**Rules for**

# Registered Family Child Care Homes

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Oregon Department of Education
Early Learning Division

Office of Child Care

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# DIVISION 205
# REGISTERED FAMILY CHILD CARE HOMES

## 414-205-0000 Purpose

(1) Oregon Administrative Rules (OAR) 414-205-0000 through 414-205-0170 are the Office of Child Care's (OCC) minimum requirements for registering family child care providers. The purpose of these rules is to protect the health, safety, and well-being of children when cared for outside their own homes.

(2) Registration is required for persons who provide child care:

(a) On other than an occasional basis; and

(b) To more than three children from more than one family at any one time, other than the person's children subject to the limits in OAR 414-205-0065.

(3) Individuals who are not enrolled in the Central Background Registry because of removal, denial for cause, or voluntary surrender in lieu of legal action, may only care for their own children or children related within the fourth degree as determined by civil law, pursuant to ORS 329A.252.

(4) These rules do not apply to care provided:

(a) In the home of the child;

(b) To three or fewer children, not including the provider's children subject to the limits in OAR 414-205-0065 except as provided in 414-205-0000(2)(c);

(c) To children from one family, not including the provider's children except as provided in 414-205-0000(2)(f);

(d) On an occasional basis by a person not ordinarily engaged in providing child care except as provided in 414-205-0000(2)(e);

(e) By the child's parent, legal guardian, or person acting in place of a parent;

(f) By a person related to the child care children by blood, marriage, or adoption; or

(g) By a person who is a member of the child's extended family, as determined by OCC on a case-by-case basis or;

(h) By a person providing care for preschool children that is primarily educational for four hours or less per day and where no preschool age child is present at the facility for more than four hours per day, except as provided in 414-205-0000(2)(d).

(5) Any family child care provider exempt from registration may apply for registration.

(6) These rules apply only during the hours the provider is conducting the child care business.

## 414-205-0010 Definitions

(1) "Caregiver" means any person, including the provider, who cares for the children in the registered family child care home and works directly with the children, providing care, supervision and guidance.

(2) "Central Background Registry" (CBR) means OCC's Registry of individuals who have been approved to be associated with a child care facility in Oregon pursuant to ORS 329A.030 and OAR 414-061-0000 through 414-061-0120.

(a) "CBR Enrollment" means approval for a 5 year period to be enrolled in the CBR following an Oregon State Police criminal records check, child abuse and neglect records check, checks of adult protective services and foster care certification and an FBI records check.

(b) "CBR Conditional Enrollment" means temporary approval to be enrolled in the CBR following a Oregon State Police records check and child abuse and neglect records check but prior to receipt by OCC of the results of the required FBI records check.

(3) "Child Care" means the care, supervision and guidance on a regular basis of a child, unaccompanied by a parent, legal guardian or custodian, during a part of the 24 hours of the day, with or without compensation.

(4) "Child Care Child" means a child at least six weeks of age and under 13 years of age, or a child under 18 years of age with special needs. The child does not reside in the home and the provider has supervisory responsibility for the child in the temporary absence of the parent.

(5) "Child with Special Needs" means a child under 18 years of age who requires a level of care over and above the norm for their age due to a physical, developmental, behavioral, mental or medical disability.

(6) "Civil Penalty" means a fine imposed by OCC on a provider for violation on these rules.

(7) "Communicable Disease" means an illness caused by an infectious agent or its toxins.

(8) “Disinfecting” means using a process for destroying or irreversibly inactivating harmful organisms, including bacteria, viruses, germs and fungi.

(9) "Family" means a group of individuals related by blood, marriage or adoption, or individuals whose functional relationships are similar to those found in such associations.

(10) "Infant" means a child who is at least six weeks of age up to 12 months of age.

(11) “Kindergarten-Age Child” means a child eligible to attend kindergarten in a public school. A kindergarten-age child is considered a school-age child.

(12) "New Application" means a registration application that has been filed by an applicant who has never had an active registration.

(13) "Night Care" means care given to a child who sleeps at the family child care home for all or part of the night.

(14) “OCC” means the Office of Child Care, Early Learning Division of the Department of Education.

(15) "Occasional" means infrequently or intermittently, including but not limited to care that is provided during summer or other holiday breaks when children are not attending school, but not to exceed 70 calendar days in a year.

(16) "Oregon Registry" means the voluntary registry at the Oregon Center for Career Development in Childhood Care and Education at Portland State University that documents the training and education of individuals who work in childhood care and education.

(17) “Outbreak of Communicable Disease” means two cases from separate households associated with a suspected common source.

(18) “Premises” means the structure that is identified on the application, including indoors and outdoors and space not directly used for child care.

(19) "Preschool-Age Child" means a child who is 36 months of age up to eligible to attend kindergarten in a public school.

(20) "Provider" means a resident of the registered family child care home who is responsible for the children in care; is the children's primary caregiver; and the person whose name is on the certificate of registration.

(21) "Registered Family Child Care Home" means the residence of the provider, who has a current Family Child Care Registration at that address and who provides care in the family living quarters.

(22) "Registration" means the document a family child care provider is issued by OCC to operate a family child care home where care is provided in the family living quarters of the provider's home pursuant to ORS 329A.330 and OAR 414-205-0000 through 414-205-0170. Registration is limited to one provider at one address.

(23) "Renewal Application" means a registration application that has been filed by a currently registered family child care provider who wishes to continue registration.

(24) "Reopen Application" means a registration application that has been filed by an applicant whose registration is expired or closed, including those closures resulting from an address change.

(25) “Restrictable Disease” means an illness or infection that would prohibit the child from attending child care.

(26) “Sanitizing” means using a treatment that provides enough heat or concentration of chemicals for enough time to reduce the bacterial count, including disease producing organisms, to a safe level on utensils, equipment and toys.

(27) "School-Age Child" means a child eligible to attend kindergarten or above in public school. This includes the months from the end of the prior school year to the start of the kindergarten school year.

(28) "Serious Complaint" means a complaint filed against:

(a) A registered family child care provider by a person who alleges that:

(A) Children are in imminent danger;

(B) There are more children in care than allowed by law;

(C) Provider is engaging in behavior prohibited under OAR 414-205-0085(6);

(D) Children are not being supervised;

(E) Multiple or serious fire, health or safety hazards are present in the home;

(F) Extreme unsanitary conditions are present in the home; or

(G) Adults are in the home who are not enrolled in OCC’s CBR; or

(b) An individual providing child care, as defined by ORS 329A.250(4), who is not a registered family child care provider by a person who has alleged that there are more children in care than allowed by law.

