

R430-90-24 and R430-50-24: INFANT AND TODDLER CARE

Purpose

This section provides rules and information about caring for children ages birth to 24 months.

General Information

Infants need quiet, calm environments, away from the stimulation of older children and other groups. Toddlers are relatively new at basic motor skills such as walking, climbing, and running, and have slower reaction times. Both infants and toddlers are smaller than older children. Because of these developmental differences, mixing infants or toddlers with older, larger, and more physically developed children places the infants and toddlers at increased risk for unintentional injuries, such as being run in to, being knocked down, being pushed, shoved, sat on, etc. *CFOC, 3rd Ed. pg. 59 Standard 2.1.2.4.*

Licensed Family 90-24:

If the licensee accepts infants or toddlers for care, the following applies:

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

Residential Certificate 50-24:

If the certificate holder cares for infants or toddlers, the following applies:

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

Rationale/Explanation

Propping bottles can cause choking and aspirating, 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.

Assessment

If the caregiver is holding the child and they use a device such as, a Beebo, to hold the bottle, they will be considered in compliance with this rule.

Licensed Family 90-24 and Residential Certificate 50-24:

- (2) A 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

Always Level 3 Noncompliance.

Assessment

If a child 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.

Licensed Family 90-24 and Residential Certificate 50-24:

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

Always Level 2 Noncompliance.

Assessment

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

These items **must be** cut into small pieces:

bananas	frozen green beans	meatballs
cheese	fruit chunks	meat chunks
grapes	hot dogs	vegetable chunks
fresh beans	marshmallows	

These items are **not** required to be cut into small pieces:

bread	cupcakes	sandwiches
burritos	ice cream cones	shredded cheese
cooked pasta	leafy vegetables	tacos
cookies	muffins	tater tots
crackers	pizza	teething biscuits

Licensed Family 90-24 and Residential Certificate 50-24:

- (4) If there is more than one infant or toddler in care, baby food, formula, and breast milk for each child that is brought from home must be labeled with the child's name or another unique identifier.

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. 173-174 Standard 4.3.1.12*

Enforcement

Always Level 3 Noncompliance.

Assessment

Powdered formula or dry food such as cereal that is brought from home should be labeled with the child's name or another unique identifier.

Licensed Family 90-24 and Residential Certificate 50-24:

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

Rationale/Explanation

The purposes of this rule are to ensure that a child does 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.

Licensed Family 90-24 and Residential Certificate 50-24:

- (5) Baby food, formula, and breast milk that is brought from home for an individual child's use must be:
- (b) 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 a child does 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.

Assessment

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.

Preparation of food includes, mixing a powder with a liquid, opening a jar of food, or removing frozen breast milk from the freezer.

Licensed Family 90-24:

- (6) The licensee shall ensure that formula and milk, including breast milk, is discarded after each feeding, or within two hours of initiating a feeding.

Residential Certificate 50-24:

- (6) The certificate holder shall ensure that formula and milk, including breast milk, is discarded after each feeding, or within two hours of initiating a feeding.

Rationale/Explanation

The purpose of this rule is to prevent children from eating spoiled milk or formula, and to prevent the spread of disease. Bacteria introduced by saliva makes milk consumed over a period of more than an hour unsuitable and unsafe for consumption. *CFOC, 3rd Ed. pgs. 165-166 Standard 4.3.1.3, pgs. 167-168 Standard 167-169 Standard 4.3.1.5, pgs. 170-171 Standard 4.3.1.8*

Enforcement

Level 2 Noncompliance: if failure to follow this rule results in a child being served spoiled milk or formula.

Level 3 Noncompliance otherwise.

Licensed Family 90-24 and Residential Certificate 50-24:

- (7) To prevent burns, a provider shall shake each heated bottle and test it for temperature before the bottle is fed to a child.

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 a 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.

Licensed Family 90-24 and Residential Certificate 50-24:

- (8) If there is more than one infant or toddler in care, pacifiers and bottles shall be:
- (a) labeled with each child's name or another unique identifier; or
 - (b) washed and sanitized after each individual use, before use by another child.

Rationale/Explanation

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

Always Level 3 Noncompliance.

Assessment

If labeling rubs off plastic items, caregivers can scratch the child's name or initials into the item with a safety pin or other sharp object or attach a clip with a short ribbon that is labeled with the child's name or initials.

If each child is assigned a different color, caregivers may use color coded pacifiers, bottles, or cups instead of labeling each with the child's name.

Boiling water can be used to sanitize baby bottles and pacifiers. The items should be submerged in boiling water for 5 minutes to effectively sanitize.

Licensed Family 90-24:

- (9) The licensee shall ensure that only one infant or toddler occupies any one piece of equipment, such as a crib, playpen, stroller, or swing, at any time, unless the equipment has individual seats for more than one child.

