



ACSI
FLORIDA APPROVAL PROGRAM STANDARDS

**For ACSI Accredited Schools seeking
Gold Seal Quality designation
October 1, 2026 - September 30, 2027**

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1 ACSI Philosophy and Requirements

The ACSI Florida Approval Program Standards are designed to ensure early education programs maintain a high level of quality in a safe, loving and biblically based learning environment. In addition to adhering to the standards, early education programs are also responsible to local and county licensing regulations, if applicable. Accreditation by a well-recognized agency is both a seal of approval for an educational organization and a demonstration of the school's commitment to continuous improvement. The Association of Christian Schools International (ACSI) promotes the value and worthiness of accreditation and encourages each school and early education program to clearly align their practices with their mission and philosophy. Visiting team members who are current or former Christian school educators bring an understanding of the accreditation standards and culturally competent insights to the school under review. We believe that this pursuit matches the biblical directive of approving "things that are excellent" (Philippians 1:10, KJV). Through the accreditation process, schools have the opportunity to assess if they are all they intend to be in academic ideas and real-world application of learning; values, character, and spiritual formation; student and staff well-being; and biblical worldview development. Accreditation documents that a school is true to its stated mission.¹

At ACSI, we believe all children need access to high quality, developmentally appropriate learning opportunities. Aligned to school improvement goals, state early learning standards, and appropriate health and safety standards, this Best Practices in Early Education document encourages programs to understand industry best practices and research in early learning and create optimal learning environments for young children. Any school that serves children from birth through pre-kindergarten that desires accreditation for their EE program will complete this addendum as well as the Inspire protocol at the time of their accreditation visit.²

1.1 Philosophy of Christian Early Education and After School Care Programs

The program:

- A. Focuses on a holistic approach to teaching and learning and addresses the development of social, emotional, cognitive, physical, and spiritual domains of all children enrolled.
- B. Teaches from a biblical worldview perspective and the staff demonstrates Christ-like attitudes and actions.
- C. Understands the importance of educating, discipling the whole child, and fostering individual growth in each student related to God-given personality, temperament, and culture.
- D. Respects God's developmental design by recognizing young children think, grow, and learn differently than older children and plan for age-appropriate learning strategies.
- E. Promotes staff to be life-long learners and leaders by continuously pursuing spiritual and professional growth.

1.2 Required Memberships

- A. Current membership with ACSI (online renewal of membership begins in July; [online application](#) for new programs available at [acsi.org](#))
- B. Current membership with the Florida Approval Program (online [renewal application](#) available in July and must submit the required documents below by September 1, 2025)

¹ ACSI Inspire Accreditation Standards Manual p. 3

² ACSI Inspire EE Addendum p. 2

Gold Seal Quality designated schools are subject to visit(s) by ACSI accreditation visiting teams using the INSPIRE protocols. ACSI partners with many secular accreditation agencies to provide the recognition and credibility schools may need to serve their students as they move beyond school and into the next step of life. In many of these partnerships, the ACSI Inspire accreditation protocol is recognized for its quality and, therefore, serves as the lead protocol and basis for the school's. Accreditation by both groups. ACSI has similar processes to many of the other accreditation agencies. ACSI differs from secular accreditation agencies by ensuring that the Christian mission and ethos of the school is viewed and evaluated as integral to all aspects of accreditation. The school is to be as focused on its discipleship, character, and faith development as it is with its academic rigor and achievement.³

The program is evaluated based on standards outlined in the ACSI Inspire [Accreditation Manual](#) on pp. 5-6. The program must receive a satisfactory evaluation. Onsite annual visits, excluding the initial visit, are unannounced visits. ACSI performs a candidacy pre-visit to determine eligibility for participation in the ACSI FLORIDA APPROVAL PROGRAM program and application for accreditation. ACSI Inspire accreditation provides evidence that the process for accreditation has, at a minimum, all of the following components:

- a. Procedures for completion of a [self-study](#) and comprehensive [onsite verification process](#) for each classroom that documents compliance with accrediting standards outlined on pp. 2-3 of the Inspire Self-Study template. Additional clarification can be found in the following documents: [EE Addendum](#); A [Visit Readiness Checklist](#) should be filled out by the Visiting Team Chair approximately eight weeks prior to a team visit and submitted to the appropriate Divisional office.; and [Standard 11 Checklist](#).
- b. A training process for accreditation verifiers to ensure inter-rater reliability. Team members complete training prior to visiting the school as outlined on p. 2 of the ¹ [ACSI Inspire Chair & Team Member Handbook](#) p. 10 and The EE Addendum and Pre-Visit Checklist.

ACSI FLORIDA APPROVAL PROGRAM inspectors also complete orientation each fall which includes applicable rules is required §402.301-319, Florida Statute.

Accredited schools are annually inspected by an ACSI FLORIDA APPROVAL PROGRAM inspector and are required to file an [annual report](#) (see p. 8 of the ACSI Inspire Accreditation Manual) in order to ensure ongoing compliance of 85% of the Accreditation and ACSI FLORIDA APPROVAL PROGRAM standards.

- c. Schools that fail to meet accreditation standards are at-risk of revocation of accreditation (see ACSI FLORIDA APPROVAL PROGRAM Standard 8.4, p. 54).
- d. Accreditation renewal procedures include an onsite verification occurring at least every 5 years.
- e. ACSI FLORIDA APPROVAL PROGRAM schools are inspected annually in-person and annually virtually to verify continued accreditation compliance in the event of a transfer of ownership of facilities. Schools renew accreditation every 5 years by submitting a renewal application. School leaders are required to notify the ACSI FLORIDA APPROVAL PROGRAM Coordinator in the event of a change in ownership or director within 5 days. ACSI FLORIDA APPROVAL PROGRAM Standard 4.7, p. 43
- f. The ACSI FLORIDA APPROVAL PROGRAM Coordinator will attend meetings and notify these agencies via email in the event of complaint investigations or other mandated reporting requirements. (see Standard 6.1.2, 4.6, p. 4) The ACSI FLORIDA APPROVAL PROGRAM Standards Manual include a more detailed process for communicating issues that arise during the accreditation period with governmental entities that have a vested interest in the Gold Seal Quality Care Program, including the Department of Education, the Department of Children and Families, the Department of Health, local licensing entities if applicable, and the early learning coalition.
- g. The Accreditation visiting team uses the universal rubric and [visiting team spreadsheet](#) to determine compliance with the accreditation standards and the required percentage of assessed items measured to achieve accreditation are outlined in the [ACSI Inspire Accreditation Standards Manual](#) (p. 11) .

