

|->

Title 22@ Social Security

|->

Division 12@ Child Care Facility Licensing Regulations

|->

Chapter 1@ Child Care Center General Licensing Requirements

|->

Subchapter 2@ Infant Care Center

|->

Article 6@ Continuing Requirements

|->

Section 101430@ Infant Care Activities

101430 Infant Care Activities

(a)

Notwithstanding Section 101230, the following shall apply: (1) The infant care center shall develop, maintain and implement a written plan to ensure the provision of indoor and outdoor activities designed to meet the needs of infants, including but not limited to: (A) Quiet and active play. (B) Rest and relaxation. (C) Eating. (D) Toileting. (E) Individual attention. (F) Being held by a caregiver. (2) The center shall ensure the participation of infants in the above activities. (3) All infants shall be given the opportunity to sleep without distraction or disturbance from other activities at the center whenever the infant desires. (A) Staff shall place infants up to 12 months of age on their backs for sleeping. 1. This requirement shall not apply if the infant has a written medical exemption from a licensed physician that allows for an alternative sleep position. The exemption shall be attached to the Individual Infant Sleeping Plan [LIC 9227 (3/20)] and contain the following criteria: a. Instructions on how the infant shall be placed to sleep, including sleep position. b. Duration the exemption is to be in place. c. The licensed physician's contact information. d. Signature of the licensed physician and date of signature. 2. Upon expiration of the medical exemption, staff shall follow all requirements set forth in Subsection (a)(3)(A). 3. The medical exemption shall be included in the infant's file and be maintained as specified in Section 101221(d). 4. Infants with an Individual Infant Sleeping Plan [LIC 9227 (3/20)] that

have Section C of the form completed and signed by an authorized representative shall be placed on their back when first laid down to sleep. In the event the infant changes position, the infant may remain in the alternative position. a. Upon staff observation that the infant is capable of rolling from their back to their stomach and stomach to their back, the provider shall fill out Section D of the Individual Infant Sleeping Plan [LIC 9227 (3/20)], notify the authorized representative, and obtain the authorized representative's signature on the Individual Infant Sleeping Plan no later than the next business day following observation. (B) No infant shall be forced to sleep, to stay awake or to stay in the designated sleeping area. 1. The center is not prohibited from scheduling sleep times for infants over 12 months old. (C) An infant shall not be swaddled while in care. (D) An infant's head shall not be covered while sleeping. (E) If an infant falls asleep before being placed in a crib, staff shall move the infant to a crib as soon as possible.

(1)

The infant care center shall develop, maintain and implement a written plan to ensure the provision of indoor and outdoor activities designed to meet the needs of infants, including but not limited to: (A) Quiet and active play. (B) Rest and relaxation. (C) Eating. (D) Toileting. (E) Individual attention. (F) Being held by a caregiver.

(A)

Quiet and active play.

(B)

Rest and relaxation.

(C)

Eating.

(D)

Toileting.

(E)

Individual attention.

(F)

Being held by a caregiver.

(2)

The center shall ensure the participation of infants in the above activities.

(3)

All infants shall be given the opportunity to sleep without distraction or disturbance from other activities at the center whenever the infant desires. (A) Staff shall place infants up to 12 months of age on their backs for sleeping. 1. This requirement shall not apply if the infant has a written medical exemption from a licensed physician that allows for an alternative sleep position. The exemption shall be attached to the Individual Infant Sleeping Plan [LIC 9227 (3/20)] and contain the following criteria: a. Instructions on how the infant shall be placed to sleep, including sleep position. b. Duration the exemption is to be in place. c. The licensed physician's contact information. d. Signature of the licensed physician and date of signature. 2. Upon expiration of the medical exemption, staff shall follow all requirements set forth in Subsection (a)(3)(A). 3. The medical exemption shall be included in the infant's file and be maintained as specified in Section 101221(d). 4. Infants with an Individual Infant Sleeping Plan [LIC 9227 (3/20)] that have Section C of the form completed and signed by an authorized representative shall be placed on their back when first laid down to sleep. In the event the infant changes position, the infant may remain in the alternative position. a. Upon staff observation that the infant is capable of rolling from their back to their stomach and stomach to their back, the provider shall fill out Section D of the Individual Infant Sleeping Plan [LIC 9227 (3/20)], notify the authorized representative, and obtain the authorized representative's signature on the Individual Infant Sleeping

