

R430-60-24: INFANT AND TODDLER CARE.

If the center cares for infants or toddlers, the following applies:

- (1) If an infant is not able to sit upright and hold their own bottle, a caregiver shall hold the infant during bottle feeding. Bottles shall not be propped.

Rationale / Explanation

Propping bottles can cause choking and aspiration, and may contribute to long-term health issues including ear infections, orthodontic problems including tooth decay, speech disorders, and psychological problems. CFOC, 3rd Ed. pgs. 170-171

Enforcement

Always Level 2 Noncompliance.

- (2) The provider shall clean and sanitize high chair trays prior to each use.

Rationale / Explanation

The purpose of this rule is to prevent the spread of disease. Clean food service surfaces prevent the spread of microorganisms that can cause disease. CFOC, 3rd Ed. pg. 178 Standard 4.5.0.2

Enforcement

If an infant is in a high chair playing with toys and puts a toy in his/her mouth and back on the tray, the tray needs to be sanitized before it is used by another child.

Always Level 3 Noncompliance.

- (3) The provider shall cut solid foods for infants into pieces no larger than 1/4 inch in diameter. The provider shall cut solid foods for toddlers into pieces no larger than 1/2 inch in diameter.

Rationale / Explanation

These guidelines are recommended by the American Academy of Pediatrics and the American Public Health Association to prevent choking, because infants are not able to chew, and toddlers often swallow pieces of food whole without chewing. CFOC, 3rd Ed. pgs. 181-182 Standard 4.5.0.10

Enforcement

Examples of solid foods that must be cut into small pieces include solid meat, hard cheeses, and fresh or frozen fruits and vegetables.

Always Level 2 Noncompliance.

- (4) Baby food, formula, and breast milk for infants that is brought from home for an individual child's use must be:

- (a) labeled with the child's name;
- (b) labeled with the date and time of preparation or opening of the container, such as a jar of baby food;

Rationale / Explanation

The purposes of this rule are to ensure that a child is not accidentally fed another child's food (which can lead to an allergic reaction). CFOC, 3rd Ed. pgs. 165-166 Standard 4.3.1.3, pgs. 167-168 Standard 4.3.1.5, pgs. 173-174 Standard 4.3.1.12

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Enforcement

Breast milk that is collected and frozen immediately after collection is not considered “prepared” or “opened”. Breast milk that is not frozen (i.e., just collected or just thawed), but has not yet been fed to a child can be stored in a refrigerator (at 40 degrees) for up 24 hours, after which, it should be discarded.

If a parent brings his/her child to the center with a prepared bottle already, the caregiver should document the time the bottle arrived at the center as the time of preparation

Powdered formula or dry food such as cereal that is brought from home should be labeled with the child's name. It does not have to be labeled with the date and time the container is opened.

Always Level 3 Noncompliance.

- (4) Baby food, formula, and breast milk for infants that is brought from home for an individual child's use must be:**
- (c) kept refrigerated if needed; and**

Rationale / Explanation

The purposes of this rule are to ensure that a children do not become ill from eating spoiled food. CFOC, 3rd Ed. pgs. 165-166 Standard 4.3.1.3, pgs. 167-168 Standard 4.3.1.5, pgs. 173-174 Standard 4.3.1.12.

Enforcement

Level 2 Noncompliance if failure to follow this rule results in a child being served spoiled food.

Level 3 Noncompliance otherwise.

- (4) Baby food, formula, and breast milk for infants that is brought from home for an individual child's use must be:**
- (d) discarded within 24 hours of preparation or opening, except that powdered formula or dry foods which are opened, but are not mixed, are not considered prepared.**

Rationale / Explanation

The purposes of this rule are to ensure that children do not become ill from eating spoiled food. CFOC, 3rd Ed. pgs. 165-166 Standard 4.3.1.3, pgs. 167-168 Standard 4.3.1.5, pgs. 173-174 Standard 4.3.1.12.

Enforcement

Breast milk that is collected and frozen immediately after collection is not considered “prepared” or “opened”, and can be stored in the freezer for up to 2 weeks, after which, it should be discarded. Breast milk that is not frozen (i.e., just collected or just thawed), but has not yet been fed to a child can be stored in a refrigerator (at 40 degrees) for up 24 hours, after which, it should be discarded.

If a parent brings his/her child to the center with a prepared bottle, the caregiver should document the time the bottle arrived at the center as the time of preparation.

Powdered formula or dry food such as cereal that is brought from home should be labeled with the child's name. It does not have to be labeled with the date and time the container is opened.

