

 Department of Health & Human Services		Licensing & Background Checks		Child Care CENTER Inspection Checklist		This inspection checklist is the tool OL licensors use to ensure consistency for every inspection. <i>(Revised 07/2026)</i>	
				Office of Licensing Division of Licensing and Background Checks			
Facility Name:		Facility ID:		Phone Number:		Notes / Sticky Notes	
Address:				Email Address:			
				Total Number of Rooms for Capacity:			
Director:		Approved Capacity:		Number of Rooms being used:			
License Expiration Date:		Last Announced Inspection:		Last Unannounced Inspection:			
Please review the following items prior to or during the inspection: (Mark with a check mark if completed and make any necessary notes)				Please review the following items prior to or during the inspection: (Mark with a check mark if completed and make any necessary notes)			
☐	Was previous technical assistance given within the last 36 months?			☐	Training assessed at this inspection?		
☐	Facility Personnel Listed in UCLAPP - See Personnel Worksheet			☐	Current Variances		
☐	Safety Glass			☐	Provider Code of Conduct and Client Rights		
☐	Crib Form			☐	Facility Operating Hours: NO CHANGE		
☐	Email Address and Phone Number: NO CHANGE			☐	Operating Hours: CHANGE		
☐	Email Address and Phone Number: CHANGE			☐	Capacity of center during inspection		0
Number of children on offsite activities or being transported?							
Capacity <i>including</i> children being transported or on off-site activities							0
Inspection Information							
- All areas that are inaccessible to children in care must remain inaccessible for this inspection. During the inspection, the licensor will ask to have locked areas unlocked. All accessible areas must be compliant with all applicable rules during the inspection.							
- The licensor will email you this inspection checklist after the inspection is completed if requested.							
- You may submit feedback on this inspection through your Child Care Licensing Portal or through the dlbc.utah.gov							
- These are initial observations and do not constitute a final inspection report. An official inspection report will be sent to you once this inspection has been approved by OL management.							
- If the only potential noncompliances are documentation and/or records, please submit them to Licensing by the correction required date listed. A licensor may conduct a follow-up inspection to verify compliance and ensure compliance maintenance.							
Inspection Type:		Date:		Time Started:		Time Ended:	
Number of Rules Under Review:				Name of Individual Informed of this Inspection:			
Licensor(s) Conducting this Inspection:				OL Staff Observing Inspection:		The Licensor reviewed compliance. ☐	

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	R381-100 - DLBC.utah.gov		
Licensor Introductory Items			
☐	Introduction of any unknown OL staff to the provider	☐	ASK: How many hot water tanks are in the facility? Do any of the sinks have mixing valves?
☐	Give a brief explanation of the inspection process to the provider	☐	ASK: Have any windows been replaced since the last inspection? If YES: A new safety glass form must be filled out. If the safety glass form indicates safety glass wasn't needed due to a barrier, verify the windows are still compliant.
☐	ASK: the provider if they want you to tell staff about rule noncompliances as you conduct the walk- though, or wait until the inspection is over to tell them.	☐	ASK: Have any cribs been replaced since the last inspection? If YES: A new crib form must be filled out.
☐	If the program transports children, let the owner/director know that at some point during the inspection you will need to inspect the vehicles used to transport children.	☐	ASK: Where are the first aid supplies for the facility and field trips?
☐	If children are diapered at the facility, let the owner/director know that you will need to observe 1 diaper change. The owner/director may want to have staff come and interrupt the inspection to let you know when they are ready to change a diaper.	☐	ASK Are parts of the facility rented or lived in? If YES: Review the signed lease agreement and verify that there is a separate mailing address, a separate entrance and that there are no connecting unlocked interior doorways. R381 -100-9(20)(a)-(c)
☐	Wash hands or use hand sanitizer before touching items in the facility.	☐	ASK: Where do you store medications?
General Notes			

CENTER RULES CHECKLIST								
Rule # R381-100	Rule Description		R	UR	Compliance Required By Date:	Corrected During Inspection	Technical Assistance Given	Notes
	R = Reviewed UR = Under Review							
R380-600-Section 7. Inspection and Investigation Process			R	UR	Date	CDI	TA	Notes
600-7(3)(a)-(d)		The provider shall cooperate with OL to monitor rule compliance and rule compliance maintenance any time the program or facility is serving clients by giving to OL full access to: (a) the building; (b) any client who independently consents to speak with OL staff; (c) staff; and (d) any program or facility record.	☐	☐		☐	☐	
R381-100-Section 4: Fire and Other Health Inspections			R	UR	Date	CDI	TA	Notes
100-4(1)(a)-(h)		If the local fire authority states in writing that an applicant for a new license or a renewal does not require a fire inspection, OL shall verify the applicant's compliance. If letter is issued: Fire Inspection Checklist	☐	☐		☐	☐	
100-4(2)(a)-(j)		If an applicant for a new license or a renewal serves food and the local health department states in writing that a kitchen inspection is not required, OL shall verify the applicant's compliance. If letter is issued: Kitchen Inspection Checklist	☐	☐		☐	☐	<i>A kitchen inspection is only required upon initial licensure. At all other inspections we ask the provider to ensure they are in compliance with the local health department kitchen requirements.</i>
R380-80-Section 5. Provider Code of Conduct			R	UR	Date	CDI	TA	Notes
80-5(11)		Each provider shall give each staff a copy of this rule, Provider Code of Conduct and Client Rights as part of their initial employment.	☐	☐		☐	☐	
80-5(12)		Each provider shall sign and ensure each staff signs off on reading, understanding, and agreeing to follow this rule, Provider Code of Conduct and Client Rights before working with clients.	☐	☐		☐	☐	

80-5(14)		Each provider shall maintain a copy of the client's rights, signed by each client or client's guardian in each client record.	☐	☐		☐	☐	
80-5(15)		Each provider shall prominently display a poster in each facility that notifies clients of their rights.	☐	☐		☐	☐	
R381-100-Section 6: Administration and Children's Records			R	UR	Date	CDI	TA	Notes
100-6(3)		The provider shall protect children from conduct that endangers any child in care, or is contrary to the health, welfare, and safety of the public.	☐	☐		☐	☐	
100-6(6)		The provider shall post their unaltered child care license on the facility premises in a place readily visible and accessible to the public.	☐	☐		☐	☐	
100-6(8)		The provider shall inform each parent and OL of any changes to the program's telephone number and other contact information within 48 hours of the change. ASK- if there have been any changes to their telephone or contact information since the last inspection.	☐	☐		☐	☐	
100-6(9)(a)-(b)		The provider shall: (a) have liability insurance ; or (b) inform parents in writing that the provider does not have liability insurance.	☐	☐		☐	☐	
100-6(10)		The provider shall ensure that a parent completes an admission and health assessment form for their child before the child is admitted into the child care program.	☐	☐		☐	☐	

100-6(11)(a)-(m)	The provider shall ensure that each child's admission and health assessment form includes the following information: (a) the child's name; (b) the child's date of birth; (c) each parent's name, address, and phone number, including a daytime phone number; (d) the names of individuals authorized by the parent to sign the child out from the facility; (e) the name, address, and phone number of an individual to be contacted if an emergency happens and the provider cannot contact the parent; (f) if available, the name, address, and phone number of an out-of-area emergency contact individual for the child; (g) the parent's permission for emergency transportation and emergency medical treatment; (h) any known allergy of the child; (i) any known food sensitivity of the child; (j) any chronic medical condition that the child may have; (k) any instructions for special or nonroutine daily health care of the child; (l) any current ongoing medications that the child may be taking; and (m) any other special health instructions for the caregiver.	☐	☐		☐	☐	
100-6(12)(a)-(b)	The provider shall ensure that the admission and health assessment form is: (a) reviewed, updated, and signed or initialed by the parent at least annually; and (b) kept on-site for review by OL.	☐	☐		☐	☐	
100-6(13)(a)-(d)	Before admitting <u>any child</u> into the program, including the provider's or an employee's own children, the provider shall obtain the following documentation from the child's parent or guardian: (a) a record of current immunizations; (b) a medical schedule to receive required immunizations; (c) a legal exemption to current immunization requirements; or (d) a 90-day exemption for any foster child or child who is experiencing homeless. ASK - if they have immunizations for each child but you do not need to see it.	☐	☐		☐	☐	