(29) "Serious Injury or Incident" means any of the following:

(a) Injury requiring surgery;

(b) Injury requiring admission to a hospital;

(c) Injury requiring emergency medical attention;

(d) Choking and unexpected breathing problems;

(e) Unconsciousness;

(f) Concussion;

(g) Poisoning;

(h) Medication overdose;

(i) Broken bone;

(j) Severe head or neck injury;

(k) Chemical contact in eyes, mouth, skin, inhalation or ingestion;

(l) All burns;

(m) Allergic reaction requiring administration of Epi-Pen;

(n) Severe bleeding or stitches;

(o) Shock or confused state;

(p) Near-drowning.

(30) “Serious Violation” means OCC has made a valid finding when assessing a serious complaint that alleges:

(a) Children are in imminent danger;

(b) There are more children in care than allowed by law;

(c) Provider is engaging in behavior prohibited under OAR 414-205-0085(6);

(d) Children are not being supervised;

(e) Multiple or serious fire, health or safety hazards are present in the home;

(f) Extreme unsanitary conditions are present in the home; or

(g) Adults are in the home who are not enrolled in OCC's CBR; or

(h) An individual is providing child care as defined by ORS 329A.250(4) without registering with the Office of Child Care of the Department of Education.

(31) "Substitute Provider" means a person who acts as the children's primary caregiver in the registered family child care home in the temporary absence of the provider.

(32) "Toddler" means a child who is at least 12 months of age but is not preschool-age.

(a) "Younger Toddler" means a child who is at least 12 months of age but is under 24 months of age.

(b) "Older toddler" means a child who is at least 24 months of age but is not yet preschool-age.

(33) "Unsupervised Access to Children" means contact with children that provides the person opportunity for personal communication or touch when not under the direct supervision of a child care provider or staff with supervisory authority.

(34) "Useable Exit" means an unobstructed door or window through which the provider and the children can evacuate the home in case of a fire or emergency. Doors must be able to be opened from the inside without a key.

(a) For homes built before July 1, 2010, window openings must be at least 20 inches wide and at least 22 inches in height, with a net clear opening of five square feet (at least 720 square inches) and a sill no more than 48 inches above the floor.

(b) For homes built after July 1, 2010, window openings must be at least 20 inches wide and at least 24 inches in height, with a net clear opening of five square feet (at least 720 square inches) and a sill no more than 44 inches above the floor.

## 414-205-0020 Application for Registration

(1) The applicant must apply for registration on the form(s) supplied by OCC. The original form(s) must be submitted to OCC for processing.

(2) Persons submitting new applications must attend a family child care overview session prior to submitting their application to OCC.

(3) Persons interested in submitting an application must meet the training requirements outlined in OAR 414-205-0055.

(4) An application for registration is required:

   (a) For a new registration;

   (b) For renewing a registration; and

   (c) For reopening a registration.

(5) There is a non-refundable filing fee of $30 for each application. If the provider submits documentation that the provider's family income is below 100% of the Federal Poverty Level, the fee may be reduced.

(6) All civil penalties must be paid in full.

(7) To determine if requirements are met, the applicant/provider may be required to supply additional information or permit OCC, a fire marshal, or a public health official to assess the home and/or review child care records.

(8) Providers must satisfactorily complete an on-site health and safety review conducted by OCC prior to issuance of a new, renewal or reopen registration. The review will ensure that the provider is in compliance with the rules related to health, safety and sanitation.

(9) If an application for renewal is received by OCC at least 30 days prior to the expiration date of the current registration, the current registration, unless officially revoked, remains in effect until OCC has acted on the application for renewal and has given notice of the action taken.

## 414-205-0035 General Requirements

(1) The home in which child care is provided must be the residence of the provider.

(2) The provider may not hold a medical marijuana card, grow marijuana, or be a distributor of marijuana.

(3) Registration is limited to one provider per household.

(4) A registration applies to only the person and address on the certificate of registration and is not transferable to another location or individual.

(5) The registration is valid for a maximum of two years. The registration period begins with the effective date shown on the certificate of registration. A provider may not care for more than three (3) children, other than the provider's own children, at any one time prior to receiving a certificate of registration from OCC.

(6) OCC registration records are open to the public on request. However, information protected by state or federal law will not be disclosed.

(7) The name, address, telephone number, and registration status of providers is public information. However, OCC may withhold from the public a provider's address and telephone number if the provider makes a written request documenting that disclosure of the address and/or telephone number would endanger him/her or a family member living in the home (OAR 137-004-0800). The request must be on a form supplied by OCC.

(8) The provider shall display the following near the entrance, or in some other area of the home where they may be clearly viewed by parent(s) of children in care:

   (a) The Certificate of Registration; and

   (b) Providers must post all serious valid complaint and serious non-compliance letters for 12 calendar months

(9) The provider shall have no other employment, either in or out of the home, during the hours children are in care.

(10) OCC staff may conduct an unannounced monitoring visit at least once during the license period.

(11) The provider or substitute must allow a representative from the Office of Child Care access to the premises any time child care children are present.

(12) The provider or substitute shall allow an inspection of all areas of the facility that are accessible to child care children, and a health and safety review of other areas of the facility to ensure the health and safety of child care children.

(13) The provider must allow parents or legal guardians of child care children access to the home during the hours their child(ren) are in care.

(14) The provider must comply with local, state and federal laws related to immunizations, child care restrictable diseases, child safety systems and seat belts in vehicles, bicycle safety, civil rights laws, and the Americans with Disabilities Act.

(15) Any caregiver who has reason to believe that any child has suffered abuse (physical injury, mental injury, neglect that leads to physical harm, sexual abuse and/or exploitation, or threat of harm) must report the information to the Department of Human Services Child Welfare (DHS) or to a law enforcement agency. By statute, this requirement applies 24 hours per day.

(16) The provider must notify parents if there will be a substitute provider and the caregiver's name. In the event of an emergency, a good faith effort will be made to notify parents that a substitute will be caring for the children.

(17) The provider must notify parents if the children will be away from the home for any part of the day for visits, field trips or any other activity off the premises and the name of the caregiver.

(18) If an applicant or a provider wishes to provide child foster care, the provider must receive approval from OCC and DHS, prior to placement of the foster child(ren).

(19) Registered providers shall comply with all conditions placed on their license.

(20) Information provided to OCC on applications, in records or reports, or any other written or verbal communication, shall be current, complete and accurate.

(21) Providers shall immediately notify all parents of any closure of the active license.

(22) Providers must have parent(s) or guardian(s) of each child enrolled in the registered family child care home, sign a declaration form approved by the Office of Child Care verifying they have reviewed a copy of the current license certificate. The declaration shall be updated any time there has been an exception or condition added to the license.

(23) Providers must post the Early Learning Division Website [www.oregonearlylearning.com] and phone number [1-800-556-6616], and a statement advising parents that they can access information about their child care provider on the child care safety portal.