Residential Certificate 50-24:

- (9) The certificate holder shall ensure that only one infant or toddler occupies any one piece of equipment, such as a crib, playpen, stroller, or swing, 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

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

Level 3 Noncompliance otherwise.

Licensed Family 90-24:

- (10) The licensee shall ensure that infants sleep in equipment designed for sleep, such as a crib, bassinet, porta-crib or play pen. The licensee shall ensure that infants are not placed to sleep on mats or cots, or in bouncers, swings, car seats, or other similar pieces of equipment, unless the licensee has written permission from the infant's parent.

Residential Certificate 50-24:

- (10) The certificate holder shall ensure that infants sleep in equipment designed for sleep, such as a crib, bassinet, porta-crib or play pen. The certificate holder shall ensure that infants are not placed to sleep on mats or cots, or in bouncers, swings, car seats, or other similar pieces of equipment, unless the certificate holder has written permission from the infant's parent.

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

Always Level 1 Noncompliance.

Assessment

A bed is considered a similar piece of equipment that caregivers should not place infants on to sleep.

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.

Even if the caregiver is sitting next to the child, infants may not sleep in equipment not designed for sleeping such as, couches, chairs or beds.

Licensed Family 90-24:

- (11) The licensee shall ensure that each crib used by a child in care:
- (a) has a tight fitting mattress;

Residential Certificate 50-24:

- (11) The certificate holder shall ensure that each crib used by a child in care:
- (a) has a tight fitting mattress;

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

Always Level 2 Noncompliance.

Assessment

To determine a mattress is tight fitting, Licensing Specialists will move the crib mattress to one corner of the crib and as close as possible to the head or foot of the crib. They will then place the choke tube in the vertical position between the crib and middle of the remaining sides of the mattress. If the tube fits entirely in the opening, the mattress is not tight fitting.

Sleeping children will not be woken up to assess cribs or mattresses.

As long as it is flush with the top of the mattress, wood can be added to the frame of a crib to create a tight fitting mattress.

Because they have thin mats, porta-cribs will not be assessed for this rule.

Licensed Family 90-24:

- (11) The licensee shall ensure that each crib used by a child in care:
- (b) has slats spaced no more than 2-3/8 inches apart;

Residential Certificate 50-24:

- (11) The certificate holder shall ensure that each crib used by a child in care:
- (b) has 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

Always Level 2 Noncompliance

Licensed Family 90-24:

- (11) The licensee shall ensure that each crib used by a child in care:
- (c) has at least 20 inches from the top of the mattress to the top of the crib rail, or at least 12 inches from the top of the mattress to the top of the crib rail if the child using the crib cannot sit up without assistance;

Residential Certificate 50-24:

(11) The certificate holder shall ensure that each crib used by a child in care:

- (c) has at least 20 inches from the top of the mattress to the top of the crib rail, or at least 12 inches from the top of the mattress to the top of the crib rail if the child using the crib cannot sit up without assistance;

Rationale/Explanation

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

Always Level 2 Noncompliance.

Assessment

Cribs, play-pens, play-yards, and porta-cribs are all sleeping equipment that will be assessed as cribs.

The head of a mattress cannot be propped when it makes the distance between the mattress and the top of the crib railing less than 20 inches.

If the side of the crib is not in the up position and there is not at least 20 inches from the mattress to the top of the railing, this rule will be considered out of compliance. This is the case even if the provider is sitting next to the crib.

Licensed Family 90-24:

(11) The licensee shall ensure that each crib used by a child in care:

- (d) does not have strings, cords, ropes, or other entanglement hazards strung upon the crib rails or within reach of the child; and

Residential Certificate 50-24:

(11) The certificate holder shall ensure that each crib used by a child in care:

- (d) does not have strings, cords, ropes, or other entanglement hazards strung upon the crib rails or within reach of the child; and

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*

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

Enforcement

Always Level 2 Noncompliance.

Assessment

Cribs, play-pens, play-yards, and porta-cribs are all sleeping equipment that will be assessed as cribs.

Mobles over cribs are a strangulation hazard if the strings are longer than 12 inches and less than 36 inches from the crib mattress.

Licensed Family 90-24:

- (11) The licensee shall ensure that each crib used by a child in care:
(e) meet CPSC crib Standards.

Residential Certificate 50-24:

- (11) The certificate holder shall ensure that each crib used by a child in care:
(e) meet CPSC crib Standards.

Level 1 Noncompliance if children in care are using cribs that do not meet the CPSC standard.

Level 3 Noncompliance if a Licensee does not have documentation for cribs purchased after July 2011.