100-6(14)		For each child in the program, including the provider's or employee's own child, the provider shall keep the child's current immunization records on-site for review by OL.	☐	☐		☐	☐	
100-6(15)		The provider shall submit the annual immunization report to the Utah Statewide Immunization Information System by the date specified by the department. REMIND providers to submit this when the report is due.	☐	☐		☐	☐	
R381-100-Section 7: Personnel and Training Requirements			R	UR	Date	CDI	TA	Notes
100-7(2)		The provider shall ensure that the center has a qualified director.	☐	☐		☐	☐	
100-7(3)(a)-(b)		The provider shall ensure that the director : (a) completes at least 20 hours of child care training each year based on the facility's license date, or at least 45 minutes of child care training each month they work if hired partway through the facility's licensing year; (b) completes the new director training offered by OL within 60 working days of assuming director duties; REMIND providers that they should be working on annual training throughout the year.	☐	☐		☐	☐	
100-7(3)(c)		The provider shall ensure that the director: (c) if hired after January 1, 2023, has completed the 2-1/2 hour preservice training offered by OL;	☐	☐		☐	☐	
100-7(5)		The provider shall ensure that the director is on duty at the facility for at least 20 hours a week during operating hours and has sufficient freedom from other responsibilities to manage the center and respond to emergencies.	☐	☐		☐	☐	
100-7(6)		The provider shall ensure that there is a director designee with authority to act on behalf of the director in the director's absence.	☐	☐		☐	☐	
100-7(7)(a)		The provider shall ensure that the director designee: (a) completes at least 20 hours of child care training each year based on the facility's license date, or at least 1-1/2 hours of child care training each month they work if hired partway through the facility's licensing year;	☐	☐		☐	☐	

100-7(7)(b)		The provider shall ensure that the director designee: (b) completes the director designee training offered by OL;	☐	☐		☐	☐	
100-7(7)(c)		The provider shall ensure that the director designee: (c) has current first aid and cardio pulmonary resuscitation (CPR) certification in accordance with Subsections R381-100-7(2) and (21);	☐	☐		☐	☐	
100-7(7)(d)		The provider shall ensure that the director designee: (d) if hired after January 1, 2023, has completed the 2-1/2 hour preservice training offered by OL before becoming involved with child care;	☐	☐		☐	☐	
100-7(8)		The provider shall ensure that the director or the director designee is present at the facility during business hours.	☐	☐		☐	☐	
100-7(9)(a)		The provider shall ensure that each caregiver: (a) complete at least 20 hours of child care training each year , based on the facility's license date, or at least 1-1/2 hours of child care training each month they work if hired partway through the facility's licensing year;	☐	☐		☐	☐	
100-7(9)(b)		The provider shall ensure that each caregiver: (b) completes the 2-1/2 hour preservice training offered by OL before becoming involved with child care.	☐	☐		☐	☐	
100-7(9)(e)(g)		The provider shall ensure that each caregiver: (e) is introduced to other program staff and to the staff member's assigned group; (g) reviews the information in each child's health assessment in the staff member's assigned group, including allergies, food sensitivities, and other individual needs.	☐	☐		☐	☐	
100-7(10)(a)		The provider shall ensure that any other staff including any driver, cook, and clerk: (a) completes the 2-1/2 hour preservice training offered by OL before becoming involved with child care;	☐	☐		☐	☐	
100-7(11)		The provider shall ensure that each volunteer is considered eligible by an OBP background check before becoming involved with child care.	☐	☐		☐	☐	
100-7(12)		The provider shall ensure that each guest or student intern who is registered and participating in a high school or college child care course wears a guest nametag .	☐	☐		☐	☐	

100-7(13)(a)-(b)		The provider shall ensure that each household member who is: (a) 12 to 17 years old is considered eligible by an OBP background check; and (b) 18 years old or older is considered eligible by an OBP background check that includes fingerprints.	☐	☐		☐	☐	
100-7(14)(a)-(b)		The provider shall ensure that an individual who provides an Individualized Educational Plan or Individualized Family Service plan services including any physical, occupational, or speech therapist: (a) provides identification before having access to the facility or to a child at the facility; and (b) has received the child's parent's permission for services to take place at the facility.	☐	☐		☐	☐	
100-7(17)(a)-(b)		The provider shall ensure that annual child care training includes at least each topic listed in: (a) Sections R381-100-7 through R381-100-24; and (b) Subsections R381-100-7(16)(a) through (o).	☐	☐		☐	☐	
100-7(18)(a)-(d)		The provider shall ensure that documentation of each individual's annual child care training is on-site for review by OL and includes the following: (a) date of the training; (b) name of the individual or organization that presented the training; (c) total hours or minutes of the training; and (d) training topic.	☐	☐		☐	☐	
100-7(19)(a)-(c)		The provider shall ensure that at least one staff member with a current Red Cross, American Heart Association, or equivalent pediatric first aid and CPR certification is present when a child is in care: (a) at each offsite activity; (b) at the facility; and (c) in each vehicle transporting a child.	☐	☐		☐	☐	
100-7(20)		The provider shall ensure that CPR certification includes hands-on testing .	☐	☐		☐	☐	
100-7(21)(a)-(c)		The provider shall ensure that the following records for each covered individual are on-site for review by OL: (a) the date of initial employment or association with the program; (b) a current pediatric first aid and CPR certification, if required in this rule; and (c) a six-week record of the times worked each day	☐	☐		☐	☐	

R381-100-Section 8: Background Checks		R	UR	Date	CDI	TA	Notes
100-8(1)(a)-(b)	Before a new covered individual becomes involved with child care, the provider shall use the licensing provider portal search to verify that the individual is eligible and: (a) associate that individual with the provider's facility; or (b) not associate the individual if the individual is associated with another CCL facility and the new individual will be at the facility for no more than one business day.	☐	☐		☐	☐	
100-8(2)(a)-(c)	Before a new covered individual who does not appear in the licensing provider portal search becomes involved with child care in the program, the provider must require the individual to submit an online background check application and fingerprints for any individual age 16 years old and older, except for individuals 12-17 years old who are only listed as household members, and: (a) authorize the individual's background check through the licensing provider portal; (b) pay any required fees; and (c) only allow the individual to be involved with child care if they have an eligible OBP background check determination.	☐	☐		☐	☐	
100-8(4)(a)-(b)	Within ten working days from when a child who resides in the facility turns 12 years old, the provider shall ensure that an online background check form is submitted; and (a) authorize the child's background check through the licensing provider portal; and (c) pay any required fees.	☐	☐		☐	☐	
100-8(11)	If a covered individual is considered not eligible by OBP, including if the individual has been convicted, has pleaded no contest, or is currently subject to a plea in abeyance or diversion agreement for a felony or misdemeanor, the provider shall prohibit that individual from being employed by the child care program or residing at the facility until the reason for the background check finding is resolved.	☐	☐		☐	☐	

100-8(13)		The provider and the covered individual shall notify OBP within 48 hours of becoming aware of a covered individual's arrest warrant, felony or misdemeanor arrest, charge, conviction, or LIS supported finding. Failure to notify OBP within 48 hours may result in disciplinary action, including license revocation.	☐	☐		☐	☐	
R381-100-Section 9: Facility			R	UR	Date	CDI	TA	Notes
100-9(1)		The provider shall ensure that there is at least 35 square feet of indoor space for each child in care, including the provider's or employee's own child.	☐	☐		☐	☐	
100-9(4)		The provider shall ensure that the number of children in care at any given time does not exceed the capacity identified on the license. ASK - for a total number including children being transported and on off site activities.	☐	☐		☐	☐	
100-9(5)(a)-(b)		(a) The provider shall ensure that any building or play structure on the premises constructed before 1978 that has peeling, flaking, chalking, or failing paint undergoes a test for lead. (b) If there is lead-based paint at the facility, the provider shall contact their local health department within five working days and follow required procedures for remediation of the lead hazard.	☐	☐		☐	☐	
100-9(6)		The provider shall ensure that each room and indoor area that children use is ventilated by mechanical ventilation or by windows that open and have screens.	☐	☐		☐	☐	
100-9(7)		The provider shall ensure that windows and glass doors within 36 inches from the floor or ground are made of safety or tempered glass or have a protective guard.	☐	☐		☐	☐	
100-9(8)		The provider shall ensure that rooms and areas have adequate light intensity for the safety of the children and the type of activity the provider is conducting.	☐	☐		☐	☐	
100-9(9)		The provider shall maintain the indoor temperature between 65 and 82 degrees Fahrenheit.	☐	☐		☐	☐	