(24) The provider shall report to OCC:

(a) Any death of a child while in care, within 24 hours;
(b) Within 24 hours:

(A) Any child that is lost or missing from the premises;

(B) Any child that is left behind on a facility excursion;

(C) Any child that is left unattended on the premises;

(D) Any child that is left alone on the playground; or

(E) Any child that is left alone in a vehicle.

(c) Any serious injury or incident, as defined in OAR 414-205-0010(29) within 5 calendar days after the occurrence. This does not include:

(A) Injuries for which a child is evaluated by a professional as a precaution;

(B) Injuries for which first aid is administered at the facility, but no further treatment by a medical professional is warranted; or

(C) Medical events due to routine, ongoing medical issues, such as asthma or seizures.

(d) Any damage to the building that affects the provider's ability to comply with these requirements, within 48 hours of the occurrence.

(e) Any animal bites to a child within 48 hours of occurrence.

(25) The written emergency plan must be given to parents of children in care.

(26) The Office of Child Care may notify parent(s) or guardian(s) of children under 12 months of age enrolled in the registered family child care home of any valid non-compliance with regulations for safe sleep included in OAR 414-205-0090(11).

## 414-205-0040 The Provider and Other Persons in the Home

(1) The registered provider and any substitute provider shall:

(a) Be at least 18 years old,

(b) Have competence, sound judgment and self-control when working with children, and

(c) Be mentally, physically and emotionally capable of performing duties related to child care.

(2) No one shall have access to child care children who has demonstrated behavior that may have a detrimental effect on a child. Residents of the home are considered to have access to the child care children even if they are not generally at home during child care hours.

(3) The applicant and other residents of the home 18 years of age or older must be enrolled in OCC's CBR prior to the issuance of a registration. Residents of the home who are under 18 years of age must be enrolled in the Registry by their 18th birthday.

(4) The provider must receive confirmation from OCC that an individual 18 years of age or over, is enrolled or conditionally enrolled in the CBR before the individual can:

(a) Reside on the premises;

(b) Stay overnight on the premises for longer than 14 consecutive days, not to exceed a total of 30 days in a calendar year;

(c) Assist the provider; or

(d) Volunteer in the child care program.

(5) Individuals with conditional enrollment in the CBR shall not have unsupervised access to children.

(6) If additional information is needed to assess a person's ability to care for children or to have access to children, OCC may require references, an evaluation by a physician, counselor, or other qualified person, or other information.

(7) Any visitor to the home or other adult who is not enrolled in the CBR may not have unsupervised access to children.

(8) The provider, substitutes and other individuals that are required to be enrolled in the CBR must maintain current enrollment in the CBR at all times while the registered family child care license is active.

(9) Individuals whose CBR enrollment has been revoked, denied or suspended, may not live in the home; be on the premises during child care hours; or have contact with child care children.

(10) If any person, who is enrolled in the CBR, has been charged with, arrested for, or a warrant is out for any of the crimes which OCC has determined indicate behavior which may have a detrimental effect on a child, with final disposition not yet reached, registration may be denied or suspended until the charge, arrest, or warrant has been resolved if the person continues to operate, be employed in or reside in the home, or have access to children in the home.

(11) The provider shall have a written plan to ensure that individuals who are not enrolled or conditionally enrolled in the CBR and are on the child care premises shall not have unsupervised access to children.

(12) The provider shall maintain a log of arrival and departure times of all individuals 18 and older who are not enrolled or conditionally enrolled in the CBR and enter the home while child care children are present, excluding persons authorized to drop off and pick up a child care child.

(13) Prior to substituting for the provider, a caregiver must:

(a) Be familiar with the requirements for registration and agree to comply with them;

(b) Be enrolled in the CBR;

(c) Comply with all the requirements placed on the provider, except those in OAR 414-205-0055(1)(a), (2)(c), (3) (c);

(d) Have current certification in first aid and infant and child cardiopulmonary resuscitation (CPR). The certifications must be current while the caregiver is substituting for the provider. CPR training must have practical hands-on instruction. CPR courses that involve an on-line component with hands-on instruction may be accepted. Strictly on-line CPR training is not acceptable;

(e) Have completed a minimum of two hours of training on child abuse and neglect that is specific to Oregon law;

(f) Have current food handler's certification, if preparing or serving food to children;

(g) Have completed OCC approved health and safety training; and

(h) Have completed OCC approved safe sleep training.

## 414-205-0055 Training Requirements

(1) When a person submits a new application for registration as a family child care provider, OCC shall, prior to approving the registration, receive evidence from the person that the person has:

(a) Completed the Family Child Care Overview session;

(b) A current certification in first aid and infant and child CPR. CPR training must have practical hands-on instruction. CPR courses that involve an on-line component with hands-on instruction may be accepted. Strictly on-line CPR training is not acceptable.

(c) A current food handler certification pursuant to ORS 624.570;

(d) Have completed a minimum of two hours of training on child abuse and neglect that is specific to Oregon law;

(e) Completed OCC approved health and safety training; and

(f) Completed OCC approved safe sleep training.

(2) When a registered family child care provider submits a renewal application, the OCC shall, prior to approving it, receive evidence from the provider that the provider has:

(a) A current certification in first aid and infant and child CPR. CPR training must have practical hands-on instruction. CPR courses that involve an on-line component with hands-on instruction may be accepted. Strictly on-line CPR training is not acceptable.

(b) A current food handler certification pursuant to ORS 624.570; and

(c) Completed a minimum of ten hours of training during the two years preceding the renewal date. The training must be related to the core knowledge categories in the Oregon Registry. At least six clock hours of the ten hours of training must be in child development or early childhood education. A training on recognizing and reporting child abuse and neglect will be accepted after five years (and every five years thereafter) as part of the ten clock hours of training required for licensing, but will not be accepted as part of the required child development training hours.

(d) Completed OCC approved health and safety training. If the training is not complete at the time of the application, it must be completed by June 30, 2017.

(A) OCC will accept duplicate training one additional time if it is a Set 2 (intermediate) or Set 3 (advanced) training or above as described by the Oregon Center for Career Development in Childhood Care and Education; and it is not taken within the same license period.

(B) The following core knowledge categories are accepted for the child development and early childhood education requirement: Diversity (D), Family and Community Systems (FCS), Human Growth and Development (HGD), Health Safety and Nutrition (HSN), Learning Environments and Curriculum (LEC), Observation and Assessment (OA), Special Needs (SN), and Understanding and Guiding Behavior (UGB).

(3) When a person submits a reopen application, the OCC shall, prior to approving it, receive evidence from the individual that the individual has:

(a) A current certification in first aid and infant and child CPR. CPR training must have practical hands-on instruction. CPR courses that involve an on-line component with hands-on instruction may be accepted. Strictly on-line CPR training is not acceptable.