³ [ACSI Inspire Chair & Team Member Handbook](#) p. 4

- h. The Accreditation visiting team chair verifies program files, surveys, and other information used to complete the self-study are uploaded in the [school's online portal](#) and are available during the time of the visit. Schools are also required to submit documents annually with an *ACSI Florida Approval Program* application as indicated below. (standard 1.3 p. 7) During bi-annual ACSI FLORIDA APPROVAL PROGRAM inspections (fall in-person and spring virtual) documents are reviewed for completion, accuracy, and expiration dates per the new school *ACSI Florida Approval Program* manual.
- i. Each member school/program is assigned an *ACSI Florida Approval Program* Inspector. The inspector's role is to serve as an advisor and mentor to the program director. The inspector will also validate the *ACSI Florida Approval Program* standards and Inspire accreditation standards are met. Unannounced visits to the program will be made by the inspector each year to monitor the program environment (indoor and outdoor classroom settings) and an Inspection Report will be submitted to the program director no more than one week after the visit. ([FL Approval Program Manual](#) p. 4)
- j. *ACSI Florida Approval Program* Programs submit annual staffing forms outlining personnel qualifications for compliance with training requirements as required in standard 1.4 in the *ACSI Florida Approval Program* standards (p. 8). Personnel records and credentials are verified in the professional development registry and are inspected twice a year.

Required Documents for Online Florida Approval Program Application

- A. [ACSI Standards \(digital signature required\)](#)
- B. [ACSI 2025-2026 Staffing Form](#)
- C. Calendar (schedule of school holidays and breaks)
- D. [Checklist](#)
- E. Letter from Pastor of Verification of Church Affiliation (notarized)
- F. Director's Credential
- G. Director's [Attestation of Good Moral Character](#)((CF-FSP 1649A, July 2024)
- H. Certificate of Liability Insurance (The address included at bottom left of form should be "Association of Christian Schools International, P.O. Box 62249, Colorado Springs, CO 80962." Insurance should include a minimum of \$1 million in liability coverage as well as sexual abuse limits of not less than \$250,000 per occurrence and Director's and Officer's Coverage. Student accident insurance is strongly encouraged for all students.)
- I. Fire Marshal's Inspection Report–valid within the last 12 months
- J. Fire Drill/Emergency Preparedness Chart for last 12 months
- K. Additional documentation is required to be uploaded in the ACSI INSPIRE ePlatform for EE accredited programs per the INSPIRE EE Addendum as outlined on p. 2 (e.g., Indicator 16.2 Health and Safety documentation, Appendix B: Curriculum Documentation)

a. Administration, Staff and Substitutes

- A. Each program has a written mission and vision statement of its philosophy and goals for its staff and all children in its care. This statement is present and consistent in the program's staff handbook, family manual, and orientation materials. All employees give clear evidence of a Christian testimony, including salvation through faith in the death, burial, and resurrection of Jesus Christ as full payment of one's sin and sign upon hire and agree to abide by ACSI's Code of Conduct and Statement of Faith. Ratios, group size, and qualifications of teacher/caregiver meet the national best practice standards. CFOC3 Stds. 1.1, 1.2, 1.3, 1.4.4, 3.6.2.3, 3.6.2.5, 4.4, 6.5
- B. All employees have Clearinghouse background screening documentation on file in personnel file. (Class 2)

C. Directors and lead teachers must be at least 21 years old. Staff under the age of 18 must be closely supervised by a credentialed employee. (Class 2) The school has access to available substitute staff to ensure that the staff-to-child ratios are met at all times of operation. Schools must have a procedure in place for obtaining substitute (e.g. working with the local Early Learning Coalition (CCRRS) and have a substitute list for each classroom.

D. Lead Teachers must be certified in First Aid and Pediatric CPR, including management of a blocked airway, and rescue breathing.

E. Lead teachers must meet one (1) of the following:

An undergraduate degree in Early Childhood Education, Child Development, Social Work, Nursing, or other child- related field, and a minimum of one (1) year experience working in an early learning and care program serving children ages 0-5; OR

A national competency-based early childhood credential such as the CCP, CDA, or state equivalent (example, Florida Childcare Professional Credential), and two (2) years of experience as a teacher serving the children of the age groups in care, OR

A combination of coursework and experience including: a high school diploma or GED, a minimum of four (4) college-level courses in Early Childhood Education and/or Child Development, and a minimum of three (3) years' experience working in an early learning and care program serving children ages 0-5.

Associate/assistant teachers must be 18 years of age and have a high school diploma or General Education Development certificate (GED).

F. Aides and volunteers must be at least 16 years old. Volunteers under the age of 18 years must be under direct supervision and are not counted in staff-to-child ratio.

2 No person shall be an operator, owner, or employee of an early learning and care facility while using or under the influence of narcotics, alcohol, or other drugs that impair a person's ability to provide safe care and supervision. (Class 1)

3 A new employee is not considered permanent until the director has assessed his/her mental and physical health and ability to work effectively with young children.