100-9(10)(a)-(c)		The provider shall ensure that there is a working telephone : (a) at the facility; (b) during any offsite activity; and (c) in each vehicle while transporting a child.	☐	☐		☐	☐	
100-9(11)		The provider shall ensure that there is at least one working handwashing sink in each classroom or next to each classroom in any building constructed after July 1, 1997.	☐	☐		☐	☐	
100-9(12)(a)-(b)		The provider shall ensure that any room where an infant or toddler is cared for has: (a) one sink that is used exclusively for the preparation of food, bottles, and handwashing before food preparation, and another sink that is used only for handwashing after diapering and nonfood activities; or (b) one working sink that is used only for handwashing in the room, and bottle and food preparation is done in the kitchen and brought to the infant and toddler area by a non-diapering staff member.	☐	☐		☐	☐	
100-9(13)		The provider shall ensure that there is at least one working toilet and one working sink for each group of one to 25 children in the center who are two years old and older.	☐	☐		☐	☐	
100-9(14)		The provider shall ensure that there is a bathroom that provides privacy available for use by any school-age child.	☐	☐		☐	☐	
100-9(15)		The provider shall ensure that any child outdoors is in an enclosed area, except during offsite activities.	☐	☐		☐	☐	
100-9(16)(a)-(f)		The provider shall ensure that the outdoor area : (a) has a fence , wall or solid natural barrier that is at least four feet high encloses the outdoor area; (b) has at least 40 square feet of space for each child using the area at one time; (c) has no gaps five by five inches or greater in or under any fence or barrier; (d) has shade available to protect any child from excessive sun and heat when in the outdoor area; (e) is safely accessible to any child; and (f) the total square footage of the outdoor area accommodates at least one-third of the approved capacity at one time, or is at least 1,600 square feet.	☐	☐		☐	☐	

100-9(17)(a)-(c)	If there is a swimming pool on the premises that the provider does not empty after each use, the provider shall: (a) maintain the pool in a safe manner; (b) meet applicable state and local laws and ordinances related to the operation of a swimming pool; and (c) when not in use: (i) cover the pool with a commercially made safety enclosure that is installed according to the manufacturer's instructions or (ii) enclose the pool within at least a four-foot-high fence or solid barrier that is kept locked and that separates the pool from any other areas on the premises.	☐	☐		☐	☐	
100-9(18)(a)-(f)	The provider shall maintain any building and outdoor area in good repair and safe condition, including any: (a) ceiling, wall, and floor covering; (b) drape, blind, and other window covering; (c) entrance, exit, step, and walkway, including keeping them free of ice, snow, and other hazards; (d) furniture, toy, and material accessible to a child; (e) indoor and outdoor equipment; and (f) lighting, bathroom, and other fixture.	☐	☐		☐	☐	
100-9(19)(a)-(b)	The provider shall ensure that a protective barrier of at least three feet or higher exists for: (a) any accessible raised deck or balcony that is five feet or higher; and (b) any open stairwell that is five feet or deeper.	☐	☐		☐	☐	
100-9(20)(a)-(c)	If the facility is subdivided, any part of the building is rented out, or any area of the facility is shared including the outdoor area, OL may inspect the entire facility and the provider shall ensure that covered individuals in the facility comply with this rule, except when: (a) there is a separate entrance for the child care program; (b) there are no connecting interior doorways that can be used by unauthorized individuals; and (c) there is no shared access to the outdoor area used for child care.	☐	☐		☐	☐	
R381-100-Section 10: Ratios and Group Size		R	UR	Date	CDI	TA	Notes

100-10(1)(a)-(c)	As listed in Table 1 for a single-age group of children , the provider shall: (a) maintain at least the number of required caregivers; (b) not exceed the maximum group sizes; and (c) not exceed the number of children in the caregiver-to-child ratio.	☐	☐		☐	☐	
100-10(2)(a)-(d)	For a mixed-age group of children , the provider shall: (a) maintain at least the number of required caregivers; (b) not exceed the number of children in the caregiver-to-child ratio; (c) not exceed the maximum group sizes; and (d) separate any single-age group that reaches their maximum group size.	☐	☐		☐	☐	
100-10(3)(a)	For a mixed-age group of children including any infant and toddler , the provider shall ensure that: (a) an infant is only mixed with a toddler if: (i) the group has eight or fewer children; (ii) there are no more than three children younger than two years old in the group with one caregiver ; and (iii) there are at least two caregivers with the group if more than two children who are younger than 18 months old are present and the group has more than four children; Verify the single-age ratios are being maintained.	☐	☐		☐	☐	
100-10(3)(b)	For a mixed-age group of children including any infant and toddler, the provider shall ensure that: (b) if an older toddler and a two-year-old child are mixed, the provider shall ensure: (i) there is at least one caregiver for up to seven children; and (ii) there are at least two caregivers for eight and up to 14 children in the group; and Verify the single-age ratios are being maintained.	☐	☐		☐	☐	

100-10(3)(c)	For a mixed-age group of children including any infant and toddler, the provider shall ensure that: (c) an older toddler and an older child may only be mixed, except when only mixed with a two-year-old child, when: (i) the group has eight or fewer children; (ii) there are no more than three older toddlers in the group; and (iii) there are at least two caregivers with the group if more than three younger toddlers are present and the group has more than five children. Verify the single-age ratios are being maintained.	☐	☐		☐	☐	
100-10(4)(a)-(b)	For a mixed-age group of children, not including any infant and toddler , the provider shall ensure that: (a) the caregiver-to-child ratio is determined by the age of the oldest child present in the group minus one child of that age group; and (b) the maximum group size is determined by the age of the oldest child present in the group, minus two children of that same age group.	☐	☐		☐	☐	
100-10(5)(a)-(c)	During nap time , the provider shall ensure that the caregiver-to-child ratio is doubled only if: (a) each child in the group is at least 18 months old ; (b) each child in the group is in a restful and nonactive state ; and (c) the caregiver supervising the napping children can contact another on-site caregiver without leaving the children unattended.	☐	☐		☐	☐	
100-10(6)	The provider shall ensure that there are at least two caregivers present when there is only one group of children on the premises and that group has more than eight children, or more than two infants or toddlers.	☐	☐		☐	☐	
100-10(7)(a)-(b)	The provider shall include the provider's and employee's children age four years old or older in care: (a) in the group size when the parent of the child is working at the facility; and (b) in the group size and the caregiver-to-child ratio when the parent of the child is not working at the facility.	☐	☐		☐	☐	

100-10(8)(a)-(c)		The provider may include in the caregiver-to-child ratio any: (a) caregiver; (b) student intern who is registered in a high school or college child care course; and (c) volunteer who is 16 years old or older.	☐	☐		☐	☐	
100-10(9)		The provider shall ensure that any guest does not count in caregiver-to-child ratios.	☐	☐		☐	☐	
R381-100-Section 11: Child Supervision and Security			R	UR	Date	CDI	TA	Notes
100-11(1)(a)-(g)		The provider shall ensure that each caregiver provides and maintains active supervision of each child, including: (a) for children younger than five years old, remaining physically present in the room or area with the children; and (b) for school-age children, a caregiver can hear the children and is close enough to intervene. (c) focusing attention on the children and not on caregivers' personal interests; (d) interacting in-person with the children at least every 15 minutes; (e) knowing the number of children in their care at any time; (f) positioning themselves so each child in their assigned group is actively supervised; and (g) remaining aware of the entire group of children even when interacting with a smaller group or an individual child. ASK - how many children are in your care, including those not in this area?	☐	☐		☐	☐	
100-11(2)(a)-(c)		The provider shall ensure a 16 or 17 year old staff or household member may only have unsupervised contact with a child in care, including during offsite activities and transportation, if: (a) the director or the director designee is physically present and available as needed; (b) the staff or household member is left unsupervised for no more than two consecutive hours per group; and (c) the staff or household member is not a volunteer.	☐	☐		☐	☐	
100-11(3)		The provider may not assign a staff member, volunteer, or household member who is younger than 16 years old to care for or supervise any child in care.	☐	☐		☐	☐	

100-11(4)		The provider shall ensure that any guest or student intern who is registered and participating in a high school or college child care course does not have unsupervised contact with any child in care, including during any offsite activity.	☐	☐		☐	☐	
100-11(5)		The provider shall ensure that any parent of a child in care does not have unsupervised contact with any child in care, except with their own child.	☐	☐		☐	☐	
100-11(6)(a)-(e)		The provider shall ensure that when video cameras or mirrors are used to supervise napping children: (a) the napping room is adjacent to a non-napping room; (b) the staff member moves children who wake up to the non-napping room; (c) there is a camera or mirror positioned so the staff member can see and hear the child; (d) there is a staff member in the non-napping room; and (e) there is an open door without a barrier, including a gate, between the napping room and the non-napping room. ASK - what is the supervision policy during nap time?	☐	☐		☐	☐	
100-11(7)		The provider shall ensure that a blanket or other item is not placed over sleeping equipment in a way that prevents the caregiver from seeing the sleeping child.	☐	☐		☐	☐	
100-11(8)		The provider shall ensure that a parent has access to their child and the areas used to care for their child when their child is in care.	☐	☐		☐	☐	
100-11(9)(a)-(f)		To maintain security and supervision of children, the provider shall ensure that: (a) any individual signing a child in and out uses an identifier, including a signature, initials, or electronic code; (b) each child is signed in and out in accordance with this section; (c) only a child's parent or an individual with written authorization from the parent may sign-out a child; (d) photo identification is required if the individual signing the child out is unknown to the provider; (e) the sign-in and sign-out records include the date and time each child arrives and leaves; and (f) there is written permission from the child's parent if children sign themselves in or out.	☐	☐		☐	☐	