(b) A current food handler certification pursuant to ORS 624.570; and

(c) Documentation that individual has ten hours of training related to the Oregon Registry core knowledge categories since the individual's last active child care license was issued. If the individual was previously licensed for less than two years, the training requirements will be prorated as follows: 2.5 hours of training for each six months of the previous license period. A training on recognizing and reporting child abuse and neglect will be accepted again after five years (and every five years thereafter) as part of the ten clock hours of training required for licensing, but will not be accepted as part of the required child development training hours.

(d) OCC will accept duplicate training one additional time if it is a Set 2 (intermediate) or Set 3 (advanced) training or above as described by the Oregon Center for Career Development in Childhood Care and Education; and it is not taken within the same license period.

(e) Completed OCC approved health and safety training.

(f) Completed OCC approved safe sleep training. If the reopen is the result of an address change, the person must complete the OCC approved safe sleep training by January 1, 2019.

(4) While the registered family child care license is active, the provider must maintain current certification in first aid, infant and child CPR, food handler training, and must complete annual OCC approved health and safety training curriculum.

(5) All current providers must complete OCC approved safe sleep training by January 1, 2019.

## 414-205-0065 Children in Care

(1) A family child care provider may care for a maximum of 10 children under 13 years of age, or under age 18 if a child with special needs, at any one time. This includes the provider's own children, the child care children, foster children, and any other children for whom the provider is responsible.

(2) Of the 10 children under 13 years of age or under age 18 years of age with special needs, the provider may care for:

(a) A maximum of 6 children preschool age or younger, including the provider's children, of which only 2 children may be under 24 months of age.

(b) Four school-age children, in addition to the six children preschool-age or younger.

(A) More school-age children if there are fewer than 6 children preschool age or younger, as long as there are no more than 10 children in the home at any one time.

(3) Other children, including but not limited to relatives, neighborhood children or friends of the provider's children, are included in the maximum number of 10 children allowed in care if their parents or other adults responsible for supervising them are not present in the home or are not directly supervising their own child(ren).

(4) Visiting children and their parents or others directly supervising them can be in the family child care home only on an occasional basis.

(5) No child younger than 6 weeks of age can be in care in a family child care home. This does not include the provider's child(ren).

## 414-205-0075 Supervision of Children

The provider or a substitute provider is responsible for the children in care. At all times the provider or substitute provider must:

(1) Be within sight or sound of all children;

(2) Be aware of what each child is doing;

(3) Be near enough to children to respond when needed;

(4) Be physically present when there are children under the age of 36 months playing outside; and

(5) Be physically present when kindergarten-age or younger children are playing outside, unless the outside play area is fully fenced and hazard free.

## 414-205-0085 Guidance and Discipline

(1) The provider must have a written policy on guidance and discipline of child care children. The policy must be simple and understandable to the child, the parent(s) and to substitute providers.

(2) The written guidance and discipline policy must be given to all parents.

(3) The guidance and discipline policy shall:

(a) Provide for positive guidance, redirection and the setting of clear boundaries; and

(b) Be designed to help the child develop self-control, self-esteem and respect for others.

(4) Only providers and substitutes shall provide guidance or discipline to child care children.

(5) Guidance and discipline shall be fair, consistently applied, timely and appropriate to the behavior and age of the child. Positive statements or redirection of behaviors shall be used.

(6) The following behaviors by caregivers are prohibited:

(a) Using any form of corporal punishment, including, but not limited to: hitting, spanking, slapping, beating, shaking, pinching or other measures that produce physical pain, or threatening to use any form of corporal punishment;

(b) Using inappropriate forms of restraints, including, but not limited to, tying or binding;

(c) Using non-prescription chemicals for discipline or to control behavior;

(d) Yelling harshly or using profane or abusive language;

(e) Using mental or emotional punishment, including, but not limited to: name calling, ridicule or threats;

(f) Confining a child in an enclosed area (e.g. a locked or closed room, closet or box);

(g) Withdrawal or the threat of withdrawal of food, rest or bathroom opportunities;

(h) Punishing a child for toileting accidents or for refusing to eat food;

(i) Engaging in any form of public or private humiliation, rejecting, terrorizing, neglecting or corrupting a child or any form of emotional abuse; and

(j) Requiring a child to remain silent or inactive for excessive periods of time or removing a child from activities or the group for excessive periods of time.

(7) Parental request or permission to use any form of behavior listed in subsection (6) of this rule, does not give the provider or substitute provider permission to do so.

## 414-205-0090 Program of Activities

(1) The provider must give the children's needs first priority, assuring that they get adequate care and attention.

(2) Providers must make available activities, materials, and equipment for both indoor and outdoor play that provide a variety of experiences geared to the ages and abilities of the child(ren).

(3) The children's activities must allow choice and develop skills based on each child's age and abilities.

(4) A balance of active and quiet play must be provided, both indoors and outdoors.

(5) The provider must have routines for eating, napping, diapering and toileting, with flexibility to respond to the needs of each child.

(6) An individual bed, mat or cot with individual bedding appropriate to the season shall be provided at nap time for each toddler and preschool-age child in the home and for each school-age child who wants to rest.

(a) Family beds or sofas may be used with individual bedding appropriate to the season.

(b) If the parent(s) so request, siblings may share the same bed.

(c) The upper level of bunk beds shall not be used for children under ten years of age.

(d) The upper level of bunk beds may be used for children ten years or older if the bed rail and safety ladder are in place.

(7) Child care children shall not be exposed to more than two hours of screen time per day. All media exposure must be developmentally and age appropriate.

(8) Throughout the day, each infant and toddler shall receive physical contact and individual attention (e.g., being held, rocked, talked to, sung to, and taken on walks inside and outside the home).

(9) The provider must have routines for eating, napping, diapering and toileting, with flexibility to respond to the needs of each child.

(10) Infants shall have a variety of appropriate infant toys stimulating to the senses.

(11) The following safe sleep practices must be followed:

(a) Each infant shall sleep in a crib, portable crib, bassinet or playpen with a clean, non-absorbent mattress. All cribs, portable cribs, bassinets and playpens must comply with current Consumer Product Safety Commission (CPSC) standards;

(b) Bassinets may only be used until the infant is able to roll over on their own;

(c) Each mattress shall:

(A) Fit snugly; and

(B) Be covered by a tightly fitting sheet;

(d) A clean sheet shall be provided for each child;

(e) Infants must be placed on their backs on a flat surface for sleeping;

(f) While on the child care premises, if an infant falls asleep in a place other than their crib, portable crib, bassinet or playpen, the provider must immediately move the infant to an appropriate sleep surface;

(g) No child shall be routinely left in a crib, portable crib, bassinet or playpen except for sleep or rest;

(h) There shall be no items in the crib, portable crib, bassinet or playpen with the infant, except a pacifier (e.g. bottles, toys, pillows, stuffed animals, blankets, bumpers);

(i) Swaddling or other clothing or covering that restricts the child's movement is prohibited;

(j) Clothing or items that could pose a strangulation hazard (e.g. teething necklaces, pacifier attachments, clothing drawstrings) are prohibited; and

(k) Car seats are to be used for transportation only. Children who are asleep in a car seat must be removed upon arrival to the home and placed in an appropriate sleep surface.

