FAMILY CHILD CARE SELF-CHECK





Below are the categories of requirements in the NJ FCC Manual	Yes, Done!	Not Yet
Physical Environment		
 Provide adequate floor space for all children's activities; arranged to allow for active/quiet and individual/group activities. 		
2. Ensure that program space shall not include the food preparation areas within the kitchen, bathrooms, hallways, stairways, closets, laundry rooms or areas, furnace rooms and storage spaces.		
3. Maintain a minirnun 1 of 65 degrees F in rooms used by children.		
4. Ensure floors, walls, ceilings, furniture, equipment and other surfaces are kept clean and in good repair.		
Ensure adequate ventilation is provided by means of an open window, fans, air conditioning or other mechanical ventilation systems.		
6. Ensure warm and cold running water is available.		
7. Ensure working indoor toilets are easily accessible to children.		
8. Ensure play equipment, materials and furniture for indoor and outdoor use are sturdy and safe construction, non-toxic, easy to clean and free of hazards that may be injurious to children.		
9. Ensure the home contains sufficient furniture and equipment to accommodate the needs of the children.		
10. Ensure a telephone is in service in the home at all times when children are in care.		
11. Ensure pesticides for indoor and outdoor use are used in accordance to the manufacturer's directions; in keeping with the applicable provisions specified in .J.A.C. 7:30-10, Pesticide Control Code; are not applied while children are present; toys and play equipment are removed from the area before applying pesticides.		
12. Ensure children are removed from the area until the pesticide has dried or as long as recommended on the label.		

	Yes, Done!	Not Yet
Emergency Preparedness		
 13. Maintain and post prominently an emergency plan including evacuation, relocation, shelter-in-place and lockdown procedures which shall include: a. the location of the first aid kit and additional first aid supplies; b. anticipated relocation site; c. hospital or clinic for injured or ill children; d. telephone numbers for police, fire, ambulance and National Poison Emergency Hotline; e. the location of written authorization from parent(s) for emergency medical care; f. diagram showing how the home is to be evacuated; g. procedures for notifying each child's parent of the relocation, shelter-in-place, or lockdown, for communication with each parent before and during the emergency and ensuring family reunification after the emergency; h. the local law enforcement agency or emergency management office to be notified; 1. procedure for obtaining emergency transportation for children, including those with special needs; J. procedures to address the needs of individual children such as infants, toddlers, and those with special needs. 14. Maintain a 72 hour emergency supply, including food, water, medications (if applicable), first aid, and other safety equipment. Food supplies shall be non-perishable and of sufficient quantity for all children for an overnight stay. 		
15. Notify the appropriate law enforcement agency or emergency management office of: a. the name of the family child care provider; b. location of the family child care home; c. number of children, age, and special needs, if any, of each child enrolled and each child residing in the home; d. number of adults in the home; e. need for emergency transportation; f. location to which children will be evacuated; g. plan for shelter in place; h. plan for a lockdown; and 1. plan for reuniting each child with parents.		
16. Ensure fire and evacuation drills are practiced on a monthly basis with each shift of care. Provide a warning system to alert staff members and children of emergency or drill.		
 17. Provide documentation of fire/evacuation drills including date, time, total amount of time taken to evacuate home, number of children and providers present. 18. Ensure that all children present are evacuated from the home within three minutes during each 		
fire drill. 19. Implement and document two shelter-in-place and two lockdown drills per year.		
20. Install at least one working smoke detector on each floor of the home. Ensure detectors have a battery powered back-up energy source.21. Ensure lockable interior doors can be unlocked from the outside.		
22. Ensure all heating or cooling devices are adequately vented, protected by guards or barriers and kept clear of combustible materials.		
23. Ensure radiators and pipes located in rooms occupied by children are covered when the heating system is in use.		

24. Ensure portable electric space heaters and liquid fuel-burning heating appliances are not in use when children are in care.	
25. Ensure stairways, hallways, and exits from rooms and from the home unobstructed, except for safety barriers.	
26. Ensure each room used for child care has at least two means of egress and ensure egress doors shall be readily operable from the egress side without the operation of a key.	
27. Prohibit rest and sleep in a basement unless there are two approved means of egress that meet the International Building Code and the New Jersey Uniform Fire Code as specified in N.J.A.C. 5:70.	
28. Ensure security bars are hinged with a quick release mechanism inside the home that requires one motion to operate.	
29. Ensure every stairway is maintained free of obstructions and provides safe passage.	
30. Ensure stainvays within the exits with four or more steps have a railing.	
31. Maintain electrical cords in good condition.	
32. Ensure major appliances are plugged directly into electric outlets.	
33. Install approved carbon monoxide detectors on every level in the home in accordance with provisions of State codes and guidelines.	