100-11(10)(a)-(b)		In an emergency, the provider shall accept the parent's verbal authorization to release a child if the provider can confirm the identity of: (a) the person giving verbal authorization; and (b) the person picking up the child.	☐	☐		☐	☐	
100-11(11)		The provider shall ensure that a six-week record of each child's daily attendance, including sign-in and sign-out records, is kept on-site for review by OL.	☐	☐		☐	☐	
R381-100-Section 12: Child Guidance and Interaction			R	UR	Date	CDI	TA	Notes
100-12(1)		The provider shall ensure that no child is subjected to physical, emotional, or sexual abuse while in care.	☐	☐		☐	☐	
100-12(2)		The provider shall inform each child, each parent, and anyone who interacts with any child in care of the center's behavioral expectations and how any misbehavior will be handled.	☐	☐		☐	☐	
100-12(5)(a)-(g)		The provider shall ensure that each interaction with a child does not include: (a) any action that produces physical pain or discomfort, including hitting, spanking, shaking, biting, or pinching; (b) any form of corporal punishment; (c) any form of emotional mistreatment; (d) confining a child in a closet, locked room, or other enclosure including a box, cupboard, or cage; (e) forcing or withholding food, rest, or toileting; (f) restraining a child's movement by binding, tying, or any other form of restraint that exceeds gentle, passive restraint; or (g) shouting at children.	☐	☐		☐	☐	
100-12(6)		Any individual who witnesses or suspects that a child has been subjected to abuse, neglect, or exploitation shall immediately notify Child Protective Services or law enforcement as required in Section 80-2-602.	☐	☐		☐	☐	
R381-100-Section 13: Child Safety and Injury Prevention			R	UR	Date	CDI	TA	Notes
100-13(1)		The provider shall ensure that any child and staff use each building, outdoor area, toy, and any equipment safely and as intended by the manufacturer to prevent injury to children.	☐	☐		☐	☐	

100-13(2)		The provider shall ensure that any poisonous or harmful plant is inaccessible to children.	☐	☐		☐	☐	
100-13(3)		The provider shall ensure that any sharp object , edge, corner, or point that could cut or puncture skin is inaccessible to children.	☐	☐		☐	☐	
100-13(4)		The provider shall ensure that any choking hazard is inaccessible to any child younger than three years old.	☐	☐		☐	☐	
100-13(5)		The provider shall ensure that any strangulation hazard , including any rope, cord, chain, and wire attached to a structure and long enough to encircle a child's neck is inaccessible to children.	☐	☐		☐	☐	
100-13(6)		The provider shall ensure that any tripping hazard including unsecured flooring, any rug with a curled edge, or cord in a walkway is inaccessible to children.	☐	☐		☐	☐	
100-13(7)		The provider shall ensure that any empty plastic bag large enough for a child's head to fit inside, any latex glove, or balloon is inaccessible to any child younger than five years old.	☐	☐		☐	☐	
100-13(8)		The provider shall ensure that standing water that measures two inches or deeper and five by five inches or greater in diameter is inaccessible to children.	☐	☐		☐	☐	
100-13(9)(a)-(d)		The provider shall ensure that any toxic or hazardous chemical, including any cleaner, insecticide, lawn product, and flammable, corrosive, and reactive material is: (a) disposed of properly; (b) inaccessible to any child; (c) stored in a container labeled with the contents of the container; and (d) used according to manufacturer instructions.	☐	☐		☐	☐	

100-13(10)(a)-(e)		The provider shall ensure that the following items are inaccessible to children: (a) cigarette lighters; (b) hot wax or other hot substances; (c) matches; (d) open flames; and (e) when in use, portable space heaters, wood burning stoves, and fireplaces.	☐	☐		☐	☐	
100-13(11)(a)-(b)		The provider shall ensure that the following items are inaccessible to a child: (a) any live electrical wire; and (b) for a child younger than five years old, any electrical outlet and surge protector without a protective cap or safety device when not in use.	☐	☐		☐	☐	
100-13(12)(a)-(b)		Unless used and stored as allowed by any state or federal law, the provider shall ensure that any firearm , including a gun, muzzleloader, rifle, shotgun, handgun, pistol, and automatic gun, is: (a) locked in a cabinet or area using a key, combination lock, or fingerprint lock; and (b) stored unloaded and separate from ammunition.	☐	☐		☐	☐	
100-13(13)		The provider shall ensure that any weapon , including a paintball gun, BB gun, airsoft gun, sling shot, arrow, and mace is inaccessible to children.	☐	☐		☐	☐	
100-13(14)		The provider shall ensure that any alcohol, illegal substance, and sexually explicit material is inaccessible and not used on the premises, during any offsite activity, or in any center vehicle any time a child is in care.	☐	☐		☐	☐	
100-13(15)		The provider shall ensure that an outdoor source of drinking water , including individually labeled water bottles, a pitcher of water and individual cups, or a working water fountain is available to each child when the outside temperature is 75 degrees Fahrenheit or higher.	☐	☐		☐	☐	
100-13(16)		The provider shall ensure that each area accessible to a child is free of any heavy or unstable object that a child could pull down on themselves, including any furniture, unsecured television, and standing ladder.	☐	☐		☐	☐	
100-13(17)		The provider shall ensure that hot water accessible to a child does not exceed 120 degrees Fahrenheit.	☐	☐		☐	☐	

100-13(18)		The provider shall ensure that highchairs that are used by children have T-shaped safety straps or safety devices that are used when a child is in the chair.	☐	☐		☐	☐	
100-13(19)		The provider shall ensure that infant walkers with wheels are inaccessible to children.	☐	☐		☐	☐	
100-13(20)(a)-(d)		The provider shall ensure that tobacco, e-cigarette, e-juice, e-liquid, or similar product is inaccessible and, in compliance with the Utah Indoor Clean Air Act described in Section 26B-7-503 and Rule R392-510, is not used: (a) in a facility or any other building when a child is in care; (b) in any vehicle that is being used to transport a child in care; (d) in any outdoor area or within 25 feet of any outdoor area occupied by a child in care; (c) within 25 feet of any entrance to a facility or other building occupied by a child in care.	☐	☐		☐	☐	
R381-100-Section 14: Emergency Preparedness, Response, and Recovery			R	UR	Date	CDI	TA	Notes
100-14(1)(a)-(d)		The provider shall develop and follow a written emergency preparedness, response, and recovery plan that: (a) includes a procedure for: (i) accommodating a child with a disability; (ii) accommodating a child with a chronic medical condition; (iii) accommodating any infant and toddler; (iv) communication with and reunification of families; (v) continuity of operations; (vi) evacuation; (vii) lockdown; (viii) relocation; and (ix) shelter in place. (b) includes instructions to follow if there is an allergy, serious reaction to food, or any other trigger that may affect a child's health; (c) is available for review by any parent, staff member, and OL during business hours; and (d) is followed if an emergency happens, unless otherwise instructed by emergency personnel.	☐	☐		☐	☐	

100-14(2)		The provider shall post the center's street address and any emergency numbers , including at least fire, police, and poison control, near each telephone in the center or in an area clearly visible to anyone needing the information.	☐	☐		☐	☐	
100-14(3)		The provider shall keep first-aid supplies in the center, including at least antiseptic, bandages, and tweezers.	☐	☐		☐	☐	
100-14(4)		The provider shall conduct a fire evacuation drills at least quarterly and ensure each drill includes a complete exit of each child, staff, and volunteer from the building.	☐	☐		☐	☐	
100-14(5)(a)-(e)		The provider shall document each fire drill , including: (a) any problems encountered and remediation; (b) the date and time of the drill; (c) the name of the individual supervising the drill; (d) the number of children participating; and (e) the total time to complete the evacuation.	☐	☐		☐	☐	
100-14(6)		The provider shall conduct a drill for disasters , other than fires, at least once every six months.	☐	☐		☐	☐	
100-14(7)(a)-(e)		The provider shall document each disaster drill , including: (a) any problems encountered and remediation; (b) the date and time of the drill; (c) the name of the individual supervising the drill; (d) the number of children participating; and (e) the type of disaster, including earthquake, flood, prolonged power or water outage, or tornado;	☐	☐		☐	☐	
100-14(8)		The provider shall vary the days and times when fire and other disaster drills are held.	☐	☐		☐	☐	
100-14(9)		The provider shall keep documentation of the previous 12 months of fire and disaster drills on-site for review by OL.	☐	☐		☐	☐	