## 414-205-0100 Health

(1) All caregivers shall take appropriate precautions to prevent shaken baby syndrome and abusive head trauma.

(2) The home must be a healthy environment for children.

(a) No person shall smoke or carry any lighted smoking instrument, including an e-cigarette or vaporizer in the family child care home or within ten feet of any entrance, exit, or window that opens or any ventilation intake that serves an enclosed area, during child care hours or when child care children are present. No person shall use smokeless tobacco in the family child care home during child care hours or when child care children are present. No person shall smoke, carry any lighted smoking instrument, including an e-cigarette, or vaporizer or use smokeless tobacco in motor vehicles while child care children are passengers.

(b) No one shall consume alcohol on the family child care home premises during child care hours or when child care children are present. No one shall be under the influence of alcohol on the family child care home premises during child care hours or when child care children are present.

(c) Notwithstanding OAR 414-205-0000(5), no one shall possess, use or store illegal controlled substances on the family child care home premises. No one shall be under the influence of illegal controlled substances on the family child care home premises.

(d) Notwithstanding OAR 414-205-0000(5), no one shall grow or distribute marijuana on the premises of the registered family child care home. No adults shall use marijuana on the registered family child care home premises during child care hours or when child care children are present.

(e) No adult under the influence of marijuana shall have contact with child care children.

(f) Notwithstanding OAR 414-205-0000(5), marijuana plants shall not be grown or kept on the registered family child care home premises.

(g) All medical marijuana must be kept in its original container if purchased from a dispensary and stored under child safety lock. All medical marijuana derivatives and associated paraphernalia must be stored under child safety lock.

(h) Effective July 1, 2015, all marijuana, marijuana derivatives and associated paraphernalia must be stored under child safety lock.

(i) There must be at least one flush toilet and one hand-washing sink available to children. Steps or blocks must be available to ensure children can use the toilet and sink without assistance. Drinking water for preparing food, infant formula, drinking or cooking shall not be obtained from bathroom sinks or diaper changing sinks.

(j) The room temperature must be at least 68°F during the hours the child care business is conducted.

(k) Rooms occupied by children must have a combination of natural and artificial lighting.

(l) Floors must be free of splinters, large unsealed cracks, sliding rugs and other hazards.

(3) First aid supplies and a chart or handbook of first aid instructions shall be maintained in one identified place and kept out of reach of children.

(a) The first aid supplies shall include: band aids, adhesive tape, sterile gauze pads, soap or sealed antiseptic towelettes or solution to be used as a wound cleaning agent, scissors, disposable plastic gloves for handling blood spills, a solution for disinfecting after a blood spill, a sanitary temperature taking device and CPR mouth guards.

(b) A first aid kit and a copy of each child's emergency medical information including a medical release form shall be taken any time the caregiver is transporting child care children or taking child care children on field trips.

(4) Infants must be laid on their backs on a flat surface for sleeping.

(5) Illness:

(a) A provider shall not admit or retain in care, except with the written approval of the local health office, a child who:

(A) Is diagnosed as having or being a carrier of a child care restrictable disease, as defined in Oregon Health Authority administrative rule; or

(B) Has one of the following symptoms or combination of symptoms or illness;

(i) Fever over 100°F, taken under the arm;

(ii) Diarrhea (more than one abnormally loose, runny, watery or bloody stool);

(iii) Vomiting;

(iv) Nausea;

(v) Severe cough;

(vi) Unusual yellow color to skin or eyes;

(vii) Skin or eye lesions or rashes that are severe, weeping or pus-filled;

(viii) Stiff neck and headache with one or more of the symptoms listed above;

(ix) Difficulty breathing or abnormal wheezing;

(x) Complaints of severe pain.

(b) A child, who, after being admitted into child care, shows signs of illness, as defined in this rule, shall be separated from the other children, and the parent(s) notified and asked to remove the child from the provider's home as soon as possible.

(6) If a child has mild cold symptoms that do not impair his/her normal functioning, the child may remain in the provider's home and the parent(s) notified when they pick up their child

(7) Parents must be notified if their child is exposed to an outbreak of a communicable disease.

(8) Prescription and non-prescription medication shall only be given to a child if the provider has written authorization from the parent, as required in OAR 414-205-0130(2)(b).

(9) Prescription and non-prescription medications must be properly labeled and stored.

(a) Non-prescription medications or topical substances must be labeled with the child's name.

(b) Prescription medications must be in the original container and labeled with the child's name, the name of the drug, dosage, directions for administering, and the physician's name.

(c) Medication requiring refrigeration must be kept in a separate, tightly covered container, marked "medication," in the refrigerator.

(10) Sunscreen is considered a non-prescription medication and may be used for child care children under the following conditions:

(a) Providers must obtain written parental authorization prior to using sunscreen.

(b) One container of sunscreen may be used for child care children unless a parent supplies an individual container for their child. The sunscreen shall be applied in a manner that prevents contaminating the container.

(A) Parents must be informed of the type of product and the sun protective factor (SPF).

(B) Parents must be given the opportunity to inspect the product and active ingredients.

(c) If sunscreen is supplied for an individual child care child, the sunscreen must be labeled with the child's first and last name and must be used for only that child.

(d) Providers must reapply sunscreen every two hours while the child care children are exposed to the sun.

(e) Providers shall use a sunscreen with an SPF of 15 or higher and must be labeled as "Broad Spectrum".

(f) Providers shall not use aerosol sunscreens on child care children.

(g) Sunscreen shall not be used on child care children younger than six months.

(h) Child care children over six years of age may apply sunscreen to themselves under the direct supervision of the provider or staff member.

(11) Parents must be informed daily of any medications given to their child or any injuries their child has had.

(12) If a child with allergies is enrolled who needs a specific plan for caring for that child, such a plan shall be developed in writing between the provider, parents, and if necessary, outside specialists. All staff who come in contact with that child shall be fully aware of the plan.

(13) The provider must provide or ensure the availability of meals and snacks appropriate for the ages and needs of the children served.

(a) Meals and snacks must be based on the guidelines of the USDA Child Care Food Program.