4 Upon hire, all employees are required to sign:

4.1 [Child Abuse & Neglect Reporting Requirements Form](#) (CF-FSP 5337, May 2017, annually)

4.2 [Attestation of Good Moral Character](#) CF-FSP 1649A, July 2024) (Class 2)

4.3 Receipt of employee policy and procedures. (Class 3)

2. General Requirements

2.1 Minimum Age Requirements

Early learning and care personnel of at least 21 years of age must oversee the program and must be always on the premises during operating hours. (Class 3)

2.1.1 Ratios

The staff-to-child ratio is based on primary responsibility for the direct supervision of children and applies at all times while children are in care. (Class 2) Ratios, group size, and qualifications of early educators meet the national best practice standards.⁴ CFOC3 Std's. 1.1, 1.2, 1.3, 1.4.4, 3.6.2.3, 3.6.2.5, 4.4, 6.5 Child:staff ratios and group sizes always meet or are better than the requirements of our state.⁴

⁴ [National Health and Safety Performance Standards](#) Caring for Our Children.

Age of children	Staff: Child Ratio	Maximum Group Size
Birth up to 12 months	1:4	8
1 year up to 2 years	1:6	12
2 years	4:11 (1:9 Gold Seal Schools)	18
3 years	4:15 (1:10 Gold Seal Schools)	20
4 years	1:20 (1:12 Gold Seal Schools)	24
Kindergarten and up	1:25 1:12 (Gold Seal Schools)	24
Mixed Age Groups	See 2.2.1 Below	

2.1.2 Mixed Age Groups

- 2.1.2.1 In groups of mixed age ranges, where children under one year of age are included, one personnel must be responsible for no more than four children of any age group, at all times. (Class 2)
- 2.1.2.2 In groups of mixed age ranges, where children one year of age but under two years of age are included, one early learning and care personnel must be responsible for no more than six children of any age group, at all times. (Class 2) In groups of mixed age ranges, where children two years of age and older are in care, the staff-to-child ratio shall be based on the youngest child in the group. (Class 2)
- 2.1.2.3 Groups of children may be limited to one (1) age or may include multiple ages. A group or classroom consists of the children assigned to a teacher or a team of teaching staff for most of the day and who occupy an individual classroom or well-defined space in which care is provided or classes are held and staff ensures that appropriate group sizes are maintained.

Supervision

2.1.3 General Supervision Requirements

- 2.1.3.1 Early learning and care personnel must position themselves in the indoor and outdoor play area so that all children can be observed and directly supervised. (Class 2)
- 2.1.3.2 Early learning and care personnel must be assigned to provide direct supervision to a specific group of children and be with that group of children at all times. Children must never be left without personnel supervision inside or outside the facility, in a vehicle, or at a field trip location. (Class 1)
- 2.1.3.3 Supervision standards apply at all times away from the early learning and care facility, including during field trips, outdoor play, and when picking up or dropping off children at designated locations, such as bus stops, school, or a child's home. For school-age children, personnel must know where the children are and what they are doing at all times and capable of responding to emergencies including when children are separated from their group. (Class 1)
- 2.1.3.4 At all times, lighting must allow personnel to see and supervise children while in care. (Class 3)
- 2.1.3.5 A program is responsible for the supervision of a child until an authorized individual retrieves the child from the program. A child shall not be released to any person other than the person(s) authorized or in the manner authorized in writing by the custodial parent or legal guardians. All individuals authorized to pick up a child must be identified in writing prior to release by the custodial parent or legal guardian to the program, and the program must verify the individual picking up the child is authorized by using a picture form of identification. Each child transported must be dropped at the designated location as agreed upon by the provider and the custodial parent/legal guardian and released to an individual. (Class 2)
- 2.1.3.6 No person shall be an operator, owner, or employee of an early learning and care facility while using or under the influence of narcotics, alcohol, or other drugs that impair a person's ability to provide safe care and supervision. (Class 1)
- 2.1.3.7 In addition to the number of early learning and care personnel required to meet the staff-to-child ratio, one additional adult must attend field trips away from the facility to help provide direct supervision. The individual could be a parent or volunteer as long as that person is under direct and constant supervision of a screened and trained personnel. (Class 2)

2.1.3.8 Children must receive supervision and care in accordance with their age and required needs and be accounted for at all times while bathing or toileting. (Class 2)

2.1.3.9 When transporting children in a vehicle or on foot, a telephone or other means of instant communication must be available to early learning and care personnel. Cellular phones, two-way radio devices, citizen band radios, and other means of instant communications are acceptable. (Class 2)

2.1.4 Nap time Supervision

During nap time, early learning and care personnel must be within sight and hearing of all the children. All other personnel required to meet the staff-to-child ratio must be within the building on the same floor and available to be summoned if needed to ensure the safety of the children. Nap time supervision does not apply to children up to 24 months of age, who must always have direct supervision. (Class 2)

2.1.5 Evening Supervision

During evening early learning and care hours, personnel must always remain awake. While children are awake, direct supervision must be provided. (Class 2)

2.1.6 Mealtime Supervision

2.1.6.1 During feeding times, children must be individually fed and provided their own tableware. Children must be supervised appropriately for their ages and developmental abilities, to monitor the size of food pieces and that children are eating accordingly. (Class 2)

2.1.6.2 Infants must be held for bottle feedings until they are developmentally ready to sit in an age appropriate chair with good head control. Children must not be left in highchairs or other types of feeding chairs other than during feeding times. The use of safety straps is required to prevent children from falling out of the highchair. (Class 2)

2.1.6.3 There must not be any propped bottles. If a child cannot hold the bottle, early learning and care personnel must hold the bottle during feeding. There must be no automatic feeding devices unless prescribed by a doctor and documentation is available in the child's file. (Class 2)

2.1.7 Water Activity Supervision

If a facility uses a swimming pool on site or during a field trip that is more than three feet deep or uses beach or lake areas for water activities, the following requirements must be met:

2.1.7.1 There must be at least one certified lifeguard present and on duty. If the lifeguard is hired by the facility, this person is considered early learning and care personnel and can also serve as the additional adult to meet the requirement in 2.3.1 (G) above. (Class 1)

2.1.7.2 If the certified lifeguard is hired by the pool/beach/lake area, this person is not considered early learning and care personnel and does not count toward the staff-to-child ratio. (Class 2)