100-14(10)(a)-(c)	The provider shall: (a) give each parent a written report on the day of occurrence of each incident, accident, or injury involving their child; (b) ensure the report has the signatures of the caregivers involved, the center director or director designee, and the individual picking up the child; and (c) if a school-age child signs themselves out of the center, send a copy of the report to the parent on the day following the occurrence. ASK - is this is being done?	☐	☐		☐	☐	
100-14(11)	If a child is injured and the injury appears serious but not life-threatening, the provider shall submit a critical incident report to OL within one business day and contact the child's parent immediately.	☐	☐		☐	☐	
100-14(12)(a)-(c)	If a life-threatening injury to a child, or an injury that poses a threat of the loss of vision, hearing, or a limb happens, the provider shall submit a critical incident report to OL within one business day and: (a) call emergency personnel immediately; (b) contact the parent after emergency personnel are called; and (c) if the parent cannot be reached, try to contact the child's emergency contact individual.	☐	☐		☐	☐	
100-14(13)	If a child is injured while in care and receives medical attention, or for a child fatality, the provider shall submit a critical incident report to OL within one business day.	☐	☐		☐	☐	
100-14(14)	The provider shall keep a six-week record of each incident, accident, and injury report on-site for review by OL.	☐	☐		☐	☐	
R381-100-Section 15: Health and Infection Control		R	UR	Date	CDI	TA	Notes

100-15(1)(a)-(f)		The provider shall maintain the building, furnishings, equipment, and outdoor area including keeping: (a) any frequently touched surface, including each doorknob and light switch, clean and sanitized; (b) each area and any equipment used for the storage, preparation, and service of food clean and sanitized; (c) each surface free of rotting food or a build-up of food; (d) each wall and floor clean and free of spills, dirt, and grime; (e) the building and grounds free of a build-up of litter and garbage; and (f) the building and grounds free of animal feces.	☐	☐		☐	☐	
100-15(2)		The provider shall take safe and effective measures to prevent and eliminate the presence of insects, rodents, and other pests.	☐	☐		☐	☐	
100-15(3)(a)-(c)		The provider shall clean and sanitize any toy and material used by a child: (a) at least once a week or more often if needed; (b) after being put in a child's mouth and before another child plays with the toy; and (c) after being contaminated by a body fluid.	☐	☐		☐	☐	
100-15(4)		The provider shall ensure that any fabric toy and item including any stuffed animal, cloth doll, pillow cover, and dress-up clothing is machine washable and if used, washed at least each week or as needed.	☐	☐		☐	☐	
100-15(5)		The provider shall clean and sanitize each highchair tray before each use.	☐	☐		☐	☐	
100-15(6)		The provider shall clean and sanitize each water play table or tub daily, if used by a child.	☐	☐		☐	☐	
100-15(7)		The provider shall clean and sanitize each bathroom surface including each toilet, sink, faucet, toilet and sink handle, and counter each business day.	☐	☐		☐	☐	

100-15(8)		The provider shall clean and sanitize each potty chair after each use.	☐	☐		☐	☐	
100-15(9)		The provider shall ensure that toilet paper is accessible and kept in a dispenser that is accessible to each child.	☐	☐		☐	☐	
100-15(10)		The provider shall post handwashing procedures that are readily visible from each handwashing sink and shall ensure that each staff follow the procedures.	☐	☐		☐	☐	
100-15(11)(a)-(g)		The provider shall ensure that each staff member and volunteer washes their hands thoroughly with liquid soap and running water: (a) after cleaning up or taking out garbage; (b) after contact with a body fluid; (c) after using the toilet or helping a child use the toilet; (d) before and after eating meals and snacks or feeding a child; (e) before handling or preparing food or bottles; (f) upon arrival; and (g) when coming in from outdoors.	☐	☐		☐	☐	
100-15(13)(a)-(f)		The provider shall ensure that each child washes their hands thoroughly with liquid soap and running water: (a) after contact with a body fluid; (b) after using the toilet; (c) before and after eating meals and snacks; (d) before using a water play table or tub; (e) upon arrival; and (f) when coming in from outdoors.	☐	☐		☐	☐	
100-15(14)		The provider shall ensure that only single-use towels from a covered dispenser or an electric hand dryer is used to dry hands.	☐	☐		☐	☐	
100-15(15)		The provider shall ensure that any personal hygiene items , including a toothbrush, comb, and hair accessory, are not shared and are stored so they do not touch each other or they are sanitized between each use.	☐	☐		☐	☐	

100-15(16)(a)-(b)		The provider shall ensure that any pacifier, bottle, and nondisposable drinking cup is: (a) labeled with each child's name or individually identified; and (b) not shared, or washed and sanitized before being used by another child.	☐	☐		☐	☐	
100-15(17)		The provider shall ensure the prompt change of a child's clothing if the child has a toileting accident.	☐	☐		☐	☐	
100-15(18)(a)-(c)		The provider shall ensure that children's clothing that is wet or soiled from a body fluid is: (a) not rinsed or washed at the center; (b) placed in a leak proof container that is labeled with the child's name; and (c) returned to the parent or thrown away with parental consent.	☐	☐		☐	☐	
100-15(20)		The provider may not care for a child who is ill with an infectious disease at the center except when the child shows signs of illness after arriving at the center.	☐	☐		☐	☐	
100-15(21)(a)-(b)		If a child becomes ill while in care : (a) the provider shall contact the child's parent or, if the parent cannot be reached, an individual listed as the emergency contact to immediately pick up the child; and (b) if the child is ill with an infectious disease, the provider shall make the child comfortable in a safe, supervised area that is separated from any other child until the parent arrives.	☐	☐		☐	☐	

100-15(24)(a)-(c)	To prevent contamination of food, the spread of foodborne illnesses, and other diseases, the provider shall ensure that: (a) an individual who cares for any diapered child only prepares food for the children in their care, and they do not: (i) prepare food outside of the room used by any diapered child; or (ii) prepare food for any other child and adult in the facility; (b) an individual who prepares food in the kitchen does not help in toileting any child; and (c) an individual with an infectious disease, or showing symptoms including diarrhea, fever, coughing, or vomiting, does not prepare or serve foods.	☐	☐		☐	☐	
R381-100-Section 16: Food and Nutrition		R	UR	Date	CDI	TA	Notes
100-16(1)	The provider shall ensure that each child two years old and older is offered a meal or snack at least once every three hours when services are provided for three or more hours.	☐	☐		☐	☐	
100-16(2)(a)-(e)	If the provider supplies food for children's meals or snacks, the provider shall ensure that: (a) the meal service meets local health department food service rules; (b) the foods that are served meet the nutritional requirements of the USDA Child and Adult Care Food Program (CACFP) whether or not the provider participates in the CACFP; (c) the provider uses the CACFP meal pattern requirements, the standard OL-approved menus, or menus approved by a registered dietitian, and that dietitian approval is noted and dated on the menus, and current within the past five years; (d) the current week's menu is posted for review by parents and OL; and (e) if not participating or in good standing with the CACFP, keep a six-week record of foods served at each meal and snack.	☐	☐		☐	☐	
100-16(3)(a)-(b)	The provider shall ensure that the individual who serves food to a child: (a) is aware of each child in their assigned group who has any food allergy or sensitivity; and (b) ensures that a child is not served the food that the child is allergic or sensitive to.	☐	☐		☐	☐	

100-16(4)		The provider may not place children's food on a bare table , and shall serve a child's food on a dish, napkin, or sanitary highchair tray, except an individual finger food, including a cracker, that may be placed directly in a child's hand.	☐	☐		☐	☐	
100-16(5)(a)-(c)		If a parent brings food and drink for their child's use , the provider shall ensure that the food and drink is: (a) consumed only by that child; (b) labeled with the child's name; and (c) refrigerated if needed.	☐	☐		☐	☐	
R381-70-Section 17. Medications.			☐	Check here if there are NO Medications on the premises and the provider does not administer medications.				
			☐	Check here if there are NO Medications on the premises, but the provider does administer them when needed.				
100-17(1)		The provider shall lock any nonrefrigerated medication or store it at least 48 inches above the floor.	☐	☐		☐	☐	
100-17(2)		The provider shall lock any refrigerated medication or store it at least 36 inches above the floor and, if liquid, store it in a separate leakproof container.	☐	☐		☐	☐	
100-17(3)(a)-(c)		If a parent supplies any over-the-counter or prescription medication , the provider shall ensure that medication: (a) is labeled with the child's full name; (b) is stored in the original or pharmacy container; and (c) has the original label.	☐	☐		☐	☐	
100-17(4)		The provider shall obtain a written medication permission form completed and signed by the parent before administering any medication supplied by the parent for their child.	☐	☐		☐	☐	
100-17(5)(a)-(d)		The provider shall ensure that the medication permission form includes at least: (a) a parent signature and the date signed; (b) any written instructions for administration; (c) the name of the child; and (d) the name of the medication.	☐	☐		☐	☐	

