Chapter 5: INDOOR LEARNING ENVIRONMENT

Purpose Of These Requirements
A major part of a child’s day is spent indoors. Children learn through their own experiences, trial and error, repetition, and imitation. Caregivers can guide and encourage children’s learning by ensuring that the environment is emotionally appropriate, invites play, active exploration, and movement by children, and supports an array of experiences. Intentional planning of the environment using the requirements in this chapter ensures a safe environment to prevent and reduce injuries and promotes all areas of a child’s development. When opening the door to a quality early childhood environment one can see children actively engaging with materials and teachers interacting responsively. They will see displays of learning as well as demonstrations of safety practices. Thoughtful caregivers recognize that the learning environment includes both people and relationships with people and that attention to the way in which environments are set up and used is an important contribution to the quality of the learning experience. Environments should ensure safety, promote health, provide comfort, and be convenient for children and caregivers.

Definitions

**Primary Space:** indoor space available at a center on which the licensed capacity is based.

**Licensed Capacity:** the maximum number of children that can be present in a child care center at any given time.

**Group:** the children assigned to a specific caregiver or caregivers, to meet the staff/child ratios using space, which is identifiable for each group.
SECTION 1: SPACE REQUIREMENTS

NC GENERAL STATUTE 110-91(6) & CHILD CARE RULE .1401
Requirement for Indoor Space

- There must be at least 25 square feet of indoor space for each child.
- Any single-use room used by the children for sleeping only, either during nap time or any other time, will also be measured by the Division’s representative to assure the available floor space provides 200 cubic feet of air space per child for the maximum number of children who will sleep in that room at any time.
- Indoor space on which licensed capacity is based will be referred to as “primary space”.
- A child care licensing consultant will measure all primary space that will routinely be used by children who attend the center, except the following areas listed below.
- All measurements will be rounded off to the nearest inch.
- Total space on which the licensed capacity is based will be the sum of the measurements of all primary space to be used by the children. However, no room can be routinely occupied by more children than the primary space in that room will accommodate at 25 square feet of space per child.
- For centers with a licensed capacity of 3 to 12 children located in a residence, the dining area of a kitchen may be counted if it is routinely used for children’s activities in addition to eating.

- The amount of space per square footage is a factor in determining a program’s licensed capacity. Licensed capacity is the number of children for which a child care center is licensed to care for.
- A child care licensing consultant will measure all primary space to be used by children who attend the center.
The following areas will not be included in the calculation of the primary space:

<table>
<thead>
<tr>
<th>Area</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foyers</td>
</tr>
<tr>
<td>Closets</td>
</tr>
<tr>
<td>Utility areas</td>
</tr>
<tr>
<td>Space or rooms used for administrative activities</td>
</tr>
<tr>
<td>*Single-use rooms including music rooms, isolation/sick rooms, gymnasiums, dining rooms, sleep rooms</td>
</tr>
<tr>
<td>Hallways</td>
</tr>
<tr>
<td>Kitchens</td>
</tr>
<tr>
<td>Thresholds</td>
</tr>
<tr>
<td>Space occupied by adult-sized desks, cabinets, file cabinets</td>
</tr>
<tr>
<td>Any floor space occupied by or located under equipment, furniture, or materials not used by children</td>
</tr>
<tr>
<td>Storage areas</td>
</tr>
<tr>
<td>Bathrooms</td>
</tr>
<tr>
<td>Any floor space occupied by or located under built-in equipment or furniture</td>
</tr>
</tbody>
</table>

*When caring for school-age children, gymnasiums and other single use rooms may be included in the space measured for licensed capacity when used as primary space.*

Primary space can be used to periodically group children together for special activities, such as to view films or slides, for special presentations, such as puppet or magic shows, a special story teller, a discussion of safety practices by a fireman or nurse, etc. However, care must be taken to assure that during such special activities, the room used is not so overcrowded that the children and staff would be endangered in case of a fire or other emergency necessitating evacuation of the center.

Other factors that are considered when determining a center’s licensed capacity may include:

- Sanitation requirements such as the number of sinks and waste water facilities
- Building requirements such as the number of toilets
- Zoning requirements and restrictions such as available parking and local ordinances,
- Amount of outdoor space available.

In a public school program, only the classroom or space used by the children in the licensed program the majority of their time in care is designated as primary space.
Only primary spaces need to be included on the floor plan, monitored for any inspections or for meeting the child care requirements.

Other areas of the school can be used by the children in the licensed program but will be designated as auxiliary space. Auxiliary space is defined as other areas of the school that the children may use occasionally but not for long periods of time or on a regular basis. Examples include: cafeterias, gymnasiums, music, art, and computer rooms, and libraries.

Auxiliary spaces do not have to be included on the floor plan, monitored for any inspections, or for meeting the child care requirements, except to make sure that these areas do not pose any serious health or safety risks to children and to make sure that staff-child ratios and supervision are maintained whenever children use the space.

Centers wishing to be eligible for the most points available in program standards for the issuance of a Star Rated License, will need to increase the square feet of indoor space per child. Refer to Chapter 17 – Star Rated License for details on enhanced square footage requirements.

SECTION 2: EQUIPMENT AND FURNISHINGS REQUIREMENTS

| NC GENERAL STATUTE 110-91(6) & CHILD CARE RULE .0601 |
| Requirement for Equipment and Furnishings |

- Each child care center must provide indoor area equipment and furnishings that are child-size, sturdy, safe, and in good repair.
- Space must be made available for proper storage of beds, cribs, cots, mats, sleeping garments and linens as well as designated space for each child’s personal belongings.
- Each child care center must provide equipment and furnishings that are child-size or which can be adapted for safe and effective use by children.
- Chairs and tables must be of proper height for the children who will be using them.