This rule does not apply to containers (pint, quart, half gallon, or gallon) of milk that are purchased from the store.

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Level 2 Noncompliance if failure to follow this rule results in a child being served spoiled food.

Level 3 Noncompliance otherwise.

- (5) Formula and milk, including breast milk, shall be discarded after feeding, or within two hours of initiating a feeding.**

Rationale / Explanation

Breast milk that is collected and frozen immediately after collection is not considered “prepared” or “opened”, and can be stored in the freezer for up to 2 weeks, after which, it should be discarded. Breast milk that is not frozen (i.e., just collected or just thawed), but has not yet been fed to a child can be stored in a refrigerator (at 40 degrees) for up to 24 hours, after which, it should be discarded.

If a parent brings his/her child to the center with a prepared bottle, the caregiver should document the time the bottle arrived at the center as the time of preparation.

Powdered formula or dry food such as cereal that is brought from home should be labeled with the child's name. It does not have to be labeled with the date and time the container is opened.

This rule does not apply to containers (pint, quart, half gallon, or gallon) of milk that are purchased from the store.

Level 2 Noncompliance if failure to follow this rule results in a child being served spoiled food.

Level 3 Noncompliance otherwise.

- (6) To prevent burns, heated bottles shall be shaken and tested for temperature before being fed to children.**

Rationale / Explanation

The American Academy of Pediatrics and the American Public Health Association recommend warming infant bottles by placing them under warm running tap water or placing them in a container of water that is no warmer than 120 degrees, for no longer than 5 minutes. Bottles of formula or milk that are warmed at room temperature or in warm water for an extended period of time provide an ideal medium for bacteria to grow. In addition, infants have received burns from hot water dripping from an infant bottle that was removed from a crock pot, or by pulling the crock pot down on themselves by a dangling cord. CFOC, 3rd Ed. Pgs. 171-172 Standard 4.3.1.9

Gently shaking warmed bottles before feeding them to children prevents burns from “hot spots” in the heated liquid. Gentle shaking is important, because excessive shaking of human breast milk may damage some of the cellular components of the milk that are valuable to infants, as may excessive heating. Excessive shaking of formula may cause foaming, which increases the likelihood of feeding air to infants.

Enforcement

Always Level 3 Noncompliance.

- (7) Pacifiers, bottles, and non-disposable drinking cups shall be labeled with each child's name, and shall not be shared.**

Rationale / Explanation

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The purpose of this rule is to prevent the spread of disease among children that can result from sharing these items. CFOC, 3rd Ed. pg. 118 Standard 118

Enforcement

If, when each meal is served, a caregiver brings cups for children into the room and removes the cups from the room immediately after the meal to clean and sanitize them (so that the cups are only in the room during the meal), the cups do not need to be labeled with each child's name.

If a pacifier is too small to be labeled with a child's full name, it can be labeled with the child's initials.

If caregivers are having a hard time labeling these items because they are plastic and the labeling rubs off, they can scratch the child's name or initials into the item with a safety pin or use a clip with the short ribbon that attaches to the child's clothing and label the ribbon or the clip with the child's name.

Caregivers may use color coded pacifiers, bottles, or cups instead of labeling them with the child's name, if each child is assigned a different color and there is a chart visible showing which color is assigned to each child.

Pacifiers cannot be labeled as belonging to the center staff and sanitized between use, because pacifiers cannot be shared, no matter who purchases them.

Always Level 3 Noncompliance.

- (8) Only one infant or toddler shall occupy any one piece of equipment at any time, unless the equipment has individual seats for more than one child.**

Rationale / Explanation

The purpose of this rule is to prevent infants from accidentally injuring one another.

Enforcement

This rule does not prohibit a provider from using a crib to evacuate multiple children for an emergency drill or an actual emergency evacuation.

If a crib is used to transport children within the center, the children should not be left in the crib together after they have been transported.

Level 2 Noncompliance if 2 or more mobile infants occupy the same piece of equipment.

Level 3 Noncompliance otherwise.

- (9) Infants shall sleep in equipment designed for sleep such as a crib, bassinet, porta-crib or play pen. Infants shall not be placed to sleep on mats or cots, or in bouncers, swings, car seats, or other similar pieces of equipment.**

Rationale / Explanation

The purpose of this rule is to prevent injury to children from entrapment, falls, or other children, and to reduce the risk of Sudden Infant Death Syndrome, which increases when children are not put to sleep lying on their backs. CFOC, 3rd Ed. pgs. 96-99 Standard 3.1.4.1

Enforcement

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This rule is not out of compliance if a parent gives staff written instructions for the infant to sleep in another piece of equipment.