100-17(6)(a)-(d)		The provider shall ensure that instructions for administering the medication include at least: (a) how the medication will be given; (b) the disease or condition being treated; (c) the dosage; and (d) the times and dates to administer the medication.	☐	☐		☐	☐	
100-17(7)(a)-(b)		If the provider supplies an over-the-counter medication for a child's use , the provider shall ensure that no staff administer the medication to any child without previous parental consent for each instance it is given. The provider shall ensure that the consent is: (a) written; or (b) verbal, if the date and time of the consent is documented and signed by the parent upon picking up their child.	☐	☐		☐	☐	
100-17(8)(a)-(d)		The provider shall ensure that the staff administering the medication: (a) checks the medication label to confirm the child's name if the parent supplied the medication; (b) checks the medication label or the package to ensure that a child is not given a dosage larger than that recommended by the health care professional or manufacturer; (c) washes their hands; and (d) administers the medication.	☐	☐		☐	☐	
100-17(9)(a)-(c)		The provider shall ensure that immediately after administering a medication, the staff giving the medication records: (a) any error in administering the medication or adverse reactions; (b) the date, time, and dosage of the medication given; and (c) their signature or initials.	☐	☐		☐	☐	
100-17(10)		The provider shall report to the parent a child's adverse reaction to a medication or error in administration the medication immediately upon recognizing the reaction or error, or after notifying emergency personnel if the reaction is life-threatening.	☐	☐		☐	☐	
100-17(11)		The provider shall notify the parent before the scheduled medication dosage to a child if the provider chooses not to administer medication as instructed by the parent.	☐	☐		☐	☐	

100-17(12)		The provider shall keep a six-week record of medication permission and administration forms on-site for review by OL.	☐	☐		☐	☐	
R381-100-Section 18: Activities			R	UR	Date	CDI	TA	Notes
100-18(1)		The provider shall offer daily activities that support each child's healthy physical, social, emotional, cognitive, and language development.	☐	☐		☐	☐	
100-18(2)		The provider shall ensure that daily activities include outdoor play as weather and air quality allow.	☐	☐		☐	☐	
100-18(3)		The provider shall ensure that physical development activities include light, moderate, and vigorous physical activity for a daily total of at least 15 minutes for every two hours children spend in the program.	☐	☐		☐	☐	
100-18(4)(a)-(b)		For each preschool and school-age group, the provider shall post a daily schedule that includes: (a) activities that support a child's healthy development; and (b) the times activities occur including at least meal, snack, nap or rest, and outdoor play times.	☐	☐		☐	☐	
100-18(5)		The provider shall ensure that any toy, material, and equipment needed to support a child's healthy development is available to each child.	☐	☐		☐	☐	
100-18(6)(a)-(c)		Except for occasional special events, the provider shall ensure that each child's primary screen time activity on media including any television, cell phone, tablet, and computer is: (a) not allowed for a child zero to 17 months old; (b) limited for children 18 months to four years old to one hour a day, or five hours a week with a maximum screen time of two hours per activity; and (c) planned to address the needs of a child five to 12 years old.	☐	☐		☐	☐	

100-18(7)(a)-(f)	If the provider offers swimming activities, or if a wading pool is used, the provider shall ensure that: (a) a caregiver stays at the pool supervising when a child is in the pool or has access to the pool, and when an accessible pool has water in it; (b) any diapered child wears a swim diaper when the child is in the pool; (c) each lifeguard and pool personnel does not count toward the caregiver-to-child ratio; (d) each wading pool is emptied and sanitized after use by each group of children; (e) if the pool is deeper than four feet, there is a lifeguard on duty who is certified by the Red Cross or another approved certification program any time a child has access to the pool; and (f) the parent gives permission before their child uses the	☐	☐		☐	☐	
100-18(8)(a)-(f)	If the provider offers offsite activities, the provider shall ensure that: (a) a child's name is not used on a nametag, t-shirt, or in any other visible way; (b) each child wears or carries with them the name and phone number of the center; (c) first aid supplies, including at least antiseptic, bandages, and tweezers are available; (d) the child's parent gives written consent before each activity; (e) the required staff-to-child ratio and supervision are maintained during the entire activity; and (f) there is a way for each child and caregiver to wash their hands with soap and water, or, if there is no source	☐	☐		☐	☐	
100-18(9)(a)-(e)	The provider shall ensure that a caregiver with the children takes the written emergency information and releases for each child in the group on each offsite activity, and that the information includes at least: (a) the child's name; (b) the parent's name and phone number; (c) the name and phone number of a person to notify if there is an emergency and the parent cannot be contacted; (d) the name of any person authorized by the parents to pick up the child; and (e) current emergency medical treatment and emergency medical transportation releases.	☐	☐		☐	☐	
		☐	Check here if there is no play equipment				
R381-100-Section 19: Play Equipment		☐	Check here if the cushioning depth could not be assessed due to frozen ground				

			☐ Check here if the cushioning is unitary, pour-in-place, or tile that does not require measurements				
100-19(1)		The provider shall ensure that each child using play equipment uses it safely and as intended by the manufacturer.	☐	☐		☐	☐
100-19(2)		The provider shall ensure that the highest designated play surface on any stationary play equipment used by infants or toddlers does not exceed three feet in height.	☐	☐		☐	☐
100-19(3)		The provider shall ensure that any swings used by an infant or toddler has an enclosed seat.	☐	☐		☐	☐
100-19(4)(a)-(c)		The provider shall ensure that any stationary play equipment has a surrounding use zone that extends from the outermost edge of the equipment and that, with the exception of a swing, stationary play equipment that is: (a) used by an infant or toddler has at least a three-foot use zone if any designated play surface is higher than 18 inches; (b) used by a preschooler has at least a six-foot use zone if any designated play surface is higher than 20 inches; and (c) used by a school-age child has at least a six-foot use zone if any designated play surface is higher than 30 inches.	☐	☐		☐	☐
100-19(5)		The provider shall ensure that the use zone in the front and rear of a single-axis, enclosed swing extends at least twice the distance of the swing pivot point to the swing seat.	☐	☐		☐	☐
100-19(6)		The provider shall ensure that the use zone in the front and rear of a single-axis swing extends at least twice the distance of the swing pivot point to the ground.	☐	☐		☐	☐
100-19(7)(a)-(b)		The provider shall ensure that the use zone for a multi-axis swing , including a tire swing, extends: (a) at least the measurement of the suspending rope or chain plus three feet, if the swing is used by infants or toddlers; or (b) at least the measurement of the suspending rope or chain plus six feet, if the swing is used by preschoolers or school-age children.	☐	☐		☐	☐

100-19(8)		The provider shall ensure that the use zone for a merry-go-round extends at least six feet in any direction from its outermost edge.	☐	☐		☐	☐	
100-19(9)(a)-(b)		The provider shall ensure that the use zone for a spring rocker extends: (a) at least three feet from the outermost edge of the rocker when at rest; or (b) at least six feet from the outermost edge of the rocker when at rest if the seat is higher than 20 inches, and the rocker is used by preschoolers or school-age children.	☐	☐		☐	☐	
100-19(10)(a)-(d)		The provider shall ensure that each use zone does not overlap with the use zone of any other piece of play equipment when the use zone is: (a) in front of a slide; (b) in the front and rear of any single-axis swing, including a single-axis enclosed swing; (c) that of a multi-axis swing; and (d) that of a merry-go-round, if the platform diameter measures 20 inches or more.	☐	☐		☐	☐	
100-19(11)(a)-(b)		Unless prohibited in Subsection R381-100-19(10), the provider shall ensure that the use zones of play equipment only overlap when: (a) the equipment is used by an infant or toddler, and there is at least three feet between each piece of equipment; or (b) the equipment is used by a preschooler or school-age child and there is at least six feet between each piece of equipment if the designated play surface is 30 inches or lower, or there is at least nine feet between each piece of equipment if the designated play surface is higher than 30 inches.	☐	☐		☐	☐	
100-19(12)		The provider shall ensure that, when in use, stationary play equipment is not placed on a hard surface including concrete, asphalt, dirt, and the bare floor.	☐	☐		☐	☐	