(b) Foods must be stored and maintained at the proper temperature.

(c) Foods must be prepared and served according to the minimum standards for food handler certification.

(d) Infants must be held or sitting up for bottle feeding. Propping bottles is prohibited.

(e) Children shall not be laid down with a bottle for sleeping.

(14) Children who cannot feed themselves shall be held or, if able to sit alone, fed in an upright position.

(a) Infants up to six months of age shall be held or sitting up in a caregiver's lap for bottle feeding;

(b) Bottles shall never be propped. The child or a caregiver shall hold the bottle.

(c) Infants no longer being held for feeding shall be fed in a manner that provides safety and comfort.

(15) Children of any age shall not be laid down with a bottle.

(16) Any animal at the family child care home shall be in good health and be a friendly companion for the children in care.

(a) Potentially aggressive animals must not be in the same physical space as the children.

(b) Dogs and cats must be vaccinated according to a licensed veterinarian's recommendations.

(c) Dogs and cats shall be kept free of fleas, ticks and worms.

(17) Animal litter boxes shall not be located in areas accessible to children or areas used for food storage or preparation.

(18) Caregivers must be physically present when children are interacting with animals.

(19) Exotic animals, including, but not limited to: reptiles (e.g. lizards, turtles, snakes) amphibians, monkeys, hook-beaked birds, baby chicks and ferrets are prohibited unless they are housed in and remain in a tank or other container which precludes any direct contact by children. Educational programs that include prohibited animals and are run by zoos, museums and other professional animal handlers are permitted.

(20) Parents must be made aware of the presence of any animals on the premises.

## 414-205-0105 Testing for Lead in Drinking Water

(1) For purposes of this rule, "drinking water faucet or fixture"

(a) means any plumbing fixture on the premises used to obtain water for drinking, cooking, preparing infant formula, or preparing food; and

(b) does not include any plumbing fixture used to obtain water for handwashing, bathing, or diaper changing.

(2) Water obtained from fixtures identified in subsection (1)(b) of this rule cannot be used for drinking, cooking, preparing infant formula, or preparing food.

(3) Initial Testing

(a) Any provider with an active registration as of September 30, 2018 must test each drinking water faucet or fixture by November 30, 2018.

(b) The following providers must test each drinking water faucet or fixture for lead in the water prior to being eligible to receive a license from OCC:

(A) Any provider with a pending registration application as of September 30, 2018; and

(B) Any provider applying for registration on or after September 30, 2018, including, but not limited to, initial applications, renewal applications, and reopen applications.

(c) A provider identified in (3)(a) or (b) does not need to conduct the initial testing if:

(A) All drinking water faucets or fixtures have been tested within 6 years prior to the effective date of this rule; and

(B) The testing was conducted in accordance with the requirements of subsection (5) of this rule.

(d) A provider identified in subsection (3)(a) must submit all test results to OCC no later than November 30, 2018. The test results must be accompanied by a written statement that identifies the location of each drinking water faucet or fixture tested.

(e) A provider identified in (3)(b) must submit test results to OCC within 10 calendar days of the facility receiving the results from the laboratory. The test results must be accompanied by a written statement that identifies the location of each drinking water faucet or fixture tested.

(4) Ongoing Testing

(a) After a provider conducts the initial testing under subsection (3) of this rule, the provider must test all drinking water faucets or fixtures at least once every six years from the date of the last test.

(b) All test results obtained in accordance with subsection (4)(a) of this rule must be submitted to OCC within 10 calendar days of the provider receiving the results from the laboratory. The test results must be accompanied by a written statement that identifies the location of each drinking water faucet or fixture tested.

(5) Sampling and Testing

(a) All sample collection and testing must be in accordance with the Environmental Protection Agency (EPA)'s 3Ts for Reducing Lead in Drinking Water in Schools and Child Care Facilities, Revised Manual from October 2018, adopted by reference.

(b) All testing must be performed by a laboratory accredited by the Oregon Laboratory Accreditation Program according to standards set under OAR chapter 333, division 64 in effect as of September 30, 2018.

(c) If a facility does not use any of the on-site plumbing fixtures to obtain water for drinking, cooking, preparing infant formula, or preparing food, the provider must:

(A) Submit a written statement to OCC identifying the alternative source of water and confirming that the provider does not use any on-site plumbing fixtures for drinking, cooking, preparing infant formula, or preparing food; and

(B) Notify OCC in writing if the alternative source of water changes.

(6) Results

(a) If test results show that water from any drinking water faucet or fixture has 15 parts per billion (ppb) or more of lead, the provider must:

(A) Prevent access to that drinking water faucet or fixture immediately after receiving the test results; and

(B) Continue to prevent access to that drinking water faucet or fixture until mitigation in completed in accordance with subsection (6)(b) of this rule.

(b) Following receipt of test results showing that water from any drinking water faucet or fixture has 15 parts per billion (ppb) or more of lead, the provider must:

(A) Submit a corrective action plan to OCC for approval within 60 days of receiving the test results. The corrective action plan must identify an appropriate mitigation strategy in accordance with Module 6 of the EPA's 3Ts for Reducing Lead in Drinking Water in Schools and Child Care Facilities, Revised Manual from October 2018, adopted by reference; and

(B) Implement the mitigation method within 30 days of approval by OCC.

(7) Recordkeeping and Posting

(a) The provider must keep a copy of the most recent lead test results on-site at all times.

(b) The provider must post the most recent lead test results summary provided by OCC in an area of the facility where the summary can be clearly viewed by parents. The provider must post the lead test results summary immediately after receiving the summary from OCC.

(8) Providers must follow the routine practices identified in Module 6 of the EPA's 3Ts for Reducing Lead in Drinking Water in Schools and Child Care Facilities, Revised Manual from October 2018, adopted by reference, at all times.

## 414-205-0110 Safety

(1) Children shall be protected from fire and safety hazards. Providers must have the following protections in place:

(a) All exposed electrical outlets in rooms used by preschool or younger children must have hard-to-remove protective caps or safety devices installed when the outlet is not in use.

