

This document is provided as guidance and is not a legal document. It does not override or replace the need to be familiar with rules. Current rules may be found on [the DLBC website](#).

Record categories

Programs are required to keep a multitude of records, but the requirements for these records are spread across different rule sections. This document compiles all of those requirements into a single reference.

Note that **this document does not list every record a provider might need**. It does not account for documents that are only required under specific circumstances.

This document organizes program records into 5 categories:

- Child records
- Personnel records
- Facility records
- Reports and notifications
- Posted items

Child, personnel, and facility records

These records must be available onsite during business hours. Unless otherwise indicated, most records must be kept for the previous **6 months**. Records may be kept in a physical or digital format. If using a digital format, providers will need to assess how required records will be accessible during a power or internet service outage.

Reports and notifications

Parents, the Division of Licensing and Background Checks (DLBC), and other state agencies must be notified of updates and incidents which may affect the health and safety of children in care.

Posted items

These are documents required to be posted in the facility. Generally, these documents must be posted where they are readily visible to staff, parents, or other members of the public.

Items may be posted physically or electronically. An example of posting a document electronically would be displaying it on a TV screen in a lobby or common area.

Child records

*Documents marked with an * are not required to be kept by residential certificate or licensed family child care.*

Document	Description
Admission agreement	<p>An admission agreement must include:</p> <ul style="list-style-type: none"> ● Child name ● Child date of birth ● Parent name and number ● A list of people authorized to sign the child out ● Emergency contact information (including an out-of-area emergency contact if available) ● Permission for emergency transportation and medical treatment <p>Each parent must complete an admission agreement before their child is admitted into a child care program. Admission agreements must be kept onsite for as long as the child remains enrolled in/attending the program.</p> <p>Admission agreements must be reviewed, updated (if needed), and signed by the parent annually.</p>
Health assessment	<p>A health assessment must contain specific health information including:</p> <ul style="list-style-type: none"> ● Known allergies ● Known food sensitivities ● Chronic medical conditions ● Instructions for special or nonroutine health care ● Current medications <p>When completing an admission agreement, parents must also complete a health assessment for their child. Health assessments must be kept onsite for as long as the child remains enrolled in/attending the program.</p> <p>Parents must also review, update (if needed), and sign their child's health assessment at least once a year.</p> <p>Admission agreements and health assessments may be combined into a single form.</p>

<p>Client rights</p>	<p>Per R380-80-5(13)-(14), each parent must be informed of their client rights and sign a document indicating what those rights are. Client rights include:</p> <ul style="list-style-type: none"> ● The right to be informed of their rights ● The right to be treated with dignity, respect, and fairness ● The right to be free from potential harm or acts of violence ● The right to be free from discrimination ● The right to be free from abuse, neglect, mistreatment, exploitation, and fraud ● The right to have equal access to food, shelter, and health services ● The right to be free from retaliation for reporting any violation to their rights ● The right to privacy of current and closed records ● The right to communicate and visit with family, attorneys, clergy, physicians, counselors, or case managers or workers assigned to their child, unless therapeutically contraindicated or court restricted <p>Signed client rights must be kept onsite for as long as the child remains enrolled in/attending the program.</p> <p>Client rights may be combined with the admission agreement.</p>
<p>Immunization records</p>	<p>Parents must provide a copy of their child’s current immunization record before they are admitted into a child care program.</p> <p>In lieu of providing a current record, parents may either provide a medical schedule of when their child will receive required immunizations, or a legal exemption from having required immunizations.</p> <p>A 90-day exemption from having a record of current immunizations is granted for any child placed in foster care or experiencing homelessness.</p> <p>Immunization records must be kept onsite for as long as the child remains enrolled in/attending the program.</p>
<p>Attendance record</p>	<p>A record of each child’s attendance must be kept. This record must indicate the date and time each child was signed in and out of the program. Each instance a child is signed in or out must be accompanied by the signature (or electronic identifier) of the person who signed the child in or out.</p>