2.1.7.3 The following minimum staff-to-child ratios must apply while children are swimming or wading: (Class 2)

Age of children	Staff: Child Ratio
Infant (Birth up to 1 year)	1:1
Toddler (1 year up to 3 years)	1:1
Preschooler (3 years up to 5 years)	1:4
School-Age Children (5 years and up)	1:10
Mixed Age Groups	Ratio shall be based on age of the youngest child present

2.1.7.4 Constant and active supervision must be maintained when any child is in or around water. An adult should always remain in direct physical contact with an infant during swimming or water activities. During water activities, children ages 1 year up to five years must always be within an arm's reach and in the sight of the supervising adult. (Class 2)

2.1.7.5 Providers must ensure that all pools have drain covers that are in compliance with the Virginia Graeme Baker Pool and Spa Safety Act, as referenced in Caring for Our Children Basics Health and Safety Foundations for Early Care and Education. (Class 2)

2.1.7.6 Each swimming pool more than six feet in width, length, or diameter must be provided with a ring buoy and rope, a rescue tube, or a throwing line and a shepherd's hook that will not conduct electricity. This equipment must be long enough to reach the center of the pool, kept in good repair, and stored safely and conveniently for immediate access. Early learning and care personnel must be instructed on the proper use of this equipment and documentation of instruction must be maintained in the personnel file. (Class 2)

2.2 Transportation

Early learning and care providers must comply with minimum health and safety standards to ensure the well-being of children in their care being transported. For the purposes of this section, transportation pertains to travel by foot or in a vehicle that is owned, operated or regularly used by the program, and vehicles used to provide transportation through a contract or agreement with an outside entity. All transportation provided by the facility must meet local, state and federal codes for both vehicles and drivers. Pursuant to the Child Safety Alarm bill in 2021, all vehicles used to transport children by early learning and care facilities must be equipped with a reliable alarm system which prompts the driver to inspect the vehicle for children before exiting the vehicle. Drivers must follow written procedures.

2.2.1 Driver Requirements

2.2.1.1 Drivers of all vehicles used to transport children must have a current Florida driver's license. (Documentation of license is to be maintained in facility files and in the driven vehicle.) (Class 2)

2.2.1.2 Drivers are to have an annual physical examination which grants medical approval to drive. (Documentation of cleared physical is to be maintained in facility files and in the driven vehicle.) (Class 2)

2.2.1.3 Drivers and all personnel involved in the transportation program are to complete DCF's Transportation Safety Course. (Documentation is to be maintained in facility files.) (Class 2)

2.2.1.4 Drivers must maintain current CPR/1st Aid Certification. Documentation is to be maintained in facility files and in the driven vehicle. (Class 2)

2.2.2 Children's Documents

2.2.2.1 Permission to transport signed by parent/guardian must be maintained in facility files and in the driven vehicle. (Class 3)

2.2.2.2 Contact information for parent/legal guardian of each child being transported by vehicle or by foot must accompany early learning and care personnel. (Class 3)

2.2.2.3 When transporting children with chronic medical conditions (such as asthma, diabetes, allergies, or seizures), their Emergency Care Plans, along with needed supplies or medications must be available in the vehicle and with personnel on the field trip. The adult responsible in the vehicle or on the field trip must be trained to recognize and respond appropriately to a medical emergency. (Class 3)

2.2.3 Vehicle Requirements

For the purpose of this section, vehicles refer to those owned, operated or regularly used by the early learning and care program, and vehicles that provide transportation through a contract or agreement with an outside entity. Parents'/guardians' personal vehicles used for transporting during field trips are excluded from meeting the requirements of this sub-section.

2.2.3.1 All vehicles regularly used to transport children must be inspected annually by a mechanic to ensure that they are in proper working order. Documentation by the mechanic must be maintained in the vehicle. (Class 2)

2.2.3.2 The maximum number of individuals transported in a vehicle may not exceed the manufacturer's designated seating capacity of the number of factory installed Seatbelts. (Class 1)

2.2.3.3 When transporting children, staff-to-children ratios must be maintained at all times.

The driver may be included in the staff-to-child ratio if he or she meets screening and training requirements.(Class 2)

2.2.3.4 All facilities must comply with the insurance requirements found in Section 316.615(4), F.S. Documentation should be maintained on the vehicle and at the facility. (Class 2)

2.2.3.5 The interior of vehicles, when being used to transport children, must be maintained at a temperature comfortable to children (between 65- and 82- degrees) Fahrenheit). The vehicle can be ventilated either by mechanical or natural means to maintain the temperature. (Class 2)

2.2.3.6 By January 1, 2022 all vehicles used by early learning and care facilities to transport children must be equipped with a reliable alarm system approved by DCF which prompts the driver to inspect the vehicle for children before exiting the vehicle. (Class 2)

2.2.3.6.1 Approved alarm system must meet the following criteria:

2.2.3.6.1.1 The alarm system must be armed or activated automatically when the vehicle's ignition is turned on.

2.2.3.6.1.2 The alarm system must be designed and installed so that the vehicle horn, siren or other type of audio alarm will sound if the driver/staff member does not walk to the rear or, in the case of a passenger van, the side entry point of vehicle, to manually shut off or deactivate the alarm.

2.2.3.6.1.3 The time delay from the time the ignition is turned off after activation of the alarm system sounds shall be no longer than one minute.

2.2.3.6.1.4 The alarm must be audible from 500 feet from the vehicle.

2.2.3.6.1.5 The alarm system must be installed so that the driver must walk to the back of the vehicle to reach the deactivation mechanism. Deactivation mechanisms installed in locations that do not require the driver to walk to the back of the vehicle and view all seating areas will not be acceptable.