(b) Extension cords shall not be used as permanent wiring;

(c) All appliance cords must be in good condition;

(d) Multiple connectors for cords shall not be used;

(e) A grounded power strip outlet with a built-in over-current protection may be used;

(f) A stable barrier shall be installed to prevent children from falling into hazards, including, but not limited to: fireplaces, heaters and woodstoves that are in use when child care children are present;

(g) A secure barrier shall be placed at the top and/or bottom of all stairways accessible to infants and toddlers;

(h) A working smoke detector on each floor and in any area where children nap;

(i) A working fire extinguisher with a rating of at least 2-A:10-BC;

(j) Firearms, BB guns, pellet guns and ammunition kept under lock, with ammunition stored and locked separately. Firearms, BB guns and pellet guns must remain unloaded;

(k) Cleaning supplies, paints, matches, lighters, and plastic bags kept under child-safety lock;

(l) Other potentially dangerous items, such as medicine, drugs, sharp knives and poisonous and toxic materials kept under child-safety lock;

(m) Flammable and combustible liquids, such as paint thinner and gasoline, shall be stored in the original container or a safety container and, if over one gallon, kept in an unattached storage building;

(n) If any preschool age or younger children are in care, poisonous plants must be kept out of the reach of children; and

(o) All clear glass panels in doors clearly marked at child level.

(2) All floor levels used by children must have access to two useable exits, as defined in OAR 414-205-0010(34), to the outdoors.

(a) If a basement is used for child care purposes, the requirement for two useable exits may be met by one of the following:

(A) A sliding glass door or swinging door to the outside and a window that meets the definition of a useable exit; or

(B) A window which meets the definition of a useable exit and an internal stairway to ground level that has unobstructed and direct access to the outdoors.

(b) If a window, which meets the definition of a useable exit, is used:

(A) Steps must be placed under the window to allow children to exit without assistance; and

(B) The window must be kept in good working condition.

(c) If a window used as an exit has a window well, a mechanism must be in place to allow children to exit the window well.

(3) Second floors (does not apply to providers registered continuously at the same address before 2009, unless the provider has moved the child care license to a new residence):

(a) Child care children shall not sleep on the second floor or above;

(b) Care shall not be provided for infants and toddlers on the second floor or above;

(c) Night care shall not be provided on the second floor or above;

(d) Children may be allowed on the second floor to use the bathroom if the only bathroom is on the second floor;

(e) Care can be provided for preschool and school-age children on the second floor or above, if:

(A) There are two staircases to the ground level and all children are mobile enough to exit safely; or

(B) The designated fire marshal has approved the use of the upper floor.

(4) The provider must have a written plan for evacuating and removing children to a safe location in an emergency. The plan must be posted in the home, familiar to the children and the caregivers, and practiced at least every other month and must include:

(a) Procedures for notifying parents or other adults responsible for the children, of the relocation and how children will be reunited with their families;

(b) Procedures to address the needs of individual children, including infants and toddlers, children with special needs and children with chronic medical conditions;

(c) An acceptable method to ensure that all children in attendance are accounted for

(d) Procedures for handling natural disasters (e.g. fire, earthquake, etc.) and man-caused events, such as violence at a child-care facility;

(e) Procedures in the event that children must shelter-in-place or if the child-care home must be locked-down so that no one can enter or leave; and

(f) Procedures for maintaining continuity of child care operations.

(5) A telephone in working condition must be in the family child care home.

(a) Parents must be given the telephone number so they can contact the provider if needed.

(b) Emergency telephone numbers for fire, ambulance, police and poison control and the provider's home address must be posted in a visible location

(6) The building, grounds, water supply, and toys, equipment and furniture used by children must be maintained in a hazard-free condition.

(a) Broken toys, furniture and equipment must be removed from areas accessible to children.

(b) Both the exterior and interior of the home must be maintained in good repair.

(c) Painted surfaces must be in good condition, both inside and outside, to avoid exposing children to lead paint.

(d) The provider shall report to OCC any damage to the building that affects the provider's ability to comply with these requirements, within 48 hours after the occurrence.

(7) If a caregiver is transporting children, the caregiver must have a valid driver's license and proof of appropriate insurance.

(8) The number of children transported shall not exceed the number of seat belts or child safety systems available in the vehicle

(9) The provider must take precautions to protect children from vehicular traffic. The provider shall:

(a) Require drop off and pick up only at the curb or at an off-street location protected from traffic.

(b) Assure that any adult who supervises drop-off and loading can see and assure that children are clear of the perimeter of all vehicles before any vehicle moves.

(10) The following vehicles may be used to transport child care children:

(a) A vehicle manufactured to carry fewer than ten passengers;

(b) A school bus or a multi-function school activity bus;

(c) A vehicle manufactured to carry ten or more passengers that was manufactured in 2010 or after; or

(d) A vehicle manufactured to carry ten or more passengers that was manufactured before 2010, with the following conditions:

(A) Travel speed may not exceed 50 mph; and

(B) The vehicle must have an annual safety inspection by a garage, dealership or auto repair shop. Proof of inspection must be on the form provided by the Early Learning Division or on a form provided by the inspector which contains the same information.

## 414-205-0120 Sanitation

(1) Pre-mixed sanitizers and disinfectants that are EPA registered and meet Oregon Health Authority criteria may be used in all areas of the home per manufacturer instructions.

(2) All caregivers and children must wash their hands with soap and warm, running water:

(a) Before handling food;

(b) Before assisting with feeding;

(c) Before and after eating;

(d) After diapering;

(e) After using the toilet;

(f) After assisting someone with toileting;

(g) After nose wiping;

(h) After playing outside; and

(i) After touching an animal or handling pet toys.

(3) Hand sanitizers shall not replace hand washing. If hand sanitizers are present in the home, they shall be kept out of children's reach and shall not be used on children.

(4) All toys, equipment and furniture used by children must be cleaned, rinsed and sanitized regularly and whenever soiled.

(5) Diaper changing surfaces must be either:

(a) Non-absorbent and easily disinfected;

(b) Disposed of after each use; or

(c) Laundered after each use.

(6) The diaper changing area shall be located so that hand washing can occur immediately after diapering without contacting other surfaces or children.

(7) The building and grounds must be maintained in a clean and sanitary manner.

(8) All garbage, solid waste, and refuse must be disposed of regularly, in a safe and sanitary manner.

(9) Bio-contaminants including but not limited to bodily fluids and blood shall be disposed of in a manner that prevents exposure to children.

(10) The home's water supply must be safe to drink.

(11) Wading pools are prohibited for wading.

## 414-205-0130 Record Keeping

(1) The following records, except those specified in OAR 414-205-0105(7)(a), shall be kept by the provider for at least one year. These records shall be available at all times to OCC:

(a) Information from the parent(s) for each child at the time of admission:

(A) Name and birth date of the child;

(B) Any chronic health problem(s), including allergies, the child has;

(C) Date child entered care;

(D) Names, work and home telephone numbers and addresses, and the work hours of the parent(s) or legal guardian(s);

(E) Name and telephone number of person(s) to contact in an emergency;

(F) Name and telephone number of person(s) to whom the child may be released;

(G) The name of the school attended by the child care child; and

(H) Name, address and telephone number of the child's doctor and dentist.

(I) Health history of any problems that could affect the child's participation in child care.