100-19(13)		The provider shall ensure that protective cushioning covers the entire surface of each required use zone and that its depth or thickness is determined by the highest designated play surface of the equipment.	☐	☐		☐	☐	
100-19(14)(a)-(c)		If the provider uses sand, gravel, or shredded tires as protective cushioning , the provider shall ensure that: (a) the depth of the material meets the guidelines in Table 2. (b) the cushioning is periodically checked for compaction and if compacted, loosened to the depth listed in Table 2; and (c) if the material cannot be loosened to the depth listed in Table 2 due to extreme weather conditions, a child may not play on the equipment until the material can be loosened to the required depth.	☐	☐		☐	☐	
100-19(15)(a)-(c)		If the provider uses shredded wood products as protective cushioning , the provider shall: (a) ensure the depth of the shredded wood meets the guidelines in Table 3; (b) ensure there is adequate drainage under the material; and (c) keep on-site for review by OL documentation from the manufacturer that the wood product is protective cushioning.	☐	☐		☐	☐	
100-19(16)		If the provider uses a unitary cushioning, the provider shall keep on-site for review by OL documentation from the manufacturer specifying that the material is playground cushioning .	☐	☐		☐	☐	
100-19(17)(a)-(b)		If the provider uses a unitary cushioning, the provider shall ensure that the cushioning material is securely installed, so that it cannot be: (a) displaced when a child jumps, runs, walks, lands, or moves on it; or (b) moved or picked up by a child.	☐	☐		☐	☐	

100-19(18)(a)-(c)		The provider shall ensure that a play equipment platform that is more than: (a) 18 inches above the floor or ground and used by an infant or toddler has a protective barrier that is at least 24 inches high ; (b) 30 inches above the floor or ground and used by a preschooler has a protective barrier that is at least 29 inches high ; and (c) 48 inches above the floor or ground and used by a school-age child has a protective barrier that is at least 38 inches high .	☐	☐		☐	☐	
100-19(19)		The provider shall ensure that there is no gap greater than 3-1/2 inches in or under a required protective barrier on a play equipment platform.	☐	☐		☐	☐	
100-19(20)		The provider shall ensure that stationary play equipment is stable or securely anchored.	☐	☐		☐	☐	
100-19(21)		The provider shall ensure that there is no trampoline on the premises that are accessible to any child in care.	☐	☐		☐	☐	
100-19(22)		The provider shall ensure that there is no entrapment hazard on or within the use zone of any piece of stationary play equipment.	☐	☐		☐	☐	
100-19(23)		The provider shall ensure that there is no strangulation hazard on or within the use zone of any piece of stationary play equipment.	☐	☐		☐	☐	
100-19(24)		The provider shall ensure that there is no crush, shearing, or sharp edge hazard on or within the use zone of any piece of stationary play equipment.	☐	☐		☐	☐	
100-19(25)		The provider shall ensure that there is no tripping hazard including any concrete footing, tree stump, tree root, or rock within the use zone of any piece of stationary play equipment.	☐	☐		☐	☐	
R381-70-Section 20. Transportation.			☐	Check here if the provider does not transport children				
			☐	Check here if the vehicle was not on site during the inspection				

100-20(2)(a)-(e)		The provider shall ensure that each vehicle used for transporting children: (a) is enclosed with a roof or top; (b) is equipped with safety restraints; (c) has a current vehicle registration; (d) is maintained in a safe and clean condition; and (e) contains first aid supplies, including at least antiseptic, bandages, and tweezers.	☐	☐		☐	☐	
100-20(3)(a)-(c)		The provider shall ensure that the safety restraints in each vehicle that transports children are: (a) appropriate for the age and size of each child who is transported, as required by law; (b) properly installed; and (c) in safe condition and working order.	☐	☐		☐	☐	
100-20(4)(a)-(i)		The provider shall ensure that the driver of each vehicle who is transporting children: (a) is at least 18 years old; (b) has and carries with them a current, valid driver's license for the type of vehicle being driven; (c) has with them the emergency contact information outlined in Subsection R381-100-18(9) for each child being transported; (d) ensures that each child being transported is in an individual safety restraint as required by law; (e) ensures that the inside vehicle temperature is between 60 and 85 degrees Fahrenheit; (f) ensures that each child stay seated while the vehicle is moving; (g) ensures that the vehicle is locked during transport; (h) never leaves a child in the vehicle unattended by an adult; and (i) never leaves the keys in the ignition when not in the driver's seat.	☐	☐		☐	☐	

100-20(5)(a)-(d)	If the provider walks or uses public transportation to transport a child to or from a facility, the provider shall ensure that: (a) each child being transported has a completed transportation permission form signed by their parent; (b) a caregiver goes with actively and supervises each child; (c) a caregiver transporting a child has emergency contact information outlined in Subsection R381-100-18(9) and a release for each child being transported; and (d) the caregiver-to-child ratio is maintained.	☐	☐		☐	☐	
100-20-(6)(a)-(b)	The provider shall: (a) have transport liability insurance; or (b) inform parents in writing that the provider does not have transport liability insurance.	☐	☐		☐	☐	
R381-100-Section 21: Animals		☐	Please check this box if there are no animals on the premises.				
100-21(1)	The provider shall inform each parent of the kinds of animals allowed at the facility.	☐	☐		☐	☐	
100-21(2)(a)-(c)	The provider shall ensure that there is no animal on the premises that: (a) has a history of biting even one individual; (b) has a history of dangerous, attacking, or aggressive behavior; or (c) is naturally aggressive.	☐	☐		☐	☐	
100-21(3)	The provider shall ensure that any animal at the facility is clean and free of obvious disease or health problem that could adversely affect a child.	☐	☐		☐	☐	
100-21(4)	The provider shall ensure that there is no animal or animal equipment in food preparation or eating areas.	☐	☐		☐	☐	
100-21(5)	The provider shall ensure that no child younger than five years old assists with the cleaning of any animal or animal cage, pen, or equipment.	☐	☐		☐	☐	
100-21(6)	If a school-age child helps in the cleaning of animals or animal equipment, the provider shall ensure that the child washes their hands immediately after cleaning the animal or equipment.	☐	☐		☐	☐	

100-21(7)		The provider shall ensure that each child and staff wash their hands immediately after playing with or touching any reptile and amphibian.	☐	☐		☐	☐	
100-21(8)		The provider shall ensure that any dog, cat, and ferret that the facility houses have current rabies vaccinations.	☐	☐		☐	☐	
100-21(9)		The provider shall keep current animal vaccination records on-site for review by OL.	☐	☐		☐	☐	
R381-100-Section 22: Rest and Sleep			R	UR	Date	CDI	TA	Notes
100-22(1)(a)-(c)		The provider shall offer a child in care a daily opportunity for rest or sleep in an environment with: (a) a low noise level; (b) freedom from distractions; and (c) subdued lighting.	☐	☐		☐	☐	
100-22(2)		The provider may not schedule a nap or rest times for more than two hours a day.	☐	☐		☐	☐	
100-22(3)		The provider shall use a separate crib, cot, mat, or other sleeping equipment for each child during nap times.	☐	☐		☐	☐	
100-22(4)		The provider shall keep sleeping equipment in good repair , and ensure that any mat and mattress has smooth, waterproof surfaces.	☐	☐		☐	☐	

100-22(5)(a)-(e)	The provider shall ensure that each crib : (a) does not have strings, cords, ropes, or other entanglement hazards on the crib or within reach of the child; (b) has a tight-fitting mattress; (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; (d) has documentation from the manufacturer or retailer stating that the crib was built after June 28, 2011 , or that the crib is certified if the crib was manufactured before that date; and (e) has slats spaced no more than 2-3/8 inches apart.	☐	☐		☐	☐	
100-22(6)	The provider shall place sleeping equipment , including a crib, cot, and mat at least two feet apart when they are in use.	☐	☐		☐	☐	
100-22(7)	The provider shall ensure that sleeping equipment does not block any exit .	☐	☐		☐	☐	
100-22(8)(a)-(c)	The provider shall make a sheet and blanket, or acceptable alternative, available to each child 12 months or older during nap time, and ensure that each item is: (a) clearly assigned to one child; (b) laundered as needed, but at least once a week, and before use by another child; and (c) stored separately from other children's bedding .	☐	☐		☐	☐	
100-22(9)	The provider shall clean and sanitize sleeping equipment, that is not clearly assigned to and used by an individual child, before each use.	☐	☐		☐	☐	
100-22(10)(a)-(b)	The provider shall: (a) clean and sanitize sleeping equipment before each use; or (b) store sleeping equipment in a way the surfaces children sleep on do not touch each other.	☐	☐		☐	☐	
Section 23: Diapering		☐	Check here if the provider does not have diapered children in care.				
		☐	Check here if unable to observe a diaper change.				
Observe in every room where diapers are change:							