2.2.3.6.2 List of approved manufacturers may be found on DCF's website at Child

2.2.3.6.3 Alarms must be installed and maintained according to the manufacturers recommendations.

2.2.4 Seat Belt Restraints

Each child, when transported, must be seated in a back seat, in an individual factory installed seat belt or federally approved child safety restraint. The child safety restraint must be installed, secured and used in accordance with the manufacturer's instructions and a copy of such instructions must be maintained (in the vehicle and/or on file). Child safety restraint must be replaced if they have been recalled, are past the manufacturer's "date of use" expiration date, or have been involved in a crash that meets the U.S. Department of Transportation crash severity criteria or the manufacturer's criteria for replacement of restraints after a crash, as referenced in

Caring for Our Children Basics Health and Safety Foundations for Early Care and Education.

2.2.4.1 Children aged birth to one year old must be secured in a rear-facing car safety seat. (Class 1)

2.2.4.2 Children aged one through three years, such restraint device must be a separate carrier or a vehicle built-in child seat. (Class 1)

2.2.4.3 Children aged four years, a separate carrier, a vehicle built-in child seat, or a child booster seat must be used with appropriate seat belt. (Class 1)

2.2.4.4 Children ages five years and older must be in seat belts.(Class 1)

2.2.4.5 When applicable, any vehicle used for transporting children must accommodate the placement of wheelchairs with four tie-downs affixed according to the manufactures' instructions in a forward-facing direction and the wheelchair occupant must be secured by a three-point tie restraint during transport; or the child must be placed in a federally approved child safety restraint or factory installed seatbelt when transported, in accordance to the child's needs. Manufacturers' specifications must be followed to assure that safety requirements are met.(Class 2)

2.2.5 Transportation Procedure

A log must be maintained for all children being transported in a vehicle or on foot away from and/or to the premises of the early learning and care facility. The log must be retained on file at the facility for a minimum of 12 months and available for review by ACSI. The log must include: (Class 2)

1. Each child's name.
2. The date and time of departure.
3. Time of arrival at destination.
4. The signature of the driver (or in case of traveling on foot, the signature of the early learning and care personnel
5. The signature of a second early learning and care personnel or person(s) authorized by the provider to verify the transportation log and that all children have arrived safely and left the vehicle (if applicable).

Transportation by Vehicle

2.2.5.1 When transporting children, staff-to-child ratios must always be maintained. The driver may be included in the staff-to-child ratio if he/she meets screening and training requirements. (Class 2)

2.2.5.2 Prior to transporting children by vehicle, the transportation log must be recorded with each child's name, the date and time of departure and initialed by early learning and care personnel verifying that all children were accounted for and that the log is complete. (Class 2)

2.2.5.3 Upon arrival at the destination by vehicle, the driver of the vehicle must: (Class 2)

2.2.5.3.1 Mark the time of arrival at the destination.

2.2.5.3.2 Mark each child off the log as the child departs the vehicle.

2.2.5.3.3 Conduct a physical inspection and visual sweep of the vehicle interior to ensure that no child is left in the vehicle.

2.2.5.3.4 Record, sign, and date the transportation log immediately verifying that all children were accounted for, and that the visual sweep was conducted.

2.2.5.3.5 Ensure that second early learning and care personnel conducts a second visual sweep, signs and dates the transportation log verifying that all children were accounted for, and that the log is complete.

2.2.5.3.6 If the provider contracts with an outside entity to provide transportation, then the provider must assign early learning and care personnel to perform the duties of the driver outlined above in letters a, b, and c.

2.2.5.4 Upon arrival at the destination by vehicle, a second and different early learning and care personnel must: (Class 2)

2.2.5.4.1 Conduct a physical inspection and visual sweep of the vehicle to ensure that no child is left in the vehicle; and

2.2.5.4.2 Sign, date and record the transportation log immediately, verifying that all children were accounted for, and that the log is complete.

Transportation by Foot

A. Prior to transporting children by foot, the transportation log must be recorded with each child's name, the date and time of departure and initialed by early learning and care personnel verifying that all children were accounted for and that the log is complete. (Class 2)

B. Upon arrival at the destination by foot, the early learning and care personnel must: (Class 2)

1. Record the date and time the child(ren) arrived at the destination on the transportation log immediately,
 2. Conduct roll call, record, date and initial verifying that all children were accounted for.
 3. The same must occur prior to leaving that location and immediately upon returning to the facility premises. The first and second early learning and care personnel must sign the log verifying all children are accounted for and log is complete at each destination.
- C. Upon arrival at the destination by foot, a second and different early learning and care personnel must: (Class 3)
1. Witness roll call to verify all children are accounted for and that the log is complete.
 2. Sign and date the transportation log.

2.2.6 Emergency Care Plans (Class 2)

- 2.2.6.1 Early learning and care personnel must have possession of emergency medical consent and contact information for the parent or legal guardian of each child being transported by vehicle or on foot while away from the early learning and care facility.
- 2.2.6.2 When transporting children with chronic medical conditions (such as asthma, diabetes or seizures), their emergency care plans and supplies or medication Must be in possession of early learning and care personnel and inaccessible to the children. A designated early learning and care personnel in the vehicle or on the field trip must be trained to recognize and respond appropriately to a medical emergency per medication training requirements in section 6.5.I.
- 2.2.6.3 Each child with an allergy should have a written emergency care plan that includes:
- 2.2.6.3.1 Instruction regarding the allergen to which the child is allergic and steps to be taken to avoid that allergen.
- 2.2.6.3.2 A detailed treatment plan is implemented in the event of an allergic reaction, including names, doses, and methods of prompt administration of any Medications.
- 2.2.6.3.3 Specific symptoms that would indicate the need to administer one or more Medications.
- 2.2.6.4 Based on the child's emergency care plan, provided by the parent/legal guardian or physician, and prior to caring for the child, Early learning and care personnel should implement measures for preventing exposure to specific allergen(s) to which child has an allergic reaction.
- 2.2.6.5 Early learning and care personnel shall notify parents/guardians immediately of any suspected allergic reactions, as well as the ingestion of or contact with the problem allergen even if a reaction did not occur. Early learning and care personnel shall contact 911 immediately whenever epinephrine has been administered.