If an infant falls asleep in a piece of equipment not designed for sleeping, the caregiver must move him/her to appropriate sleeping equipment.

If an infant arrives at the center asleep in a car seat, the caregiver must move the him/her to appropriate sleeping equipment.

*The Boppy website (www.boppy.com) states that a boppy should never, ever be used for a baby to sleep on. It goes on to state that it should not be used in a crib, cradle, bassinet, playpen, play yard or bed, and that improper use of this product could result in serious injury or death. Therefore, a boppy is **not** equipment designed for sleeping.*

Always Level 1 Noncompliance.

- (10) **Cribs must:**
(a) **have tight fitting mattresses;**

Rationale / Explanation

The purpose of this rule is to prevent injuries to children. Children have strangled because their shoulder or neck became caught in a gap between the slats or between the mattress and the crib side. Deaths by asphyxiation resulting from the head or neck becoming wedged in parts of a crib are well-documented. CFOC, 3rd Ed. pgs. 253-254 Standard 5.4.5.2

Enforcement

Blankets, eggshell mattress, foam, etc. cannot be wedged in between the mattress and the crib frame. The only way to correct a mattress that is not tight fitting is to replace it with a mattress that is tight fitting.

Always Level 2 Noncompliance.

- (10) **Cribs must:**
(b) **have slats spaced no more than 2-3/8 inches apart;**

Rationale / Explanation

The purpose of this rule is to prevent injuries to children. Children have strangled because their shoulder or neck became caught in a gap between the slats or between the mattress and the crib side. Deaths by asphyxiation resulting from the head or neck becoming wedged in parts of a crib are well-documented. CFOC, 3rd Ed. pgs. 253-254 Standard 5.4.5.2

Enforcement

Cribs include full-sized cribs, porta cribs, play pens, and play yards.

Always Level 2 Noncompliance.

- (10) **Cribs must:**
(c) **have at least 20 inches from the top of the mattress to the top of the crib rail; and**

Rationale / Explanation

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The purpose of this rule is to prevent injuries to children. Children can be injured falling from a crib if the top of the crib rail is not high enough to prevent falls. (Depending on the age, size, and mobility of the child, there may need to be more than 20 inches from the top of the mattress to the top of the crib rail, to prevent standing children from falling out of the crib.) CFOC, 3rd Ed. pgs. 253-254 Standard 5.4.5.2

Enforcement

Cribs include full-sized cribs, porta cribs, play pens, and play yards.

Level 1 Noncompliance in all instances except that described below in Level 2 Noncompliance.

Level 2 Noncompliance if the infant in the crib cannot yet sit up and there is at least 12 inches from the top of the mattress to the top of the crib rail, but less than 20" or if there is not enough space from the top of the mattress to the top of the crib rail but no child is using the crib at the time of the inspection.

(10) Cribs must:

- (d) not have strings, cords, ropes, or other entanglement hazards strung across the crib rails.**

Rationale / Explanation

The purpose of this rule is to prevent injuries to children. The presence of strings or cords strung across crib rails presents a strangulation hazard. CFOC, 3rd Ed. pg. 285 Standard 6.4.1.3

Enforcement

Cribs include full-sized cribs, porta cribs, play pens, and play yards.

This rule will be considered out of compliance when electrical cords longer than 12 inches are accessible to children in the cribs.

Always Level 2 Noncompliance.

- (11) Infants shall not be placed on their stomachs for sleeping, unless there is documentation from a health care provider for treatment of a medical condition.**

Rationale / Explanation

Placing infants to sleep on their backs has been associated with a dramatic decrease in deaths from Sudden Infant Death Syndrome. The American Academy of Pediatrics and the American Public Health Association also recommend that pillows, quilts, comforters, sheepskins, stuffed toys, and other soft items be removed from cribs, as infants have been found dead with these items covering their faces, noses, and mouths. CFOC, 3rd Ed.pgs. 96-99 Standard 3.1.4.1

Enforcement

Always Level 1 Noncompliance.

- (12) Walkers with wheels are prohibited.**

Rationale / Explanation

Because many injuries, some fatal, have been associated with the use of walkers, and because there is no clear developmental benefit from their use, the American Academy of Pediatrics has recommended that they not be used in child care centers. Walkers are dangerous because they move children around too fast, and to hazardous areas. The upright position also brings children close to objects they can pull down on themselves.