<p style="text-align: center;">Incident report</p>	<p>A report must be completed any time an incident involves a child in care. This form should include detailed information about the incident.</p> <p>Incident reports must be signed by any caregiver involved, the person responsible for the program at the time the incident occurred (generally the provider or director), and the person picking the child up for the day.</p> <p>Parents must be given a copy of the report, and a copy must be kept onsite for the program's records.</p>
<p style="text-align: center;">Medication permission form</p>	<p>Before giving medication to a child, parents must complete and sign a medication permission form. This form must include:</p> <ul style="list-style-type: none"> ● Child name ● Medication name ● Administration instructions including: <ul style="list-style-type: none"> ○ Method of administration ○ The disease or condition being treated ○ The required dosage ○ The times and dates to administer the medication ● Parent signature and date signed.
<p style="text-align: center;">Medication administration record</p>	<p>When a child is given medication, that must be recorded and include:</p> <ul style="list-style-type: none"> ● The date and time medication was given ● The dosage or amount given to the child ● A description of any error or adverse reaction that occurred ● The signature or initials of the person who gave the child the medication <p>Medication permission forms and administration records may be combined into a single form.</p>

<p>Parental permission</p>	<p>Parents must provide written permission before their child is allowed to participate in the following activities:</p> <ul style="list-style-type: none"> ● Swimming activities <ul style="list-style-type: none"> ○ Permission must be obtained whether the swimming activity takes place on or offsite ○ Parental permission must be obtained regardless of the size or depth of pool used, or the age of children participating ● Offsite activities <ul style="list-style-type: none"> ○ An offsite activity is any activity which takes place outside of facility premises ● Transportation <ul style="list-style-type: none"> ○ If children are transported by program staff for any purpose, parents must provide their permission first ● Using a trampoline <ul style="list-style-type: none"> ○ This only applies to residential programs ○ Commercial programs may not have or permit children to use a trampoline while in care
<p>Emergency information</p>	<p>When a child is transported or taken offsite, a caregiver accompanying that child must take emergency information for them, including:</p> <ul style="list-style-type: none"> ● Child name ● Parent name and phone number ● Emergency contacts ● A list of people authorized to sign the child out ● Permission for emergency transportation and medical treatment
<p>Infant eating and sleeping patterns*</p>	<p>The eating and sleeping patterns of each infant must be recorded. This record must include:</p> <ul style="list-style-type: none"> ● Child name ● Food and beverages eaten/consumed by the child ● The total time the child slept
<p>Infant and toddler diaper changes*</p>	<p>A record of diaper changes must be kept for each infant and toddler. This record must include:</p> <ul style="list-style-type: none"> ● Child name ● Time of diaper change ● Whether the diaper was dry, wet, soiled, or both

Personnel records

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Document	Description
Annual training*	<p>A record of each individual's annual training must include:</p> <ul style="list-style-type: none"> • The individual's name • Training topics completed • Dates each training topic was completed • The name of the Individual or organization which presented training on each topic (may also include listing the source) • The total hours or minutes of interactive or noninteractive training completed <p>Annual training records must be complete and submitted for licenser review and approval prior to a program's license expiration date.</p>
Employee records*	<p>Programs must keep the following records for each employee:</p> <ul style="list-style-type: none"> • The date of initial employment • A record of times worked each day • A current pediatric first aid and CPR certification (where applicable)
Driver license	<p>Any individual transporting a child in a vehicle must have and carry with them a current and valid driver license for the type of vehicle being used.</p>
List of on call employees	<p><u>Only hourly centers are required to keep this document.</u></p> <p>A list of employees who are able to arrive at the facility within 20 minutes.</p>
Provider code of conduct	<p>Per R380-80-5(11)-(12), each employee must be given a copy of R380-80 and sign a form indicating that they have read, understood, and agreed to follow the provider code of conduct.</p>

Facility records

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Document	Description
Emergency preparedness plan	<p>Before being issued a license, providers must develop a written emergency plan that includes procedures for:</p> <ul style="list-style-type: none"> ● Accommodating infants, toddlers, and children with disabilities or chronic medical conditions ● Communication with and reunification of families ● Continuity of operations ● Evacuation ● Lockdown or sheltering in place ● Relocation ● Responding to allergies or food-related emergencies <p>Plans must be available for review during business hours.</p>
Fire and other disaster drill records*	<p>Each fire evacuation and other disaster drill conducted must be documented and include the following information:</p> <ul style="list-style-type: none"> ● What type of drill was conducted ● The date and time the drill took place ● The name of the individual supervising the drill ● The number of children who participated ● The length of time it took to evacuate (where applicable) ● Problems encountered and remediation steps taken <p><u>Drill records must be kept for the previous 12 months.</u></p>
Food service schedule	<p>A record of foods served to children must be kept if not participating in, or in good standing with, the Child and Adult Care Food Program (CACFP).</p> <p>Weekly menus may be used as a record as long as each menu clearly indicates the dates for which it was used and is updated with any changes made to the menu.</p>
Cushioning documentation**	Documentation must verify that any wood product or unitary cushioning used is intended for use as protective cushioning.
Animal vaccination records	The vaccination records for each dog, cat, and ferret housed in the facility.
Liability insurance	Programs must either have liability insurance (and transport liability insurance if transportation services are offered), or inform parents in writing that they do not have liability insurance.