- Child-size means a child’s feet are able to touch the floor but not necessarily rest flat on the floor, while they are seated. The proper table height is determined if the child’s elbows can rest comfortably on the table. To be considered appropriate, both of these specifications must be met.
- Rules Governing the Sanitation of Child Care provide requirements for:
• Storage of equipment, furniture, toys, clothes, linens, backpacks, diaper bags, beds, cots, mats and other supplies
• Beds, cots, mats and linens
• Toys, equipment and furniture

☑ Adequate space must be provided for the storage of clothes, backpacks, book bags, diaper bags, and other items that belong to children and staff.

☑ Beds, cribs, cots, and mats must be in good repair, stored to prevent contamination, cleaned and sanitized between users.

🗑 The Rules Governing the Sanitation of Child Care, 15A NCAC 18A .2800 is located in Appendix C.

🗑 For sanitation rule updates visit the Department of Environment and Natural Resources Children’s Environmental Health Branch at http://www.deh.enr.state.nc.us/ehs/Children_health/index.html.


CHILD CARE RULE .0602
Requirement for the Condition of Equipment

⭐ All equipment and furnishings must be in good repair and maintained in useable condition.

⭐ All commercially manufactured equipment and furnishings must be assembled and installed according to procedures specified by the manufacturer.

⭐ Equipment and furnishings must be sturdy, stable, and free of hazards that may injure children including sharp edges, lead based paint, loose nails, and splinters.

⭐ All broken equipment or furnishings must be removed from the premises immediately or made inaccessible to the children.

☑ Remove, repair or replace broken equipment and materials when they are found to not be in useable condition immediately.

☑ To verify the equipment and furnishings are properly installed maintain documentation from the company or individual stating the equipment was installed according to the manufacturer’s instructions.
HH – Set up a regular schedule to check equipment and furnishings to ensure all items are in good repair and in useable condition.

CHILD CARE RULE .0509
Requirement for Equipment and Materials

- Each center must have developmentally appropriate equipment and materials accessible on a daily basis.
- The materials and equipment must be sufficient to provide a variety of play experiences, which promote the children’s social, emotional, cognitive and physical development.
- Teacher-made and home-made equipment and materials may be used if they are safe and functional.
- Materials and equipment that are accessible to children cannot be coated or treated with, nor contain, toxic materials such as creosote, pentachlorophenol, tributyl tin oxide, dislodgeable arsenic and any finishes which contain pesticides.

- Children learn through interaction with people and things around them. Materials and equipment should support children’s development by offering opportunities for interactive exploration that are challenging but safe for their age group.

HH - It is important to provide a stimulating environment that offers many opportunities for exploration, discovery and learning. Children learn and develop through their experiences. Through these experiences, children develop social, emotional, intellectual, language/communication and physical skills that prepare them for later successes in life.

- Refer to Chapter 6 – Children’s Records and Activities for a description of each developmental goal area.

CHILD CARE RULE .0603
Overnight Furnishings

- A safe and comfortable bed, crib, or cot, equipped with a firm waterproof mattress at least four inches thick must be provided for each child who remains in the center after midnight.

- All beds, cribs, or cots must be in good repair, stored to prevent contamination, and sanitized between users.
Refer to Section 7 of this chapter regarding requirements on safe sleep practices for infants.

SECTION 3: SAFETY REQUIREMENTS

CHILD CARE RULE .0604
Requirement for Placement of Equipment

Cribs and playpens must be placed so that the children occupying them do not have access to cords or ropes, such as venetian blind cords.

Careful placement of cribs will prevent accidents and hazardous items coming into the reach of children. A child’s reach is extended when they are in a crib.

CHILD CARE RULE .0601
Requirement for Safe Environment

A safe indoor environment must be provided for the children in care.

All hazardous items, materials, and equipment must be used by children only when adult supervision is provided.

In a safe setting, children are able to freely move and explore the area.

Complete safety checks on a regular basis.

It is helpful to position yourself at the children’s eye level to see what they see. This may help you identify hazardous items or materials.

The United States Environmental Agency provides information on ways to reduce chances of pesticide poisoning. Visit http://www.epa.gov/pesticides/factsheets/playitsafe.htm for information and fact sheets. A pesticide is any bait, liquid, powder, or spray used to kill a pest (ants, germs, cockroaches, flies, mice, rats, or termites).

Carolinas Poison Center offers emergency telephone resource for poisoning questions and information. Visit www.ncpoisoncenter.org or call 1-800-222-1222.
CHILD CARE RULE .0604
Requirement for Potentially Hazardous Items

- Potentially hazardous items shall be stored in locked areas or with other appropriate safeguards, or be removed from the premises.
- All materials used for starting fires, such as matches and lighters, must be kept in locked storage or shall be stored out of the reach of children.
- Smoking is not permitted in space used by children when children are present. All smoking materials shall be kept in locked storage or out of the reach of children.
- Fuel-burning heaters, fireplaces and floor furnaces must be provided with a protective screen attached securely to substantial supports to prevent access by children and to prevent objects from being thrown into them.
- Plants that are toxic cannot be in indoor or outdoor space that is used by or is accessible to children.
- Plastic bags, toys and toy parts small enough to be swallowed, and materials that can be easily torn apart such as foam rubber and styrofoam, cannot be accessible to children under three years of age, except that styrofoam plates and larger pieces of foam rubber may be used for supervised art activities, and styrofoam plates may be used for food service. Latex and rubber balloons shall not be accessible to children under five years of age.
- The indoor premises must be checked daily for debris, vandalism, and broken equipment. Debris must be removed and disposed.