2.3 Field Trip Activities

- A. Parents/guardians must be advised in advance of each field trip activity. (Class 3)
- B. The date, time, and location of the field trip must be posted in an easily seen location at least two working days prior to each field trip. (Class 3)
- C. Written parental permission must be obtained in the form of a general or event-specific permission slip. (Class 3)
- D. If special circumstances arise where notification of an event cannot be posted for two working days, individual permission slips must be obtained from the custodial parent or legal guardian for each child participating on the field trip. (Class 3)
- E. Emergency contact information for each child on the field trip, including walking field trips, must be in the possession of an early learning and care personnel on the field trip.(Class 3)
- F. A telephone or other means of instant communication must be available to early learning and care personnel responsible for children during all field trips, including walking field trips. Cellular phones, two-way radio devices, citizen band radios, and other means of instant communications are acceptable. (Class 2)
- G. Documentation of parental permission for field trips must be on file and maintained for at least 12 months from the date of the field trip. (Class 3)

H. In addition to the number of Early learning and care personnel required to meet the staff-to-child ratio, one additional adult must attend field trips away from the Early learning and care facility to help provide direct supervision. The individual could be a parent volunteer as long as that person is under direct and constant supervision of a screened and trained Early learning and care personnel. (Class 2)

2.4 Planned Activities

The program uses a strategic planning process to implement its vision and mission, and to achieve desired outcomes for the children in its care. (Please see the [ACSI EE Expected Learning Outcomes](#)). A daily written and followed schedule is posted in a conspicuous location for each age group of children and is available for parents/guardians to review. The written plan must meet the needs of the children being served and must include alternate activities in case of bad weather. A curriculum plan is developed and implemented that includes a mission and vision statement, expected student outcomes, a variety of effective instructional strategies, adequate resources, and appropriate assessments that are based on biblical principles, current research and quality practices. The curriculum plan shall include a variety of activities that range from structured to unstructured activities that encourage a child's developmental growth. The written plan also must include scheduled activities that: (Class 3)

- A. Promote spiritual, emotional, social, intellectual, and physical growth;
- B. Integrate daily age-appropriate biblical instruction into the curriculum.
- C. Do not have children left in confining devices such as car seats as an alternative to active play or adult/child interaction, supervision, or discipline.
- D. Do not include the use of electronic media (videos, computer games, etc.) for children under two years of age. Electronic media may only be used for educational purposes only on occasional or intermittent basis for children 2 years of age and older for no more than thirty minutes per day.
- E. Include both active and quiet play. Active play includes outdoor activities a minimum of twice per day, weather permitting. When outdoor play is not permitted, active indoor play is provided.
- F. Include meals, snacks, and nap times, if appropriate for the age and the times children are in care.
- G. Children are engaged in active play that incorporate large and small muscle groups. Provide adequate time and space for infants, birth to 12 months, in care to engage in activities that promote development of movement skills (tummy time, crawling, turning over, sitting, etc.). Infant seats (swings, bouncers, etc.) must be used only for short periods of time, no more than 15- to 30-minute intervals per infant and no more than two times per day that the child is in care. Infants in care shall be provided opportunities for outdoor time each day that weather permits.
- H. An appropriate daily schedule provides flexibility and contains transition periods that help children move smoothly from one activity to another and provides a balance of child-initiated and teacher-directed activities in consideration of the child's total daily experiences.
- I. Providers are encouraged to inform parents and legal guardians of their child's activities daily.
- J. Providers must implement program practices that promote consistency and continuity of care for infants and toddlers. Early care and education programs must provide opportunities for each child to build emotionally secure relationships with a limited number of early learning and care personnel. Efforts to promote consistency and continuity of care are shown through following daily routines and communicating consistently with parents/guardians.
- K. The program must make reasonable accommodations to the environment, planned activities and schedule so that children with special needs may participate.

2.5 Child Discipline

A. Early educators are to disciple (teach) children with nurturing love while utilizing engaging environments, preventative approaches, and clear expectations. Environments should promote a loving place where children feel safe, secure, and unconditionally loved. Teachers focus on helping children develop problem solving skills and making positive choices. Children are to be guided toward behavior which honors God and supports biblical principles of being kind, obeying authority, and loving others. *Proverbs 22:6: Train up a child in the way he should go and when he is old, he will not turn from it.*

B. The early learning and care facility shall adopt a discipline policy including standards that prohibit children from being subjected to discipline which is severe, humiliating, frightening, or associated with food, rest, or toileting. Spanking or any other form of physical punishment is prohibited. (Class 2)

C. The early learning and care facility operators, employees, and volunteers must comply with written disciplinary and expulsion policies. (Class 2)

D. Verification that the early learning and care facility has provided the parent or guardian a written copy of the disciplinary and expulsion policies used by the program must be documented on the enrollment form with the signature of the custodial parent or legal guardian. (Class 3)

E. Active play, both indoor and outdoor, must not be completely withheld from children who misbehave. For example, a child being left in the front office the entire time the rest of the children go outside to play would be unacceptable. Time-outs may be used during indoor or outdoor play provided an age-appropriate time limit has been

established and children are counseled on inappropriate behavior and guided toward correct behavior in the future. Biblical principles are incorporated into the counseling. (Class 3)

F. A copy of the current disciplinary and expulsion policies must be available for review by the parents or legal guardian and ACSI. Providers must have a comprehensive discipline policy that includes developmentally appropriate social- emotional and behavioral health promotion practices, as well as discipline and intervention procedures that provide specific guidance on what early learning and care personnel should do to prevent and respond to challenging behaviors. Preventive and discipline practices should be used as learning opportunities to guide children's appropriate behavioral development. (Class 3)