<p>Crib certification</p>	<p>Each crib must be accompanied by documentation stating that the crib was built after June 28, 2011.</p> <p>If a provider has a crib manufacturer before that date, they may have a document verifying that the crib is in compliance with current CPSC requirements instead.</p>
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Reports and notifications	
Document	Description
Updated contact information	<p>Programs must report any change to their phone number or email address to parents and the Office of Licensing (OL).</p> <p>Changes to contact information must be reported within 48 hours of the change being made.</p>
Eligibility status	<p>Any events which may impact the eligibility of a covered individual to be involved in child care must be reported to the Office of Background Processing (OBP). Events may include:</p> <ul style="list-style-type: none"> • Being arrested • Being convicted of a felony or crime against another person • Having a warrant issued for their arrest • Having a supported finding of child abuse or neglect • Being listed on a sex offender registry <p>These, and similar incidents, must be reported to OBP within 48 hours of becoming aware of them.</p>
Lead-based paint	If lead-based paint is identified on the premises, the local health department must be contacted within 5 working days.
Behavioral expectations	Children, parents, and all who interact with children must be notified of the program's behavioral expectations and how misbehavior will be handled.
Child abuse or neglect	Any individual who witnesses or suspects that a child is being subjected to abuse or neglect of any kind is required by law to report that to law enforcement or child protective services as soon as possible.
Serious injuries	<p>All serious, but non-life-threatening, injuries must be reported to parents immediately.</p> <p>This includes errors in administering medication or a child having an adverse reaction to medication.</p>
Life-threatening injuries	<p>Emergency services must be contacted immediately if a child receives a life-threatening injury. Parents must be notified as soon as possible after emergency services.</p> <p>This includes a child having a life-threatening reaction to medication.</p>
Critical incident	All critical incidents must be reported to the Office of Licensing (OL) within 1 business day.

<p>Child illness</p>	<p>Parents must be notified immediately if it is suspected that their child is ill. Emergency contacts may be contacted if the parent is not immediately available.</p> <p>All parents of children in care must be notified if a child or staff member has an infectious disease or parasite while in the facility.</p>
<p>Unusual or serious illness</p>	<p>Certain illnesses and diseases must be reported to the local health department. More information about this requirement may be found on epi.utah.gov.</p>
<p>Animals permitted</p>	<p>Each parent must be notified of the kinds of animals allowed at the facility.</p>

Posted items

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Document	Description
License/certificate	<p>The program's current and unaltered license or certificate must be posted where it is readily visible and accessible to the public.</p> <p>Posting a current license also covers the requirement to post the parent guide, as current licenses have a QR code directing the parents to the DLBC website.</p>
Emergency numbers	The phone numbers for emergency services (911) and poison control (1-800-222-1222) must be posted by each telephone, or where they are readily visible. The facility street address must also be posted.
Handwashing procedures**	Handwashing procedures must be posted where they can be seen from each sink being used to wash hands.
Infectious disease notice**	<p>Parents must be notified if a child or staff member has an infectious disease or parasite. This notice must:</p> <ul style="list-style-type: none"> • Not include personally identifying information (PII) • Be posted on the day the infectious disease or parasite was discovered • Be posted in a conspicuous place, meaning that it is easily visible to all parents who visit the program • Remain posted for at least 5 business days
Current menu	A menu displaying what foods are being served to children for the present week must be posted where it can be reviewed by parents and the Office of Licensing (OL).
Daily schedule*	<p>Daily schedules must include activities planned to support child development and the times of when meals, snacks, nap, rest, and outdoor play are taking place.</p> <p>Daily schedules may be individual to each child, per classroom or group, or for the entire program.</p>
Diapering procedures**	Must be posted at each diapering station.
Client rights	Per R380-80-5(15) , a poster notifying parents of their client rights must be prominently displayed in the facility.