- Potentially hazardous items are such items as firearms and ammunition, hand and power tools, nails, chemicals, lawn mowers, gasoline or kerosene, archery equipment, propane stoves, knives, tacks, whether or not intended for use by children.
- Locked storage includes lock and key devices, magnetic locks, pad locks, and combination lock devices. The unlocking device must be stored separately. Do not store the key to a padlock inside the lock.
- Smoking is prohibited in space used by children. This includes the outside play area, entryway to the building, teacher lounge, and immediately outside any door that is used as a direct exit.
- Refer to the Hazardous Items Storage handout in the resource section for a list of items that are required to be kept in locked storage or out of reach.
For resources on poisonous plants visit Poisonous Plants of NC at www.ces.ncsu.edu/depts/hort/consumer/poison/poison.htm or contact your local cooperative extension service center at www.ces.ncsu.edu/index.php?page=countycenters.


HH – Only allow helium balloons for birthday parties or other celebrations. Inspect vinyl mats to assure there is no exposed foam. Make sure toys brought in from a child’s home or kid’s meals are safe and do not pose hazards.

**CHILD CARE RULE .0604**

**Requirement for Electrical Equipment and Appliances**

- Electrical outlets not in use, which are located in space used by the children, must be covered with safety plugs unless located behind furniture or equipment that cannot be moved by a child.
- Electric fans must be mounted out of the reach of children or be fitted with an appropriate mesh guard to prevent access by children.
- All electrical appliances must be used only in accordance with the manufacturer's instructions.
- Electrical cords cannot be accessible to infants and toddlers. Extension cords, except as approved by the local fire inspector, cannot be used. Frayed or cracked electrical cords shall be replaced.

- Outlets covers should be checked daily and missing outlet covers replaced before children occupy the space.

**HH** – In classrooms for infants and toddlers, make sure crock pot cords are secure so children are not able to easily reach them.
CHILD CARE RULE .0604
Requirement for Evacuation Cribs

⚠️ When non-ambulatory children are in care, a crib or other device must be available for evacuation in case of fire or other emergency. The crib or other device must be fitted with wheels in order to be easily movable, have a reinforced bottom, and must be able to fit through the designated fire exit.

⚠️ For centers that do not meet the institutional building code, and the exit is more than eight inches above grade, the center must develop a plan to ensure a safe and timely evacuation of the crib or other device. This plan must be demonstrated to a Division representative for review and approval.

⚠️ During the monthly fire drills, the evacuation crib or other device must be used in the manner described in the evacuation plan.

☑️ Non-ambulatory children are infants and children that are not able to walk about.

☑️ For older children with disabilities, an alternative approved device could be a wheelchair.

☑️ If the center chooses to use a crib for their evacuation device, it must have been constructed for this purpose as specified by the manufacturer or altered according to manufacturer’s instructions. This documentation must be on file at the center.

☑️ The center would also need documentation from the manufacturer regarding the weight limits for the crib. This would be needed to determine the number of children that it can hold and the total number of devices needed for the center. Keep this information on file.

☑️ For centers that are required to develop an evacuation plan, the installation of a ramp from the exit to the ground might be an option included in the plan.
CHILD CARE RULE .0302 &
NC FIRE CODE SECTION – CHAPTER 405.5
Monthly Fire Drills


Child care centers are required to conduct monthly fire drills.

Records of monthly fire drills must be maintained and include the following information:
- The date and time of the fire drill
- Time required to accomplish complete evacuation
- Names of staff members on duty and participating
- Number of individuals evacuated
- Notification method used
- Weather conditions when occupants were evacuated
- Document special conditions or problems encountered
- Name and signature of the person conducting the drill

There must be at least one unannounced fire drill monthly and it should be conducted at a different time each month.

Drills should be held at unexpected times and under varying conditions to simulate the unusual conditions that occur in case of fire.

When evacuating, staff should take an attendance list so they can verify all children are accounted for from each room.

A Center Fire Drill Report is located in the resource section.

SECTION 4: STAFF-CHILD RATIOS AND GROUP SIZES

Ages of children in care will determine the staff-child ratios and group size. Staff-child ratio refers to the maximum number of children who may be supervised by one staff member. The staff-child ratio is determined by the age of the youngest child in the group. A group is the maximum number of children occupying an individual classroom or well-defined space. Well-defined space means that there are clear physical barriers that prevent intermingling of children within a larger room. Staff-child ratios and group size must be maintained indoors, outdoors, and on field trips.