General Safety	
34. Ensure home and furnishings present no hazard to health and safety of children.	
35. Ensure all toxic substances and dangerous items are stored out of reach of children including medicines, poisonous plants, alcohol, tobacco products, matches and sharp objects.	
36. Ensure portable fans are kept out of reach of children.	
37. Provide a safety barrier to prevent children from falling from elevated play areas, and any areas that subject children to fall (when used for child care activities), i.e., stairs, balconies, and porches.	
38. Provide gates at the top and bottom of each stairway in areas of the home where infants and toddlers are in care.	
39. Ensure all electrical outlets accessible to children are covered with safety caps, ground fault interrupters, or have safety outlets installed.	
40. Ensure a working flashlight is available.	
41. Ensure all firearms; other weapons and ammunition are stored in locked areas out of reach of children.	
42. Prohibit the use of trampolines for enrolled children during operating hours.	
43. Prohibit using unfinished areas of the home such as attics, basements, and additions for child care.	
Outdoor Space	
44. Provide an adequate, safe outdoor play area adjacent to or within walking distance of home.	

45. Prohibit the use of and make inaccessible spa pools, hot tubs, and wading pools.	
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46. Ensure swimming pools and natural bodies of water are physically inaccessible to children, except when children are supervised.	
47. Provide docun1entation that all local ordinances that apply to swimming pools; natural bodies of water have been met.	
48. Provide and maintain a ring buoy with a rope, extension pole or other device that can be used for rescue.	
49. Ensure at least one person providing supervision for pool/bodies of water is certified in CPR.	
50. Ensure that each child wears a safety helmet if riding a bike, using roller skates, inline skates, skate boards or is a passenger on a bicycle, or towed by a bike.	
51. Ensure outdoor equipment such as swings, slides and climbing apparatus are installed and in keeping with the manufacturer's specifications and instructions.	
52. Maintain outdoor equipment in good repair.	
53. Ensure equipment with openings do not pose an entrapment hazard.	
54. Ensure equipment is used only by children for whom it is developmentally appropriate.	
55. Maintain all fencing in good condition.	
56. Ensure that all garbage and refuse is collected, stored and disposed of in a manner which will not attract rodents or insects.	
Numbers, Ages, and Supervision of Children	
57. Care for no more than 5 children at one time; care for no more than 3 additional children below six years of age who live in home or are assistant's/substitute's/alternate's children with that 2 nd caregiver present.	
58. Have an assistant when caring for: more than 3 children below 1 year; more than 4 children below 2 years of whom no more than two shall be below one year of age; or 3 children below 1 year or 4 children below 2 years, plus 1 or more children between 2 to 6 years.	
59. Ensure children's supervision and safety at all times including awareness and responsibility for the ongoing activity of each child including being near enough to respond when redirection or intervention strategies are needed; ensure sleeping children are within hearing/easy access.	
60. Ensure caregiver refrains from distracting activities including but not limited to other employment, volunteer services, recreation, hobbies, or frequent or prolonged socialization with adults.	
61. Ensure an approved caregiver is present with the children if provider leaves the premises.	
62. Ensure provider is present 75% of operating hours, or 50% if alternate is present.	
63. Ensure an alternate provider is present when the family child care home operates 24 hours a day, and that no caregiver works more than 16 consecutive hours.	
64. Have an approved substitute/alternate in provider's absence; have a registered provider/alternate if provider is absent 6 or more weeks; ensure substitute/alternate/assistant is familiar with Manual of Requirements.	