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Walkers are the cause of more injuries than any other baby product. Each year an estimated 21,300 children are treated in U.S. hospital emergency rooms for injuries related to walkers. CFOC, 3rd Ed. pgs. 242-243 Standard 5.3.1.10

Enforcement

Always Level 2 Noncompliance.

(13) Infants and toddlers shall not have access to objects made of styrofoam.

Rationale / Explanation

Styrofoam can break into pieces that can become choking hazards for young children. CFOC, 3rd Ed. pg. 178 Standard 4.5.0.2

Enforcement

Swimming noodles are not made of Styrofoam and do not need to be inaccessible to the children.

Always Level 2 Noncompliance.

(14) Caregivers shall respond as promptly as possible to infants and toddlers who are in emotional distress due to conditions such as hunger, fatigue, wet or soiled diapers, fear, teething, or illness.

Rationale / Explanation

Responsive caregiving has been shown to be important for brain development in infants and toddlers. Research has shown that when children experience stress, the level of cortisol in their brain increases. Cortisol alters the brain by making it vulnerable to processes that destroy neurons, and by reducing the number of synapses in certain parts of the brain, both of which can undermine neurological development and impair brain function. It also negatively impacts the child's metabolism and immune system. Children who have chronically high levels of cortisol have been shown to experience more developmental delays – cognitive, motor, and social – than other children. Rethinking the Brain, by Rima Shore, Families and Work Institute; CFOC, 3rd Ed. pg. 57 Standard 2.1.2.1

While it is not always possible for one adult caring for four infants or toddlers to respond immediately to children who are in distress, a caregiver who is not able to immediately respond to a child's needs may still reassure the child by making eye contact and speaking to the child in a reassuring tone of voice.

Enforcement

“Promptly” responding to infants and toddlers who are in emotional distress means responding immediately or as soon as possible if the caregiver is diapering, feeding, or administering first aid to another child. While attending to other children in this way, caregivers can still acknowledge the child in emotional distress by making eye contact with and talking to him/her.

Always Level 2 Noncompliance.

(15) Awake infants and toddlers shall receive positive physical stimulation and positive verbal interaction with a caregiver at least once every 20 minutes.

Rationale / Explanation

Opportunities for active learning are vitally important for the development of motor skills and sensory motor intelligence. In addition, children's cognitive development depends in large part on their developing language

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skills. The richness of a child's language increases when it is nurtured by verbal interactions and learning experiences with adults and peers. CFOC, 3rd Ed. pgs. 57-59 Standards 2.1.2.2, 2.1.2.3

Enforcement

Always Level 2 Noncompliance.

- (16) Awake infants and toddlers shall not be confined for more than 30 minutes in one piece of equipment, such as swings, high chairs, cribs, play pens, or other similar pieces of equipment.**

Rationale / Explanation

The purpose of this rule is to ensure that children have the freedom of movement needed to develop basic motor skills, such as crawling, standing, walking, and climbing.

Enforcement

Always Level 2 Noncompliance.

- (17) Mobile infants and toddlers shall have freedom of movement in a safe area.**

Rationale / Explanation

The purpose of this rule is to ensure that children have the freedom of movement in a safe environment needed to develop basic motor skills, such as crawling, standing, walking, and climbing.

Enforcement

Always Level 2 Noncompliance.

- (18) All toys used by infants and toddlers shall be cleaned and sanitized:**
- (a) weekly;**
 - (b) after being put in a child's mouth before another child play with it; and**
 - (c) after being contaminated by body fluids.**

Rationale / Explanation

Contamination of toys and other objects in child care areas plays a role in the transmission of disease in child care settings. The purpose of this rule is to prevent the spread of disease. All toys can spread disease when children touch the toys after putting their hands in their mouth during play or eating, or after toileting with inadequate handwashing.

Small toys with hard surfaces can be set aside for cleaning by putting them into a dishpan labeled "soiled toys." This dish pan can contain soapy water to begin removal of soil, or it can be a dry container used to hold toys until they can be cleaned later. (In order to use this method, there must be enough toys to rotate them through the cleaning process.) Using a mechanical dishwasher is an acceptable labor-saving approach for plastic toys as long as the dishwasher can clean and sanitize the surfaces. CFOC, 3rd Ed. pgs. 116-118 Standards 3.3.0.1, 3.3.0.2

Enforcement

Always Level 2 Noncompliance.