Research has verified that staff-child ratios and group sizes are important quality indicators. Smaller group sizes and larger numbers of staff to children are related to positive outcomes for children and promote direct, warm, social interactions between caregivers and children. When determining the staff-child ratios that your center is going to meet you need to think realistically about the caregiver’s ability to manage routines with the children as well as time for other activities during the day. The child care law and rules establish minimum requirements for staff-child ratios and group size. Some operators find it beneficial to hire part-time staff to help provide extra coverage during certain hours of the day to assist primary caregivers with carrying out daily activities and routines.
**GENERAL STATUTE 110-91(7) & CHILD CARE RULE .0712**

**Requirement for Staff-Child Ratios for Centers with a Licensed Capacity of Less than 30 Children**

- Staff-child ratios must be maintained as required for the number and ages of children in care.
- When only one caregiver is required to meet the staff-child ratio, and children under two years of age are in care, that person cannot concurrently perform food preparation or other duties which are not direct child care responsibilities.
- The staff-child ratio applicable to a classroom must be posted in that classroom in an area that parents are able to view at all times.
- Children 13 years of age or older may receive child care on a voluntary basis provided all applicable child care requirements are met. This includes requirements for staff-child ratio.

- Each group of children must have the appropriate number of staff members present based on the total number of children in care.
- The staff-child ratio of the youngest child in the group must be maintained for the entire group.
- The staff-child ratios and group sizes for a child care center with a licensed capacity of less than 30 children are as follows:

<table>
<thead>
<tr>
<th>Age of Children</th>
<th># Children</th>
<th># Staff</th>
<th>Max. Group Size</th>
<th># Staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 to 12 Months</td>
<td>5</td>
<td>1</td>
<td>10</td>
<td>2</td>
</tr>
<tr>
<td>12 to 24 Months</td>
<td>6</td>
<td>1</td>
<td>12</td>
<td>2</td>
</tr>
<tr>
<td>2 to 3 Years</td>
<td>10</td>
<td>1</td>
<td>20</td>
<td>2</td>
</tr>
<tr>
<td>3 to 5 Years</td>
<td>15</td>
<td>1</td>
<td>25</td>
<td>2</td>
</tr>
<tr>
<td>5 Years and Older</td>
<td>25</td>
<td>1</td>
<td>25</td>
<td>1</td>
</tr>
</tbody>
</table>

- When only one caregiver is required to meet the staff-child ratio, the operator must select one of the following options for emergency relief:
  - The center must post the name, address, and telephone number of an adult who has agreed in writing to be available to provide emergency relief and who can respond within a reasonable time period; or
  - There must be a second adult on the premises who is available to provide emergency relief.
Since the children must be supervised at all times, a child care arrangement with only one caregiver needs to have a plan for preparing food and taking care of administrative responsibilities.

Whenever the single caregiver leaves the group to attend to an injury, answer the phone, respond to parents, etc. she/he still needs to be able to easily see into the area where the children are so that every child remains visually supervised.

A plan might, for example, consist of having the children’s meals catered, or of having someone come in just to prepare meals and snacks. The plan should identify the caterer, what time the part-time person arrives and departs, and the telephone number of a back-up person.

- Another option might be to prepare meals and snacks ahead of time when children are not present and reheat the food and serve it in a quick, reasonable time period when needed.

A sample Classroom Staff to Child Ratio form is located in the resource section.

Centers wishing to be eligible for the most points available in program standards for the issuance of a Star Rated License, will need to implement lower staff-child ratios. Refer to Chapter 17 – Star Rated License for more details.

**GENERAL STATUTE 110-91(7) & CHILD CARE RULE .0712**

**Requirement for Staff-Child Ratios for a Center located in a Residence**

- Staff-child ratios must be maintained as required for the number and ages of children in care.
- The staff-child ratio applicable to a classroom must be posted in that classroom in an area that parents are able to view at all times.

- Each group of children must have the appropriate number of staff members present based on the total number of children in care.
- These ratios only apply to centers that are located in a currently occupied family residence that have a licensed capacity of 3 –12 mixed age children or 3-15 school-age children.
The staff-child ratios for a center located in a residence with a licensed capacity of 3 to 12 children when any preschool aged child is enrolled, or with a licensed capacity of 3 to 15 children when only school-aged children are enrolled are as follows:

<table>
<thead>
<tr>
<th>Age of Children</th>
<th># Children</th>
<th># Staff</th>
<th>Additional school-aged children allowed</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 to 12 Months</td>
<td>5</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>12 to 24 Months</td>
<td>6</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>2 to 13 Years</td>
<td>10</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>3 to 13 Years</td>
<td>12</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>All school-aged</td>
<td>15</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

The staff-child ratio for the youngest child in the group must be maintained for the entire group.

Meeting the needs of five infants and toddlers would be very difficult even for an experienced caregiver. Consider part-time assistance during the busiest times of the day.

A sample Classroom Staff to Child Ratio form is located in the resource section.

Centers wishing to be eligible for the most points available in program standards for the issuance of a Star Rated License, will need to implement lower staff-child ratios. Refer to Chapter 17 – Star Rated License for more details.
GENERAL STATUTE 110-91(7) & CHILD CARE RULE .0713
Requirement for Staff-Child Ratios for Centers with a Licensed Capacity of More than 30 Children

- Staff-child ratios must be maintained as required for the number and ages of children in care.
- In any multi-age group situation, the staff-child ratio for the youngest child in the group must be maintained for the entire group.
- Children younger than two years old may be cared for in groups with older children for the first and last operating hour of the day provided the staff-child ratio for the youngest child in the group is maintained.
- A child two years of age and older may be placed with children under one year of age when a physician certifies that the developmental age of the child makes this placement appropriate.
- When determined to be developmentally appropriate by the operator and parent, a child age two or older may be placed one age level above his or her chronological age without affecting the staff-child ratio for the group. This provision is limited to one child per group.
- Children between the ages of 12 months and 24 months cannot be grouped with older children unless all children in the group are less than three years old.
- When only one caregiver is required to meet the staff-child ratio, and no children under two years of age are in care, that person may concurrently perform food preparation or other duties which are not direct child care responsibilities as long as supervision of the children is maintained.
- When only one caregiver is required to meet the staff-child ratio, the operator must select one of the following options for emergency relief:
  - The center must post the name, address, and telephone number of an adult who has agreed in writing to be available to provide emergency relief and who can respond within a reasonable time period; or
  - There must be a second adult on the premises who is available to provide emergency relief.
- The staff-child ratio applicable to a classroom must be posted in that classroom in an area that parents are able to view at all times.
- Children 13 years of age or older may receive child care on a voluntary basis provided all applicable child care requirements are met. This includes requirements for staff-child ratio.

