Affairs pursuant to Section 101 of Act 5060, codified as Title 27, Section 304, Subchapter (j), Virgin Islands Code. The applicant authorizes the Bureau of Internal Revenue to disclose any taxpayer information necessary to process this application to the Department of Licensing and Consumer Affairs, who may make such further disclosures as are necessary to carry out the requirements of Act. 5060.

APPLICANT NAME: __________________________

BUSINESS NAME: __________________________

BUSINESS EIN: __________________________

APPLICANT SSN: __________________________

PLEASE INDICATE: __________________________

___ New License ___ Renewal ___ Self-Employed

___ C Corporation ___ Partnership ___ S Corporation

TYPE OF BUSINESS: __________________________

DO YOU HAVE EMPLOYEES? __________________________

PLEASE CIRCLE FORMS THAT YOU USE: __________________________

1040, 1065, 1120, 1120S, 941V.I., 501V.I., 720V.I., 720B-V.I., 722V.I., Other (list) __________________________

Business License #: __________________________

DATE BUSINESS STARTED: __________________________

LICENSE EXPIRATION DATE: __________________________

PERSON REPRESENTING APPLICANT: __________________________

POSITION OF REPRESENTATVE: __________________________

MAILING ADDRESS: __________________________

TELEPHONE NO.: __________________________

SIGNATURE: __________________________ DATE: __________________________

REPLY TO: LOCKHARTS GARDEN NO. 1A ST. THOMAS, VIRGIN ISLANDS 00802

(See Back of Form for Instructions) __________________________

Revised 1/28/09

Adopted April 1, 2011
INSTRUCTIONS FOR FORM LIC 1

Please print (except for the signature). Do not write with a pencil. Prepare this form in duplicate. Have on of the reference **DO NOT SUBMIT A COPY OF THIS APPLICATION TO LICENSEE AND CONSUMER AFFAIRS.** This form must be completed in its entirety before a letter certifying tax filing and payment status can be issued. **ALL INCOMPLETE APPLICATIONS WILL BE REJECTED.**

SPECIFIC INSTRUCTIONS

1. **Applicant Name** – the applicant can be an individual (self-employed person), a partnership, a corporation, etc.

2. **Business Name** – the name under which business is conducted; it may be the same as or different to the applicant’s name [i.e. John Smith (applicant) d/b/a Smith’s Construction (business name)] (d/b/a – doing business as).

3. **EIN-Employer** – identification number, a 9-digit number issued by the Internal Revenue Service in Philadelphia to partnerships, corporations and self-employed individuals who pay wages to one or more employee.

4. **SSN-Social** security number, a 9-digit number issued to an individual by Social Security.

5. **Type of License**-check one (1) to indicate whether this application is for a new license or a renewal license.

6. **Type of Business**-check one (1) to indicate whether the business is organized as a Sole Proprietorship (self-employed), a Corporation (“C” Corporation), a Partnership, or a Subchapter S Corporation (“S” Corporation).

7. **Type of Business** – Indicate what activity or profession is the source of your sales (i.e. clothing store, taxi).

8. **Circle Forms that you use** – 1120 (C Corporation), 1065 (Partnership), 1120S (S Corporation), 1040 (Individual), 941V1 & 501V1 (Withholding Tax), 720VI & 720B-VI (Gross Receipts Tax), 722VI (Hotel Room Tax).

9. **LicenseExpiration Date** – date shown on your business license.

10. **Person Representing Applicant** – If other than applicant, a partner or a corporate officer, this individual must attach a valid power of attorney to receive tax clearance letter.

11. **Additional Information** – List the name, SSN & mailing address for each corporate officer and partner and both corporate office and shareholders for “S” Corporation, only. U.S. residents with V.I. income must file Form 8689 with the V.I. Bureau & attach a copy of Form 1040 filed with the IRS.
ACT NO. 6025
BILL NO. 20-0410
TWENTIETH LEGISLATURE OF THE VIRGIN ISLANDS
OF THE UNITED STATES
Regular Session
1994

To require that every licensed child day care facility have at least one (1) individual on staff who is certified to perform standard first aid and cardiopulmonary resuscitation (CPR)

BE IT ENACTED by the Legislature of the Virgin Islands:

Title 34, Chapter 13, Section 384, Virgin Islands Code, is amended by adding a new subsection (e) and relettering the remaining subsections accordingly:

"(e) The Department shall require as a provision for licensing any child day care facility that at least one (1) individual on staff must be certified to perform standard first aid and cardiopulmonary resuscitation (CPR) for infants and children. Facilities already licensed shall have not more than 240 days in which to meet this requirement."

Thus enacted by the Legislature of the Virgin Islands on September 21, 1994.

Witness our Hands and the Seal of the Legislature of the Virgin Islands this 30 Day of September, A.D., 1994.

[Signature]
BINGLEY G. RICHARDSON, SR.
President

[Signature]
JUDY M. GOMEZ
Legislative Secretary

XXX
The above bill is hereby approved.


[Signature]

Alexander A. Farrelly
Governor