Assessment

When assessing compliance with CPSC crib standards, check the tracking label or registration form for the crib. When the label or form shows the crib was manufactured after June 28, 2011, the crib is in compliance with the CPSC standard. When Owners/Directors/Designees state the crib was purchased after June 28, 2011 and they do not have a tracking label or registration form, instruct them to contact the CPSC's Office of Compliance and Field Operations at jjirgl@cpsc.gov and request documentation that the crib was purchased after June 28, 2011. It is unlikely that cribs purchased prior to June 28, 2011 are in compliance with CPSC standards but Owners/Directors/Designees can contact the manufacturer or retailer to see if the crib has been certified.

Licensed Family 90-24:

- (12) The licensee shall ensure that infants are not placed on their stomachs for sleeping, unless there is documentation from a health care provider for treatment of a medical condition.

Residential Certificate 50-24:

- (12) The certificate holder shall ensure that infants are not 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 Strandard 3.1.4.1*

Enforcement

Always Level 1 Noncompliance.

Licensed Family 90-24:

- (13) The licensee shall ensure that each infant and toddler is allowed to follow his or her own pattern of sleeping and eating.

Residential Certificate 50-24:

- (13) The certificate holder shall ensure that each infant and toddler is allowed to follow his or her own pattern of sleeping and eating.

Rationale/Explanation

Feeding infants on demand meets their nutritional and emotional needs and helps to ensure the development of trust and feelings of security. Allowing children to sleep when they are tired meets their basic physical need for rest. Children's ability to develop trust can be impaired when their basic physical needs are not met in a timely manner. *CFOC, 3rd Ed. pgs. 100-101 Standards 3.1.4.4, 3.1.4.5, pg. 118 Standard 4.3.1.2 pgs. 164-165 Standard 4.3.1.2*

Children's brain development can also be harmed by excess levels of cortisol, which result when children are under stress for extended periods of times because their immediate physical needs are not met. 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*

Enforcement

Always Level 3 Noncompliance.

Assessment

Toddlers may begin to be eased into group schedules for eating and napping. However any toddler who is tired must be allowed to rest and any toddler who is hungry must be given something to eat.

Licensed Family 90-24, and Residential Certificate 50-24:

(14) Infant 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. 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. 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.

Assessment

An infant walker with wheels cannot be used or accessible any time there is an infant or toddler in care.

A walker is a device the child sits in using their legs to move themselves. If a piece of equipment has wheels but does not move the child around the room, the equipment will not be considered a walker.

Licensed Family 90-24:

(15) The licensee shall ensure that infants and toddlers do not have access to objects made of styrofoam.

Residential Certificate 50-24:

(15) The certificate holder shall ensure that infants and toddlers do 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

Always Level 2 Noncompliance.

Assessment

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

Licensed Family 90-24:

- (16) The licensee shall ensure that a provider responds 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.

Residential Certificate 50-24:

- (16) The certificate holder shall ensure that a provider responds 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

Always Level 2 Noncompliance.

Licensed Family 90-24:

- (17) The licensee shall ensure that awake infants and toddlers receive positive physical stimulation and positive verbal interaction with a provider at least once every 20 minutes.

Residential Certificate 50-24:

- (17) The certificate holder shall ensure that awake infants and toddlers receive positive physical stimulation and positive verbal interaction with a provider 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 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.

Licensed Family 90-24:

- (18) The licensee shall ensure that awake infants and toddlers are not 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.

Residential Certificate 50-24:

- (18) The certificate holder shall ensure that awake infants and toddlers are not 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.

Licensed Family 90-24:

- (19) The licensee shall ensure that mobile infants and toddlers have freedom of movement in a safe area.

Residential Certificate 50-24:

- (19) The certificate holder shall ensure that mobile infants and toddlers 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.

Licensed Family 90-24:

- (20) To stimulate their healthy development, there shall be safe toys accessible to infants and toddlers. The licensee shall ensure that there are enough toys for each child in the group to be engaged in play with toys.

Residential Certificate 50-24:

- (20) To stimulate their healthy development, there shall be safe toys accessible to infants and toddlers. The certificate holder shall ensure that there are enough toys for each child in the group to be engaged in play with toys.

Enforcement

Always Level 2 Noncompliance.

Licensed Family 90-24:

- (21) The licensee shall ensure that all toys used by infants and toddlers are cleaned and sanitized:
- (a) weekly;
 - (b) after being put in a child's mouth before another child uses it; and
 - (c) after being contaminated by any body fluid.

Residential Certificate 50-24:

- (21) The certificate holder shall ensure that all toys used by infants and toddlers are cleaned and sanitized:
- (a) weekly;
 - (b) after being put in a child's mouth before another child uses it; and
 - (c) after being contaminated by any body fluid.

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 dishpan 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 3 Noncompliance.