☑ Each group of children must have the appropriate number of staff members present based on the total number of children in care.
The staff-child ratios and group sizes for children in centers with a licensed capacity of 30 or more children are as follows:

<table>
<thead>
<tr>
<th>Age of Children</th>
<th># Children</th>
<th># Staff</th>
<th>Max. Group Size</th>
<th># Staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 to 12 Months</td>
<td>5</td>
<td>1</td>
<td>10</td>
<td>2</td>
</tr>
<tr>
<td>12 to 24 Months</td>
<td>6</td>
<td>1</td>
<td>12</td>
<td>2</td>
</tr>
<tr>
<td>2 to 3 Years</td>
<td>10</td>
<td>1</td>
<td>20</td>
<td>2</td>
</tr>
<tr>
<td>3 to 4 Years</td>
<td>15</td>
<td>1</td>
<td>25</td>
<td>2</td>
</tr>
<tr>
<td>4 to 5 years</td>
<td>20</td>
<td>1</td>
<td>25</td>
<td>2</td>
</tr>
<tr>
<td>5 Years and Older</td>
<td>25</td>
<td>1</td>
<td>25</td>
<td>1</td>
</tr>
</tbody>
</table>

Whenever a child two years of age or older is placed with a group of children who are one age level above his or her chronological age, the child's parent and operator must sign a statement giving permission for the child to be in that group. The operator must be able to verify that the parent approves the placement. The statement must remain in the child's file.

When only one caregiver is required to meet the staff-child ratio, the operator must select one of the following options for emergency relief. The information must be posted somewhere easily seen by parents and staff at the center.

- The center must post the name, address, and phone number of an adult who has agreed in writing to be available to provide emergency relief and who can respond within a reasonable period of time to take over for the regular caregiver if there is an emergency; or
- There must be a second adult on the premises who is available emergency relief.

HH – Review emergency relief procedures with staff and parents on a regular basis.

Except as above, staff members and administrators who are counted in meeting the staff-child ratios cannot concurrently perform food preparation or other duties which are not direct child care responsibilities.
When children leave the primary space to participate in activities in the designated auxiliary space, at least one of the regular classroom teachers must accompany the children. If additional staff members are needed to maintain proper staff-child ratios, the auxiliary staff may be counted as long as they are regular employees of the school system.

See the resource section for a sample **Staffing Patterns Worksheet** that could be used to help determine when children arrive and how many staff members are needed.

A sample **Classroom Staff to Child Ratio** form is located in the resource section.

Centers wishing to be eligible for the most points available in program standards for the issuance of a Star Rated License, will need to implement lower staff-child ratios. Refer to Chapter 17 – Star Rated License for more details.

Refer to Chapter 4 – Aquatic Activities for specific staff-child ratios and group sizes for children when participating in aquatic activities.

Refer to Chapter 10 – Transportation Safety for specific staff-ratios and group sizes for children being transported.

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**GENERAL STATUTE 110-91(7) & CHILD CARE RULE .0714**

**Requirement for Ratios during Naptime**

- Staff-child ratios must be maintained as required for the number and ages of children in care.
- For groups of children aged two years or older, the staff-child ratio during nap time is considered in compliance if at least one person is either in each room or is visually supervising all children and if the total number of required staff are on the premises and within calling distance of the rooms occupied by children.

- Each group of children must have the appropriate number of staff members present based on the total number of children in care.
- During naptime, the total staff required to meet staff-child ratios must remain on site and be within calling distance. One person cannot be assigned to multiple groups of children at the same time.
SECTION 5: SUPERVISION

It is imperative that caregivers supervise children at all times, not just for the safety of children, but to ensure children get the attention they need for optimal growth and development. Children like to test their skills and abilities. Serious injuries can occur in indoor and outdoor play areas if constant supervision is not maintained. Caregivers who are actively involved, aware, and appreciative of young children’s behaviors are in the best position to keep children safe. Low staff-child ratios make it easier for caregivers to supervise children adequately while interacting with them.

CHILD CARE RULE .0714
Requirement for Supervision

Children must be adequately supervised at all times.

Adequate supervision means that staff interact with the children while moving about the indoor and outdoor area, and are able to hear and see the children at all times, except when emergencies necessitate that direct supervision is impossible for brief periods of time.

Caregivers must be able to hear and see children at all times to monitor safety and be immediately available in an emergency situation.

Adequate supervision supports children’s health and safety, and emotional, social, physical and cognitive development.

Adequate supervision helps caregivers build a welcoming, secure environment, where relationships can grow and children can learn and explore.