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65. Provide and document orientation training to newly hired substitutes and alternate	
provider, prior to the care of children including the following:	
a. provider's policies and procedures;	
b. names and ages of all children enrolled;	
c. special needs or health concerns of enrolled children;	
d. any nutrition needs of enrolled children;	
e. planned program of activities;	
f. location of emergency contact;	
g. procedure of emergency preparedness;	
h. mandatory reporting of child abuse and neglect.	
66. Ensure assistant and provider interact with children; prohibit assistant under 18 years being alone with children.	
67. Ensure provider, alternate provider, substitute provider, assistant provider, nor any other in the	
home or transporting children consume alcohol or smoke when supervising children or during	
operating hours.	
68. Prohibit supervision by person with: communicable disease; impairment or drug/alcohol-induced condition.	
69. Release child only to parent or person designated by parent; prevent release to impaired person	
if unsuccessful call the State Central Registry Hotline at 1-877-652-2873.	
70. Provide required supervision for children using a pool.	
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Activities for Children	
71. Provide a sufficient variety of age-appropriate equipment, supplies, and furniture.	
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72. Provide children with: active and quiet play; indoor and outdoor play; rest or sleep.	
73. Provide infants with age appropriate, supervised tummy time at least twice a day.	
73. Flovide illiants with age appropriate, supervised turning time at least twice a day.	
74. Provide infants with developmentally appropriate outdoor activities and/or carriage rides daily,	
weather permitting.	
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75. Provide preschool children and infants and toddlers with materials for: dramatic play/language	
development; auditory development; visual/small muscle development; large muscle	
development; creative expression.	
76. Ensure that the daily routine is adapted to the individual needs of each infant and toddler that	
fits, as much as possible, into the schedule set up by the parent.	
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77. Maintain on file a written schedule of daily activities and provide a copy for the parents.	
78. Ensure that children are supervised while in swings, high chairs or stationary activity centers; do	
not remain in equipment for more than 30 consecutive minutes; majority of every child's waking	
hours are spent out of cribs, and playpens in a safe, clean place where he or she may move and	
explore freely.	
79. Provide individual attention, affection and comfort for each child; use of television, computers	
and other video equipment shall be used with discretion and such shall not be used as a	
substitute for planned activities.	
Rest and Sleep	
80. Provide daily rest/sleep for each child aged 18 months to 4 years who attends for 4 or more	
consecutive hours and as needed for each child below 18 months.	
81. Provide alternate activities for children who rest for 30 minutes and do not need more rest.	

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82. Provide the following sleeping equipment and bedding: cots; l" mats; cribs; playpens; sheets; blankets.	
83. Provide cribs that meet CPSC standards and maintain documentation on file.	
84. Ensure mattresses are tight-fitting with no more than one inch between the mattress and crib.	
85. Ensure that sleeping equipment is free of pillows, soft bedding, and other hazards when occupied by a sleeping child, and that bedding does not cover a child's face.	
86. Prohibit enrolled children under seven years of age from using an upper bunk in bunk bed.	
87. Ensure guardrails are equipped on both sides of upper bunk; upper edge of guardrails no less than five inches above top surface of mattress; ladder used for entering or leaving the upper bunk.	
88. Provide individual sheets/blankets; identify; replace if wet/soiled/damaged/used by another child; launder weekly.	
89. Ensure each child below one year of age is placed on their back in a face-up sleeping position unless a different sleeping position is indicated in writing by the child's health care provider; maintain documentation at the family child care home.	
Food and Nutrition	
90. Serve breakfast for children present from 7:00-10:00 a.m. who have not eaten breakfast.	
91. Serve lunch for children present from 10:00 a.m1:00 p.m. who have not eaten lunch and are in care 5 hours.	
92. Serve dinner for children present from 5:00- 7:00 p.m. who have not eaten dinner and are in care 5 hours.	
93. Serve snack for children in care 3 hours, or who arrive from school.	
94. Provide nutritious meals; consult with parents on children's feeding schedule, nutritional needs, and introduction of new foods for each child; have clean and sanitary drinking water available at all times.	
95. Provide a supply of food at the home for any child whose parent forgets.	
96. Ensure meals prepared by another source, such as a caterer is licensed, registered, certified, or otherwise approved, as appropriate by the local or county health department or State Department of Health.	
97. Ensure that bottles are not propped for feeding; identify each child's bottle, sipping cup; refrigerate formula and expressed breast milk.	
Guidance and Discipline	
98. Use positive methods of guidance and discipline consistent with children's age and developmental needs; help the child maintain self control; <u>prohibit</u> humiliating or frightening treatment, loud profane or abusive language, derogatory remarks about the child or the child's family, spanking, hitting, kicking, biting, shaking or inflicting physical pain in any manner; deprivation of food, sleep or toilet access; force feeding; withholding of emotional responses or attention; long periods of enforced silence; physical or chemical restraints; isolation in any area that cannot be seen or supervised by the provider; punishment that is associated with napping, toilet training or eating.	
99. Discuss and agree upon positive methods of discipline with the child's parents.	
Environmental Sanitation and Personal Hygiene	