G. The following discipline techniques shall be prohibited in the early learning and care facility:

1. The use of corporal punishment/including, but not limited to:
 - a. Hitting, spanking, shaking, slapping, twisting, pulling, squeezing, or biting; (Class 1)
 - b. Demanding excessive physical exercise, excessive rest, or strenuous or bizarre postures; (Class 1)
 - c. Compelling a child to eat or have in his/her mouth soap, food, spices, or foreign substances; (Class 1)
 - d. Exposing a child to extreme temperatures; (Class 1)
 - e. Rough or harsh handling of children, including but not limited to: lifting or jerking by one or both arms; pushing; forcing or restricting movement; lifting or moving by grasping clothing; covering a child's head. (Class 1)
2. Isolating a child in an adjacent room, hallway, closet, darkened area, play area, or any other area where the child cannot be seen or supervised. (Class 1)
3. Binding, tying or restrict movement, or taping the mouth; (Class 1)
4. Using or withholding food or beverages as a punishment; (Class 2)
5. Toilet learning/training methods that punish, demean, or humiliate a child; (Class 2)
6. Any form of emotional abuse, including rejecting, terrorizing, extended ignoring, isolating, or corrupting a child; (Class 1)
7. Any abuse or maltreatment of a child; (Class 1)
8. Abusive, profane, or sarcastic language or verbal abuse, threats, or derogatory remarks in front of the child or about the child or child's family;(Class 2)
9. Placing a child in a crib for a time-out or for disciplinary reasons. (Class 2)

H. All programs that care for infants must have a written policy and procedure to identify and prevent shaken baby syndrome and abusive head trauma. The policy and procedures must require completion of the safe sleep training by early learning and care personnel as outlined in section 4.2.3. (Class 3)

3 Physical Environment

Children are much more susceptible to the adverse effects of environmental factors, materials and toxicants. It is imperative that the early learning and care environment is conducive to the healthy development of children.

3.1 General Health and Safety Requirements

A. All Early learning and care facilities must be clean, in good repair, free from health and safety hazards (such as trash, sharp or hazardous items, toxic substances, sharp edges, splinters, protruding or rusty nails, or missing parts) and from evidence of, or presence of, vermin infestation. Indoor play areas must be inspected daily for basic health and safety and documented on a daily inspection log. Outdoor play areas must be inspected daily for basic health and safety. Any problems must be corrected before the play area is used by children. (Class 3) Indoor play areas are in a clean condition. Documentation of the indoor play area inspection must be maintained for 12 months.

B. It is the responsibility of the director/operator to ensure all areas and equipment of the facility are free from fire hazards, such as lint build up in heating and air vents, filters, exhaust fans, ceiling fans, and dryer vents. This includes grease build-up in ovens, stoves and food equipment.(Class 2)

C. Animals must be properly vaccinated (if a vaccination is available for the specific animal), free from disease, and clean. Animals that are poisonous, venomous, aggressive, or pose a potential threat of harm to children in care are prohibited. Parents/guardians must be informed in writing of all animals on the premises. Notice may be provided by a conspicuously posted notice or bulletin, policy handbook, parent flier, or a statement included on the enrollment form. Current vaccinations records must be available for review by ACSI. No animal may freely roam the indoor/outdoor premises.

Animals are prohibited in areas where food is prepared, stored, or served. If animals or birds are kept in classrooms, they shall be caged and cages must be kept clean. (Class 2)

D. Strangulation hazards, strings, and cords long enough to encircle a child's neck such as those on toys and window coverings must not be accessible to children in care. (Class 2)

E. Smoking is prohibited within the early learning and care facility and in vehicles when being used to transport children. Smoking is prohibited in all outdoor areas, including on field trips, while children are in care. Owners/operators are to notify custodial parents and legal guardians, in writing, that smoking, including e-cigarettes and vaping is prohibited on the premises of the early learning and care facility. (Class 2)

F. Design and construction of a new early learning and care facility or modifications to an existing facility must meet the requirements of the applicable local governing body. The facility must provide current written approval from the local governing body to verify compliance with building requirements, which include construction of a new building; renovation of an older building; or after a natural disaster to properly evaluate and where necessary, remediate or avoid sites where's children's health could be compromised. The written approval must include assessments of: (Class 3)

1. Potential air, soil, and water contamination on facility site and outdoor play areas;
2. Potential toxic or hazardous materials in building construction, such as lead and asbestos; and
3. Potential safety hazards in the community surrounding the site.

G. Cleaning must not take place while rooms are occupied by children except for general clean-up activities that are part of the daily routine. General cleaning refers to cleaning necessary to maintain a sanitary environment but that does not pose a hazard to children, such as wiping the table after lunch, soaking toys in a tub on the countertop, or sweeping. This does not include sweeping. This does not include cleaning with hazardous materials or any cleaning which poses a risk of slipping or falling.(Class 3)

H. Pest control must not take place while rooms are occupied by children. Early learning and care providers must adopt an integrated pest management program to ensure long-term, environmentally sound pest suppression through a range of practices including pest exclusion, sanitation and clutter control, and elimination of conditions that are conducive to pest infestations. (Class 3)

- I. All accessible electrical outlets must be “tamper-resistant electrical outlets” that contain internal shutter mechanisms to prevent children from sticking objects into receptacles. In settings that do not have “tamper-resistant electrical outlets,” outlets shall have safety covers. (Class 2)
- J. Guardrails or protective barriers, such as baby gates, must be provided at open sides of stairs, ramps, and other walking surfaces from which there is more than a 30-inch vertical distance to fall. (Class 2)
- K. No electrical device or apparatus accessible to children shall be located in a place where it can be plugged into an electrical outlet while a person is in contact with a water source, such as a sink, tub, shower area, water table, or swimming pool. (Class 2)
- L. Carbon monoxide detector(s) must be installed if s. 553.885 (1), Florida Statutes, or local laws. Carbon monoxide detectors must be tested and maintained according to manufacturer’s instructions. Documentation of testing and maintenance must be retained for a minimum of 12 months and available for ACSI to review. (Class 2)