The level of supervision varies dependent upon the activity. Consider how supervision will be provided during these activities:

- Meal time
- Transitions from indoor and outdoor activities
- Transitions between activities
- Transportation
- Field trips and off premise activities
- Indoor play
- Outdoor play
- Nap time
- Diapering and toileting

The ages of the children in care also impact the level of supervision. For infants, close supervision during nap/sleep time is essential. For toddlers, close supervision during meal time is essential. For school-age children snack time is not a high risk activity and the supervision level can be adjusted.
Make sure during naptime that there is enough light to adequately supervise children. If the sleep area is too dark staff cannot adequately supervise sleeping children.

**HH** – The lower the staff-child ratio, the better the ability for caregivers to supervise and interact with the children in their care.

**HH** – Active and positive supervision involves:
- Knowing each child’s abilities.
- Establishing clear and simple safety rules.
- Being aware of potential safety hazards.
- Standing in strategic positions.
- Scanning play activities and moving around.
- Focusing on positive rather than negative to teach a child what is safe.

**HH** – Are you providing adequate supervision? Consider the following questions:
- Are there enough caregivers to supervise children when another caregiver diapers, gives medication, or needs to give complete attention to a child?
- Who covers for the caregiver when they need to leave the room or are distracted by a child’s immediate need?
- Have caregivers developed skills in giving attention to individual children while scanning the group for potential problems?
- Have substitutes and volunteers been trained on good supervision techniques?

Children in licensed public school programs can never be allowed to leave the classroom alone to run errands or to use the bathroom. Staff must always accompany the children when they leave the main group, whether inside or outside the building.

When children leave the primary space to participate in activities in the designated auxiliary space, at least one of the regular classroom teachers must accompany the children. If additional staff members are needed to maintain proper staff-child ratios, the auxiliary staff may be counted as long as they are regular employees of the school system.
SECTION 6: PARENTAL ACCESS

CHILD CARE RULE .0205
Requirement for Parental Access

The parent, guardian or full-time custodian of a child enrolled in any child care center must be allowed unlimited access to the center during its operating hours for the purposes of contacting the child or evaluating the center and the care provided by the center.

- The parent, guardian or custodian should notify the on-site administrator of his or her presence immediately upon entering the premises.
- A center cannot restrict access to any known parent. Even in situations where one parent does not have custody of a child, if the center knows the person to be the parent of the child, they cannot prevent this person from visiting or removing the child without court order paperwork.
- The center must also release a child to any person listed on an application as parent, guardian, custodian or authorized pick up person.

HH - Research shows parent involvement gives children better chances for success in school.

HH - Parent involvement can include parents playing in centers with children, reading to children, participating in special events, eating lunch, and playing outside. Parents may also want to initiate special projects such as gardening or cooking activities.

SECTION 7: ROOM ARRANGEMENT

CHILD CARE RULE .1302 & .1304
Building Code Requirement for Direct Exits

All rooms used by children under the age of 2 ½ years must have a direct exit to the outside.

- The exit must lead to the outside. Passage through other classrooms or areas of the center before reaching an exit is not permitted.
- This requirement is based on the difficulties young children may have when exiting.
- If the building meets institutional code and has a sprinkler system, direct exits are not required.
CHILD CARE RULE .0511
Requirement for Infant and Toddler Areas

Each center must have developmentally appropriate toys and activities for each child to promote the child’s physical, emotional, intellectual, and social well being including appropriate books, blocks, dolls, pretend play materials, musical toys, sensory toys and fine motor toys.

The materials must be kept in an identifiable space where related equipment and materials are kept in identifiable groupings and must be made available to the children for a substantial portion of each day.

The materials must be offered in sufficient quantity to allow all children to use them at some point during the day and to allow for a range of choices with duplicates of the most popular toys.

Caregivers must make provisions for the promotion of physical development for a substantial portion of the day, which should include varied developmentally appropriate physical activities.

A safe clean, uncluttered area must be available for infants to crawl or creep and toddlers to move around.

Hands-on experiences, including both familiar and new activities, must be provided to enable the infant or toddler to learn about himself and the world.

All rooms used by infants and toddlers must provide space for sleeping, eating, toileting, diaper changing, and playing according to each child’s individual need.

Each child must have the opportunity to be outdoors daily, weather permitting.

While awake, each child under the age of 12 months must be given the opportunity each day to play while positioned on his or her stomach.

Each Infant or Toddler room should have access to a:
- Food preparation area
- Diaper changing area
- Sleeping area with cribs, cots or other appropriate sleeping furnishings
- Play area

When setting up the food preparation area, consider these six general guidelines:
- Make sure that food and diapering areas are completely separate.
- Lock up all health hazards such as cleaning products or sharp objects.
- Make sure the floors are not slippery.
- Have adult-only work areas and storage spaces that are inaccessible for children to reach.
• Make sure all surfaces and equipment are easy to clean.
• Make sure appliance cords are not accessible to children.

✔ Typically, a food preparation area needs to have the following items present:

<table>
<thead>
<tr>
<th>Item</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drain boards or counter top space of adequate size</td>
<td>Adequate refrigeration equipment</td>
</tr>
<tr>
<td>Handwashing sink</td>
<td>Storage space for non-refrigerated foods</td>
</tr>
<tr>
<td>Floor covering that is easily cleanable. Carpet is not recommended.</td>
<td>Two-compartment sink</td>
</tr>
<tr>
<td>Means of warming bottles</td>
<td></td>
</tr>
</tbody>
</table>

✔ Bottle warming equipment must be inaccessible to children when in use and must be emptied, cleaned and sanitized daily.