100. Ensure that children wash their hands with soap and running water: upon arrival; before eating; after using the toilet; after coming in contact with blood, saliva and other body secretions/fluids,	
after caring for animals, contact with animals, after contact with animal's body secretions.	
101. Ensure that infant's hands are washed with soap and water immediately after a diaper change.	
102. Ensure that adults wash their hands with soap and running water: upon arrival for the day and after breaks; before and after preparing/serving food; before and after eating; before and after brushing or helping a child brush teeth; before and after giving medication or applying ointment or cream in which a break in the skin may be encountered; before and after playing with children in water; after toileting/assisting a child in toileting; before and after changing diapers; after contact with body fluids; after caring for animals or their equipment; after contact with animal body secretions.	
103. Provide individual/disposable towels and washcloths; store personal hygiene items separately for each child.	
104. Provide change of clothing; change children's clothing when wet or soiled.	
105. Ensure areas of the home, bedding furniture, carpeting and clothing after coming in contact with body or animal secretions are cleaned with soap and water; disinfected with a commercially prepared disinfectant; accordance with label instructions.	
106. Ensure toilet seats, sinks and faucets; mops, sponges used in clean-up; washcloths, towels, and thermometers are cleaned with soap and water and disinfected with commercially prepared disinfectant after each incident.	
107. Ensure toys that children have placed in their mouths or that are otherwise contaminated by body secretions or excretions shall be set aside until they are cleaned by hand with water and detergent, rinsed, sanitized, and air dried or in a mechanical dishwasher.	
Toilet Training and Diaper Changing	
108. Discuss and agree upon toilet training methods with parents.	
109. Ensure that diapers are changed promptly when wet or soiled.	
110. Ensure a clean nonporous surface or pad is used for diaper changes; sanitized after each use.	
111. Ensure caregivers wash their hands with soap and water after each diaper change.	
112. Ensure sufficient quantities of clean diapers are available; provide a container with lid for soiled diapers; diaper changing area and potty chairs are cleaned and disinfected after each use.	
Accidents and Illness	
113. Prepare written incident/injury record; give copy of incident/injury record to parent.	
114. Arrange immediate emergency medical attention for injured child; inform the child's	
115. Give emergency contact information to medical personnel; take emergency contact information on walks/trips.	
116. Maintain a record of injuries sustained by child while under provider's care that receive medical attention; including name of injured child; date/time/location of incident; written description of incident; injury to child; follow-up action taken by provider; application of first aid if any; consultation or treatment by medical professional if applicable; names of witnesses.	
117. Provide a copy of the record to the child's parent by the end of the next working day after the incident or injury.	