100-23(2)		The provider shall post diapering procedures at each diapering station and ensure that each staff member follows the procedures.	☐	☐		☐	☐	
100-23(5)		The provider shall ensure that the diapering surface is smooth, waterproof, and in good repair.	☐	☐		☐	☐	
100-23(6)		The provider shall ensure that each diapering station is equipped with railings to prevent a child from falling when being diapered.	☐	☐		☐	☐	
100-23(11)		The provider shall ensure that each indoor container where any wet and soiled diaper is placed is cleaned and sanitized each day.	☐	☐		☐	☐	
During diapering observation:								
100-23(3)(a)-(c)		The provider shall ensure that each child's diaper is: (a) checked as soon as a sleeping child awakens; (b) checked at least once every two hours; and (c) promptly changed when wet or soiled. ASK - Do you do this?	☐	☐		☐	☐	
100-23(4)		The provider shall ensure that a caregiver changes each child's diaper at a diapering station and not on a surface used for any other purpose.	☐	☐		☐	☐	
100-23(7)		The provider shall ensure that a caregiver does not leave any child unattended on the diapering surface.	☐	☐		☐	☐	
100-23(8)		The provider shall ensure that a caregiver cleans and sanitizes the diapering surface after each diaper change or uses a disposable, waterproof diapering surface that is thrown away after each diaper change.	☐	☐		☐	☐	
100-23(9)		The provider shall ensure that a caregiver washes their hands after each diaper change.	☐	☐		☐	☐	

100-23(10)(a)-(c)		The provider shall ensure that caregivers place any wet and soiled disposable diaper: (a) in a container that has a disposable plastic lining and a tight-fitting lid; (b) directly in an outdoor garbage container that has a tight-fitting lid; or (c) in a container that is inaccessible to children.	☐	☐		☐	☐	
100-23(12)(a)-(b)		If cloth diapers are used, the provider shall: (a) not rinse cloth diapers at the facility; and (b)(i) place cloth diapers directly into a leakproof container that is inaccessible to any child and labeled with the child's name; or (ii) place the cloth diapers in a leakproof diapering service container.	☐	☐		☐	☐	
R381-100-Section 24: Infant and Toddler Care			☐	Please check this box if the provider does not provide care for infants and toddlers				
100-24(2)		The provider shall ensure that each awake infant and toddler receives positive physical and verbal interaction with a caregiver at least once every 15 minutes.	☐	☐		☐	☐	
100-24(3)		To stimulate their healthy development, the provider shall ensure that infants receive daily interactions with adults , including on the ground interaction and closely supervised time spent in the prone position for infants less than six months old.	☐	☐		☐	☐	
100-24(4)		The provider shall ensure that any infant and toddler area is not used to pass through or access any other indoor or outdoor area.	☐	☐		☐	☐	
100-24(5)		The provider shall ensure that an infant and toddler plays in the same enclosed outdoor space with an older child only when there are eight or fewer children in the group.	☐	☐		☐	☐	

100-24(6)(a)-(f)		The provider shall ensure that a caregiver responds promptly to an infant and toddler who is in emotional distress due to any conditions including: (a) a wet or soiled diaper; (b) fatigue; (c) fear; (d) hunger; (e) illness; or (f) teething.	☐	☐		☐	☐	
100-24(7)		To stimulate healthy development, the provider shall make safe toys available and accessible for each infant and toddler to engage in play.	☐	☐		☐	☐	
100-24(8)		The provider shall ensure that any mobile infant and toddler has freedom of movement in a safe area.	☐	☐		☐	☐	
100-24(9)		The provider may not confine an awake infant or toddler in any piece of equipment , including a swing, high chair, crib, playpen, or other similar piece of equipment for more than 30 minutes.	☐	☐		☐	☐	
100-24(10)		The provider shall ensure that only one infant or toddler occupies any one piece of equipment at a time , unless the equipment has individual seats for more than one child.	☐	☐		☐	☐	
100-24(11)		The provider shall make any object made of styrofoam inaccessible to any infant and toddler.	☐	☐		☐	☐	
100-24(12)		The provider shall allow each infant and toddler to eat and sleep on their own schedule .	☐	☐		☐	☐	
100-24(13)(a)-(d)		The provider shall ensure that baby food, formula, or breast milk that is brought from home for an individual child's use is: (a) labeled with the child's name; (b) labeled with the date and time of preparation or opening of the container, including a jar of baby food; (c) kept refrigerated if needed; and (d) discarded within 24 hours of preparation or opening, except for unprepared powdered formula or dry food	☐	☐		☐	☐	

100-24(14)		If an infant cannot sit upright and hold their own bottle, the provider shall ensure that a caregiver is within arm's reach of each infant during bottle feeding and that a bottle is not propped.	☐	☐		☐	☐	
100-24(15)		The provider shall ensure that the caregiver swirls and tests warm bottles for temperature before feeding to a child.	☐	☐		☐	☐	
100-24(16)		The provider shall discard formula and milk, including breast milk, after feeding or within two hours of starting a feeding.	☐	☐		☐	☐	
100-24(17)(a)-(b)		The provider shall ensure that a caregiver cuts solid food for: (a) an infant into pieces no larger than 1/4 inch in diameter; and (b) a toddler into pieces no larger than 1/2 inch in diameter.	☐	☐		☐	☐	
100-24(18)		The provider shall ensure that each infant sleeps in equipment designed for sleep including a crib, bassinet, porta-crib or playpen, and that an infant is not placed to sleep on a mat, cot, pillow, bouncer, swing, car seat, or other similar piece of equipment.	☐	☐		☐	☐	
100-24(19)		The provider shall place an infant on their back for sleeping unless there is documentation from a health care provider requiring a different sleep position.	☐	☐		☐	☐	
100-24(20)		The provider may not place any soft toy, loose blanket, or other object in sleep equipment while in use by a sleeping infant.	☐	☐		☐	☐	
100-24(21)(a)-(b)		The provider shall document each infant's eating and sleeping patterns each day the infant is at the facility , and shall ensure the record: (a) is completed within an hour of each feeding or nap; and (b) includes the infant's name, the food and beverages eaten, and the times the infant slept.	☐	☐		☐	☐	

100-24(22)(a)-(c)	Within an hour of each infant or toddler's diaper change, the provider shall record: (a) the infant or toddler's name; (b) the time of the diaper change; and (c) whether the diaper was dry, wet, soiled, or both.	☐	☐		☐	☐	
100-24(23)(a)-(b)	The provider shall maintain on-site for review by OL a six-week record of: (a) the eating and sleeping patterns for each infant; and (b) the diaper changes for each infant and toddler.	☐	☐		☐	☐	
R381-100-Section 25: Video Surveillance Camera System Requirements		☐	Please check this box if no video surveillance camera system is used at the facility.				
100-25(1)(a)	If the provider has any functioning video surveillance camera system at the facility where child care is provided, the provider shall: (a) provide written notification to the parent or legal guardian of any enrolled child of the presence of any video surveillance camera system and the provider's video surveillance camera system policy;	☐	☐		☐	☐	
100-25(1)(b)	If the provider has any functioning video surveillance camera system at the facility where child care is provided, the provider shall: (b) include the written notification described in Subsection (1)(a) in any initial registration document, annual registration document, or signed waiver form; and	☐	☐		☐	☐	
100-25(1)(c)	If the provider has any functioning video surveillance camera system at the facility where child care is provided, the provider shall: (c) post clear and visible signage at the facility in an area accessible to the public notifying any parent, legal guardian, or visitor that the premises are under video surveillance.	☐	☐		☐	☐	

100-25(2)(a)-(d)	The provider shall develop, implement, and comply with written policy regarding the video surveillance camera system that includes: (a) a statement as to whether the video surveillance camera system retains any video footage and, if the video surveillance camera system does retain video footage, the amount of time the provider retains that video footage; (b) the deletion process for any video footage from the video surveillance camera system; (c) how the provider will handle any request for video footage from the video surveillance camera system; and (d) how the provider will provide written notification to any parent or legal guardian of an enrolled child regarding any change of: (i) the video surveillance camera system at the facility; and (ii) the provider policy for the video surveillance camera system.	☐	☐		☐	☐	
R381-100-Section 26: Compliance		R	UR	Date	CDI	TA	Notes
100-26	Any person who violates this rule may be subject to the penalties in Rule R380-600 and Title 26B, Chapter 2, Part 7, Penalties and Investigations.	☐	☐		☐	☐	