✔ When warming a bottle in hot water, make sure there is no hot water anywhere on the bottle including the bottle cap before giving it to the child.

✔ Microwaves cannot be used to thaw or warm breast milk, baby food, formula, or other bottled beverages. Microwaves heat unevenly and, even after shaking, the beverage may have hot spots that could severely burn a child’s mouth.

✔ Make sure crock pot cords are secure so that children are not able to easily reach them.

✔ Typically, a diaper changing area needs to have the following items present:

<table>
<thead>
<tr>
<th>Item</th>
</tr>
</thead>
<tbody>
<tr>
<td>Handwashing sink</td>
</tr>
<tr>
<td>Storage space for diapers, wipes, and clothing</td>
</tr>
<tr>
<td>Floor covering that is easily cleanable</td>
</tr>
<tr>
<td>Diaper changing surface that is smooth, intact, nonabsorbent, and easily cleanable</td>
</tr>
<tr>
<td>Cleanable, plastic-lined, covered trash can or container for soiled diapers</td>
</tr>
<tr>
<td>Posted instructions for caregivers on proper methods of diaper changing and handwashing</td>
</tr>
</tbody>
</table>

 предостережение: Refer to Appendix C – Sanitation for Child Care Center for complete requirements for a Food Preparation Area and a Diaper Changing Area.
**HH** - When setting up the environment, consider the ages of the infants in care. Are you going to serve infants of about the same age or infants of mixed ages (young, mobile, older). Consider how you will design the environment to meet the needs and abilities of each infant in care. Consider how you will alter the environment as the infants grow older or as you bring in younger infants.

- A large vinyl-covered mat on the floor can provide a place where infants and toddlers can move about safely. Children who stay in a crib or play pen for extended periods of time will not experience the social, physical, emotional or intellectual stimulation, so important to their development.

- There should be ample floor space for crawling, creeping and toddling.

- Create small areas focused on particular activities. This will help infants and toddlers develop and safely experience the environment around them.

**HH** – Make each activity area have a special feel, making it a mini-environment.

- Infants and toddler should be able to rest or sleep when they are tired. Infants and toddlers often rest by playing quietly or just lying down and gazing. Rest does not require as much protection as sleep. Sleep requires a safe spot away from noise, movement, and stimulation.

- Individual sleep space for infants must be provided.

- Cribs and play pens used for sleeping must be easily cleanable, and equipped with a firm, tight-fitting mattress made of waterproof, washable material at least 2 inches thick.

- When in use, cribs, play pens, cots or mats must be placed at least 18 inches apart or separated by partitions which prevent physical contact.

**HH** – Provide a “nursing nook” in the center. A nursing nook can be as simple or elaborate as you like. Think about what changes could be made in your center to provide a quiet, comfortable, and private place for nursing.

**HH** – Have a bin for putting toys that have been mouthed by one child out of reach of other children until the toys have been cleaned and sanitized.

**HH** – Parents are often concerned that putting a baby on their back to sleep will cause a flat spot on the back of the head. Changing a child’s position throughout the day as well as ensuring plenty of tummy play time will minimize flatness. Tummy time also helps the child work on strengthening the neck muscles.
Refer to the resource section for Activity Areas and Suggested Materials for Infants and Toddlers that suggest ways caregivers can promote young children’s development and guide their learning experiences. These experiences can take place indoors and outdoors. Children should be able to reach and use the materials and equipment by themselves. For non-mobile infants, caregivers will need to bring materials to the child to provide easy access to the materials. For example, to make books accessible for non-mobile infants, the caregiver will need to hand an infant a book or place books where an infant can reach them.

CHILD CARE RULE .0510

Requirement for Areas used by Children 2 Years and Older

Each center must have materials and equipment available in activity areas on a daily basis.

Each activity area must contain enough materials to allow three related activities to occur at the same time. The equipment and materials must be in sufficient quantity to allow at least three children to use the area regardless of whether the children choose the same or different activities.

Centers with a licensed capacity of 30 or more children must have at least four activity areas available in the space occupied by each group of children.

Centers with a licensed capacity of less than 30 children must have at least four activity areas available daily. Separate groups of children may share use of the same activity areas.

Centers with a licensed capacity of 3 to 12 children located in a residence are not required to have activity areas, but must have equipment and materials available daily for the children in care.

Encourage children to make choices from a variety of available activities.

Arrange space to give children the freedom to move around and among the equipment and materials.

Materials in an activity area should be arranged neatly and labeled. If it is easy for the children to see and get what they want, it will also be easy for them to return the items to the shelf or area themselves.

It is important to include a wide range of activities and materials for children of all abilities. You will want to add or change play materials to meet the changing needs and interests of children.
Proper placement of activity areas will enhance the children’s enjoyment and smooth operation of the classroom.

The arrangement of the environment plays a key role in guiding the behavior of young children. Observe children closely to determine what messages the physical environment is sending. If it appears that the space suggests undesirable behaviors to children, such as running indoors, be willing to modify the arrangement of equipment and furnishings to send a different message.

Active and quiet activity areas should NOT be located next to each other.

A Sample Room Arrangement layout is available in the resource section.

Refer to the resource section for examples on Placement of Activity Areas for Preschoolers. This resource provides suggestions for the placement of activity areas within a classroom and how the placement has a powerful impact on the way the environment works.