118. Ensure basic first aid supplies are in the home; stored out of children's reach; readily accessible	
to provider; minimally include adhesive tape, band-aids, gauze pads, gauze roller bandage;	
disposable non-latex gloves, cold pack, scissors, tweezers, thermometer.	
119. Post in accessible area telephone numbers of the nearest police department, fire department,	
ambulance service/rescue squad, poison control center, provider's address, telephone nun1ber	
where provider can be reached.	
120. Infom1 sponsoring organization and follow its procedures if you administer medication and/or	
admit sick children; inform all parents when anyone in home has a communicable disease that	
requires notification as indicated by the New Jersey Department of Health and Senior Services.	
Provider Record Requirements	
121. Ensure daily attendance records are maintained for children which identify the hours of the	
children's attendance each day, including the time the child arrives and departs from the home.	
122. Maintain a record of visitors and volunteers in the home during the scheduled operating hours.	
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123. Provide documentation of current certification in Cardiopulmonary Resuscitation (CPR) and	
completion of a first aid course for provider and alternate if applicable; certified through one of	
the following: American Heart Association; American Red Cross; National Safety Council; and	
Infant and Toddler CPR (if care is limited to infants and toddlers), or Medic Pediatric Course;	
applicable to the ages of the children enrolled in the home; available for review upon request.	
124. Maintain an individual record for each child in care including: name/birth date; parent's	
name/home address/phone; name, address and telephone number of parent's employer, emergency	
contacts, child's allergies to medication or drugs if applicable; child's health care provider medical	
msurance; parent's authorization for emergency medical treatment; date of child's	
enrollment/withdrawal.	
125. Maintain on file for each child not enrolled in a public or private school a Universal Child Health	
Record, or its equivalent, updated annually, and a care plan for children with special health care	
needs.	
126. Maintain the results of a health exam for each child; within one month following admission to	
the home including: name/address of health care provider; statement by health care provider of	
any condition or handicap affecting child; any recommendations for needed medical treatment or	
special requirements as to diet, rest, allergies, avoidance of certain activities.	
127. After admission, maintain a record for each child of an annual physical examination; age-	
appropriate screenings; up-to-date immunizations; performed by a health care provider within	
the preceding year.	
128. Maintain an up-to-date immunization record in accordance with the recommended immunization	
schedule; appropriate to the child's age or document if child under prescribed medical program to	
obtain immunizations; document timetable.	
129. Maintain for children enrolled in public or private school a written statement from each child's	
parent indicating that the child is in good health and can participate in normal activities; and any	
conditions or specific needs that may require special accommodations.	
130. Maintain health records for household members who are present during the care of enrolled	
children as specified in .J.A.C. 3A:52-5.2(b) and (c).	
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131. Maintain documentation of parent's authorization for transporting enrolled child; parent's	
authorization for child to use pool or other body of water.	
132. Post the Certificate of Registration in a prominent location during operating hours.	
133. Inform the sponsoring organization of any additional persons at least 14 years of age who begin	
living or working in the home longer than 15 consecutive days or on a frequent intermittent basis;	
submit signed Child Abuse Record Information background check.	
Communicating with Parents	
134. Supply each parent of enrolled children with Information to Parents statement; obtain parent	
signatures for receipt of statement.	
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135. Develop a social media policy which includes: the use of social networking sites and other websites; the use of e-mail, text messages, and other electronic means of communication with staff, household members who are present during the hours of operation and parents; the type of social media that the family child care home uses; the methods and devices the staff use to communicate with the parent; and the guidelines for appropriate conduct by staff members and parents; maintain on file a record of parental and staff member receipt of the policy.	
136. Discuss daily activities and routines with parents; permit parents to visit at any time when children present; inform each child's parent(s) about the presence of pets and smoking by any person in the home.	
137. Notify the parents in writing when a substitute or alternate provider will be caring for the children; verbally notify parent if it is an emergency.	
Transportation and Trips	
138. Use infant seats/ child passenger restraint systems/seat belts pursuant to New Jersey Motor Vehicle Commission Law; possession of valid driver's license; vehicle inspection sticker; possession of vehicle liability insurance.	
139. Utilize and maintain on file a blanket permission slip for taking children on walks only if walks are within the provider's neighborhood; arrangements are made for the handling of visits or calls from parents either by having someone remain at the home or utilizing a cellular telephone or telephone answering machine; posting a notice on the entrance door of the home to inform parents of the children's location; the route of the walk involves no entrance into a facility unless the facility has been indicated on the blanket permission slip.	
140. Inform the parent(s) of enrolled children in writing and of any field trip(s), outing(s) or special event(s) involving the transportation of children away from the home; if a school bus, school vehicle or passenger vehicle is used; who the driver is.	
141. Inform the parent(s) of enrolled children in writing before taking children on a field trip, outing or special event; maintain on file signed permission slips for such events.	
School Age Children	
142. Ensure school age children participate in outdoor; active play; rest, relax, quiet socialization; complete homework assignments if necessary; participate in indoor play; table games, cooking, arts and crafts activities.	
143. Obtain and maintain documentation of parent's written permission for school-age child before leaving provider's supervision.	
144. Discuss with and agree upon with parent(s) the use of phone/TV/computers/electronic devices/ and homework arrangements.	
Children with Special Needs	
145. Inform the child's parent and contact the sponsoring organization when developmental delay or disability is suspected.	
146. Request from parent enrolling child with special needs a written up-to-date special needs care plan completed by the child's primary health care provider or any other person who has evaluated or treated the child with input from the parent or guardian regarding the specialized care or accommodations that a child with special needs requires.	
147. Ensure reasonable accommodations are made to serve a child with special needs; if accommodations cause undue hardship, written notification shall be provided to the parent and the sponsoring organization regarding the reasons for not enrolling child; maintain copy on file.	

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148. Ensure the special needs care plan shall include:	
a. list of child's diagnosis;	
b. contact information for the primary care provider;	
c. medications to be administered on a scheduled basis;	
d. medications to be administered on an emergent basis with clearly stated paranleters;	
e. procedures to be performed;	
f. any allergies;	
g. dietary modification;	
h. activity modifications;	
1. environmental modifications;	
J. stimulus that initiates or precipitates a reaction;	
k. symptoms for caregivers to observe;	
1. emergency response plan if child has an emergency.	
Night Time Child Care	
Night Thile Child Care	
149. Ensure provider/substitute/alternate provider is awake; alert to meet the needs of the children.	
150. Provide a bedtime routine for children in care after 7:00p.m.; in consultation with the child's	
parent or guardian: according to the age/developmental needs of the child, and according to time	
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