(b) Daily attendance records, including dates each child attended and arrival and departure times for each day. Times shall be recorded as the child care children arrive and depart;

(c) Medications administered, including the child's name, and the date and time of dosage and the dosage amount; and

(d) Injuries to a child.

(2) The provider must have a written statement from the parent(s) regarding whether or not the provider is authorized to:

(a) Obtain emergency medical treatment for a child;

(b) Administer medications to a child;

(c) Take a child on a field trip or other activity outside the home or participate in any water activity; and

(d) Transport a child to or from school or allow a child to bus or walk to or from school or home.

## 414-205-0140 Night Care

A provider providing night care must:

(1) Have a written plan for the care, mutually agreed upon by the parent(s) and the provider;

(2) Have a written plan for emergency situations occurring during the night;

(3) Be awake for the arrival and departure of each child in night care; and

(4) Follow all other applicable Registration rules.

## 414-205-0150 Exceptions to Rules

(1) A provider may request an exception to a rule.

   (a) An exception must be requested on a form provided by OCC;

   (b) The provider must provide a justification for the requested exception and an explanation of how the provider will ensure, through safeguards or other conditions, the health, safety and well-being of the children.

(2) The provider must be in compliance with the rule as written until the provider has received approval for the exception from OCC.

(3) In instances where care that is subject to registration, as defined in subsection (2) of rule 414-205-0000, will not be provided in the provider's own residence, the applicant/provider must request and receive approval for an exception prior to providing care at that location. In all respects, the location must appear and be arranged as a residence.

(4) No exception to a rule shall be granted unless the health, safety, and well-being of the children are ensured.

(5) An exception is valid only for the specified dates for which it is issued.

(6) The granting of an exception to a rule shall not set a precedent, and each request shall be evaluated on its own merits.

## 414-205-0160 Complaints

(1) The Office of Child Care will respond to complaints made on registered and illegal providers, and will cooperate with law enforcement or other agencies in response to allegations of child abuse or noncompliance.

   (a) Any and all complaints may result in an on-site assessment at the family child care home;

   (b) All serious complaints will result in an on-site assessment at the family child care home;

   (c) Complaints alleging child abuse or neglect will be reported to the Department of Human Services Child Welfare (DHS) or local law enforcement agencies.

(2) New applicants for registration will be given a copy of OCC's complaint procedures at the time of the on-site health and safety review. The complaint procedures are also available upon request.

## 414-205-0170 Suspension, Denial, Revocation, Findings Reviews and Civil Penalties

(1) A provider has the right to a review of any finding made by OCC. New applicants for registration will be given a copy of OCC's findings review procedures at the time of the on-site inspection. Information on the OCC findings review process will be in complaint letters. The OCC findings review procedures are also available upon request.

(2) The Office of Child Care may immediately, and without prior notice, suspend the child care registration when, in the opinion of OCC, such action is necessary to protect the children from physical or mental abuse or a substantial threat to health, safety or well-being. Such action may be taken before an investigation is completed.

(3) A provider whose registration has been suspended must immediately notify, verbally or in writing, all parents of the suspension.

(4) A provider whose registration has been suspended must immediately provide OCC with all names, work and home telephone numbers and addresses of the parent(s) or legal guardian(s) for each child.

(5) A provider whose registration has been suspended must post the suspension in the home where it can be viewed by parents and others for the duration of the suspension.

(6) If necessary to protect children, OCC may give public notice of denial, suspension or revocation action taken. The type of notice will depend on individual circumstances.

(7) If the provider does not request a hearing and the conditions which resulted in suspension have not been corrected, the registration shall be revoked.

(8) Registration may be denied or revoked if a registered family child care home fails to meet requirements, provide OCC with information requested, allow an inspection, correct deficiencies, or is operated or maintained in a manner which is harmful to the health, safety or well-being of children in care.

(9) A registered family child care home whose registration has been denied or revoked must immediately notify all parents of the closure and shall post a notice of the closure where it can be viewed by parents and others. The notice shall remain posted for a minimum of 2 weeks.

(10) The provider has the right to appeal any decision to deny, suspend, or revoke the registration, subject to the provisions of Chapter 183, Oregon Revised Statutes.

(11) Any action taken by OCC to deny, suspend, or revoke registration may be reported to the Department of Human Services, USDA Child Care Food Programs and child care resource and referral system.

(12) A provider whose registration has been denied for cause (e.g. health and safety concerns, criminal activity or child protective services involvement) or revoked for cause shall not be eligible to reapply for 5 years after the effective date of the closure.

(13) If any person, who is enrolled in the CBR, has been charged with, arrested for, or a warrant is out for any of the crimes which OCC has determined indicate behavior which may have a detrimental effect on a child, with final disposition not yet reached, registration may be denied or suspended or revoked until the charge, arrest, or warrant has been resolved if the person continues to operate, be employed in or reside in the home, or have access to children in the home.

(14) Registration may be denied, suspended or revoked if an individual listed in OAR 414-205-0075 has a child protective services history or an open child protective services or law enforcement case that would disqualify the individual from the CBR.

(15) Violations of these rules or terms and conditions of certification under these rules may be subject to a civil penalty up to $750 per violation.

(16) Whenever the Office of Child Care (OCC) investigates an alleged complaint at a registered facility, or a facility that may be operating in violation of the requirements of ORS 329A.250 through 329A.450, OCC shall:

(a) Provide technical assistance as appropriate;

(b) Send written notice of the complaint visit to the facility with a finding of valid, unable to substantiate, or invalid; and

(c) OCC shall assess whether additional legal actions are appropriate, including but not limited to civil penalties, denials, revocations or suspensions, depending upon:

(A) Numbers of previous violations of the same rule; or

(B) Circumstances surrounding the rule violation.

(17) For a serious violation, as defined in OAR-414-205-0010 (30), a provider may be subject to a civil penalty not to exceed $750 for each violation.

(18) For a non-serious violation, a provider may be subject to a civil penalty of $250 for each violation.

(19) Each day that a child care facility is operating in violation of any of the rules and conditions of certification is a separate violation of the rules.

(20) An individual or entity that provides child care subject to licensing in a home or facility that is not certified with the Office of Child Care, may be subject to a civil penalty not to exceed $1,500 per day of operation of the uncertified facility.

(21) Notwithstanding the Office of Child Care's (OCC) decision to impose a civil penalty for one or more rule violations, OCC may also take action to deny, suspend or revoke a certification for the same rule violation or violations.

(22) The provider has the right to appeal any decision to impose a civil penalty, subject to the provisions of chapter 183, Oregon Revised Statutes.

(23) Failure to pay a civil penalty in which the Office of Child Care has issued a final order by default or a final order after a contested case hearing shall be grounds for denial or revocation of the facility's certification.