SECTION 8: SAFE SLEEP PRACTICES FOR INFANTS

Safety is an issue that is first and foremost in the minds of caregivers charged with the care of infants. The number of babies dying suddenly and unexpectedly in North Carolina remains high. In our state most Sudden Infant Death Syndrome (SIDS) tragedies happen in the baby’s home but some take place in other settings including child care. In 2003 North Carolina adopted the NC SIDS Law (House Bill 152) aimed to lower the risks of SIDS in child care. The law requires child care providers to place all infants age 12 months or younger on their back to sleep, to develop and maintain a safe sleep policy, and complete training on safe sleep practices.
**GENERAL STATUTE 110-91(15) & CHILD CARE RULE .0606**

**Requirement for Infant Safe Sleep Policy**

Each center licensed to care for infants aged 12 months or younger must develop and adopt a written safe sleep policy that:

- Specifies that caregivers will place infants aged 12 months or younger on their backs for sleeping unless: (1) for an infant aged 6 months or less, the center receives a written waiver of this requirement from a health care professional; or (2) for an infant older than 6 months, the center receives a written waiver of this requirement from a health care professional, parent, or legal guardian;
- Specifies whether pillows, blankets, toys, or other objects may be placed with a sleeping infant aged 12 months or younger, and if so, specifies the number and types of allowable objects;
- Specifies that nothing will be placed over the head or face of an infant aged 12 months or younger when the infant is laid down to sleep;
- Specifies the temperature in the room where infants aged 12 months or younger are sleeping does not exceed 75 degrees F;
- Specifies the means by which caregivers will visually check on sleeping infants aged 12 months or younger;
- Specifies the frequency with which caregivers will visually check on sleeping infants aged 12 months or younger;
- Specifies how caregivers will document compliance with visually checking on sleeping infants aged 12 months or younger with such documents to be maintained for a minimum of 30 days;
- Specifies any other steps the center will take to provide a safe sleep environment for infants aged 12 months or younger.

The operator of the child care facility must discuss the safe sleep policy with the child’s parent or guardian before the child is enrolled at the facility.

The child’s parent or guardian must sign a statement attesting that the parent or guardian received a copy of the safe sleep policy and that the policy was discussed with the parent or guardian before the child’s enrollment.

If a center amends its safe sleep policy, it must give written notice of the amendment to the parents of all enrolled infants aged 12 months and younger at least 14 days before the amended policy is implemented. Each parent must sign a statement acknowledging the receipt and explanation of the amendment. The center must retain the acknowledgment in the child’s record for as long as the child is enrolled.

Any director as well as any caregiver responsible for the care of children ages 12 months or younger must receive training in safe sleep practices.

☑️ The intent of North Carolina’s SIDS (Sudden Infant Death Syndrome) Law and child care requirements are to help keep babies safe while they are in child care.

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*Indoor Learning Environment* 5.26
Placing babies on their back to sleep has been effective in helping reduce the number of babies that die of SIDS.

The NC SIDS Law empowers providers to create a safe sleep environment and engage in safer sleep practices and can help reinforce safe sleep messages to parents.

The NC SIDS Law applies to all operators in child care facilities that care for children 12 months of age or younger.

Operators, directors, owners, and any child care provider scheduled to work with infants, including substitutes and volunteers counted in staff-child ratio, are required to complete Infant/Toddler Safe Sleep and SIDS Risk Reduction training, also known as ITS-SIDS training.

Refer to Chapter 2 – Staff for a complete outline of the ITS-SIDS training requirement.

Overheating is a risk factor for SIDS, therefore the room temperature where infant’s sleep should not exceed 75 degrees Fahrenheit.

Caregivers are required to visually check sleeping infants and document this requirement each time a sleeping infant is visually checked. This is also required for infants receiving overnight care.

If you complete safe sleep checks at different intervals depending on the time of day or night an infant is in care, you need to specify when these checks will be performed in your safe sleep policy. You can adopt one policy and note differences within the policy based on the time the children are in care.

If an infant has been placed on his back to sleep and the infant rolls onto his stomach or side on his own, it is okay to let the infant sleep in that position. The caregiver does not have to reposition the infant on his back.

Two Sample Safe Sleep Charts are located in the resource section. Find or create a chart that works for you. Documentation must remain on file for 30 days. Additional sample safe sleep charts can be found on the Division’s website at www.ncchildcare.net.

HH - Practice drills for unresponsive baby emergency. It is important for child care providers to know proper emergency procedures in the event that a baby is not responsive or does not wake up from a nap. Practice drills will familiarize staff with how to respond in the event of an emergency.
A (BASIC) Policy template and an Infant/Toddler Safe Sleep Policy Sample is available in the resource section to assist child care programs when creating a safe sleep policy that creates a safe sleep environment for infants.

CHILD CARE RULE .0606
Requirements for Safe Sleep Environment

⚠️ The center must post a copy of its safe sleep policy or a poster about infant safe sleep practices in a prominent place in the infant room.

⚠️ For each infant with a waiver on file at the center, a notice must be posted for quick reference near the infant’s crib, bassinet, or playpen. The notice must include: the infant’s name, the infant’s authorized sleep position, and the location of the signed waiver.

✔️ Confidential medical information, including the infant’s medical diagnosis, cannot be posted on the notice.
The following pages contain resource materials discussed in or related to the preceding chapter.

Some of the resources are forms created by the Division of Child Development and must be used by licensed child care centers. Other materials are provided as a resource only for child care centers and can be used at the discretion of the center.

Center operators may also wish to use this section to add any additional resource materials they have that are related to the chapter or information that is specific to their child care center.