Plan no later than the next business day following observation. (B) No infant shall be forced to sleep, to stay awake or to stay in the designated sleeping area. 1. The center is not prohibited from scheduling sleep times for infants over 12 months old. (C) An infant shall not be swaddled while in care. (D) An infant's head shall not be covered while sleeping. (E) If an infant falls asleep before being placed in a crib, staff shall move the infant to a crib as soon as possible.

(A)

Staff shall place infants up to 12 months of age on their backs for sleeping. 1. This requirement shall not apply if the infant has a written medical exemption from a licensed physician that allows for an alternative sleep position. The exemption shall be attached to the Individual Infant Sleeping Plan [LIC 9227 (3/20)] and contain the following criteria: a. Instructions on how the infant shall be placed to sleep, including sleep position. b. Duration the exemption is to be in place. c. The licensed physician's contact information. d. Signature of the licensed physician and date of signature. 2. Upon expiration of the medical exemption, staff shall follow all requirements set forth in Subsection (a)(3)(A). 3. The medical exemption shall be included in the infant's file and be maintained as specified in Section 101221(d). 4. Infants with an Individual Infant Sleeping Plan [LIC 9227 (3/20)] that have Section C of the form completed and signed by an authorized representative shall be placed on their back when first laid down to sleep. In the event the infant changes position, the infant may remain in the alternative position. a. Upon staff observation that the infant is capable of rolling from their back to their stomach and stomach to their back, the provider shall fill out Section D of the Individual Infant Sleeping Plan [LIC 9227 (3/20)], notify the authorized representative, and obtain the authorized representative's signature on the Individual Infant Sleeping Plan no later than the next business day following observation.

1.

This requirement shall not apply if the infant has a written medical exemption from a licensed

physician that allows for an alternative sleep position. The exemption shall be attached to the Individual Infant Sleeping Plan [LIC 9227 (3/20)] and contain the following criteria: a. Instructions on how the infant shall be placed to sleep, including sleep position. b. Duration the exemption is to be in place. c. The licensed physician's contact information. d. Signature of the licensed physician and date of signature.

a.

Instructions on how the infant shall be placed to sleep, including sleep position.

b.

Duration the exemption is to be in place.

c.

The licensed physician's contact information.

d.

Signature of the licensed physician and date of signature.

2.

Upon expiration of the medical exemption, staff shall follow all requirements set forth in Subsection (a)(3)(A).

3.

The medical exemption shall be included in the infant's file and be maintained as specified in Section 101221(d).

4.

Infants with an Individual Infant Sleeping Plan [LIC 9227 (3/20)] that have Section C of the form completed and signed by an authorized representative shall be placed on their back when first laid down to sleep. In the event the infant changes position, the infant may remain in the alternative position. a. Upon staff observation that the infant is capable of rolling from their back to their stomach and stomach to their back, the provider shall fill out Section D of the Individual Infant Sleeping Plan [LIC 9227 (3/20)], notify the authorized representative, and obtain the authorized

representative's signature on the Individual Infant Sleeping Plan no later than the next business day following observation.

a.

Upon staff observation that the infant is capable of rolling from their back to their stomach and stomach to their back, the provider shall fill out Section D of the Individual Infant Sleeping Plan [LIC 9227 (3/20)], notify the authorized representative, and obtain the authorized representative's signature on the Individual Infant Sleeping Plan no later than the next business day following observation.

(B)

No infant shall be forced to sleep, to stay awake or to stay in the designated sleeping area.

1. The center is not prohibited from scheduling sleep times for infants over 12 months old.

1.

The center is not prohibited from scheduling sleep times for infants over 12 months old.

(C)

An infant shall not be swaddled while in care.

(D)

An infant's head shall not be covered while sleeping.

(E)

If an infant falls asleep before being placed in a crib, staff shall move the infant to a crib as soon as possible.