3.2 Toxic/Hazardous Material/Firearms/Weapons

- A. All areas and surfaces accessible to children must be free from toxic substances, bio contaminants, and hazardous materials/equipment/tools, including power tools, plastic bags, matches, candles, lighters, etc. (Class 2)
- B. All potentially harmful items, including cleaning supplies, flammable products, poisonous, toxic, and hazardous materials, must be labeled and used according to manufacturer’s recommendation. These items, as well as knives, sharp tools, and other potentially dangerous hazards, must be stored in a locked area or must always be inaccessible and out of a child’s reach. (Class 2)
- C. Firearms and weapons are prohibited within any building or upon any person located on the premises, excluding federal, state or local law enforcement officers. (Class 1)
- D. Narcotics, alcohol, or other impairing drugs/paraphernalia must not be present on the premises or in vehicles used by early learning and care facility. (Class 1)

3.3 Rooms Occupied by Children

3.3.1 Lighting

- 3.3.1.1 All areas of the facility must have lighting that provides adequate illumination and comfort for facility activities, a minimum of 20-foot candles of lighting is required. Lighting must be sufficient to allow for adequate supervision and safe entering and exiting of the room. (Class 3)
- 3.3.1.2 For reading, homework, painting and other close work areas, 50-foot candles at the work surface is required. (Class 3)
- 3.3.1.3 During naptime, lighting must allow early learning and care personnel to visually observe and supervise children. (Class 3)

3.3.2 Windows and Screens

When the windows or doors are open for more than entering/exiting purposes, all buildings must have and maintain screens to prevent entrance of any insects or rodents. Screens are not required for open-air classrooms and picnic areas. (Class 3)

3.3.3 Temperature and Ventilation

- 3.3.3.1 An inside temperature of 65 to 82 degrees Fahrenheit must be maintained at all times. (Class 3)
- 3.3.3.2 Adequate lighting and ventilation must be maintained in all areas of the facility, in particular in areas where arts and crafts are conducted, and during any cleaning, sanitizing, or disinfecting procedure, to prevent children and personnel from inhaling harmful or potentially toxic fumes. (Class 2)

3.4 Licensed Capacity

3.4.1 Licensed Capacity

3.4.1.1 The capacity, as calculated by ACSI, must be posted in a conspicuous location within each room. (Class 3)

3.4.1.2 The licensed capacity of an early learning and care program is determined by the following factors:

3.4.1.2.1 Indoor floor space

3.4.1.2.2 Outdoor square footage

3.4.1.2.3 Sewer/septic capacity (as determined by Environmental Health)

3.4.1.2.4 Number of toilets/wash basins

Licensed capacity is determined by the most restrictive of these factors.

3.4.1.3 The total number of children in care on-site and while on field trips may never exceed the facility's licensed capacity. (Class 2)

3.4.2 Indoor Square Footage/Usable Floor Space

3.4.2.1 An early learning and care that had a valid license on October 1, 1992 must have a minimum of 20 square feet of usable indoor floor space for each child. This provision is not affected by a change of ownership as long as the program remains continuously licensed at the original site. An early learning and care facility that did not hold a valid license on October 1, 1992 and seeks approval to operate as an early learning and care facility must have a minimum of 35 square feet for each child. (Class 2)

3.4.2.2 Usable indoor floor space refers to space available for indoor play, classroom, work area, or nap area.

3.4.2.3 To determine overall facility capacity, usable indoor floor space is calculated by measuring at floor level from interior walls and by deleting space for stairways, toilets and bath facilities, permanent fixtures and non-movable furniture. Kitchens and designated food preparation areas, offices, laundry rooms, storage areas, hallways, and other areas not normally used or accessible to the children in daily operations are not included when calculating usable indoor floor space to determine total facility capacity.

3.4.2.4 Each room routinely used as a classroom must provide the minimum 35 square footage of usable indoor floor space per child. (Class 2)

3.4.2.5 Shelves or storage for toys and other materials will be considered as usable indoor floor space if accessible to children.

3.4.2.6 Where infants are in care, they must have open indoor floor space outside of cribs and playpens. The space used for play may be the same space used for cribs and play pens, if the cribs and play pens can be moved to allow for open floor space. (Class 3)

3.4.3 Multipurpose Rooms

3.4.3.1 Space that is used as a common dining area or for large group assemblies/activities is included in the usable indoor floor space for purposes of determining overall facility capacity.

3.4.3.2 Common area (i.e., multiple purpose rooms or dining rooms) square footage may not be counted in such a manner as to expand the capacity of individual rooms in the facility.

3.4.3.3 Square footage per child and room capacity are determined on a room-by-room basis.

3.4.3.4 While a common area is being used for dining or specific large group assemblies/activities (special events), the applicable 20- or 35- square foot requirement of usable indoor floor space does not apply, although supervision and ratios must still be maintained. This means that for special events, the overall room capacity may be greater than it would be under normal use; however, the facility must maintain minimum square footage per child in accordance with the local fire authority requirements. (Class 3)

3.4.3.5 Common area square footage may not be counted toward the facility's overall capacity unless the space is used regularly, and other classroom capacity requirements are not exceeded.

3.4.4 Outdoor Square Footage

The play area must be sufficient and safe to allow freedom of movement without collisions among active children. Children benefit from being outside as much as possible, and it is important to provide sufficient outdoor space to accommodate them.

3.4.4.1 There must be a minimum of 45 square feet of usable, safe, and sanitary outdoor play area per child, one year of age and older.

3.4.4.2 For the purposes of a licensed urban early learning and care facility, an additional minimum of 45 square feet of usable indoor play space for 25% of the licensed capacity shall be substituted for outdoor play space. The urban early learning and care facility must provide this additional indoor space with equipment that provides physical activity appropriate to the age of the children.

3.4.4.3 Based on the outdoor square footage, the total number of children using the play area may not exceed the outdoor capacity.

3.4.4.4 For indoor recreational facilities or facilities that provide only evening early learning and care, outdoor play space is not required provided an open area within the existing indoor space is designated and available for play that promotes the development of gross motor skills. (Class 3)

3.5 Outdoor Play Area

A. The outdoor play area is designed with equipment that is age and developmentally appropriate, and located in clearly defined spaces with semi-private areas where children can play alone or in small groups. The area must be clean and free from litter, nails, glass and other hazards. (Class 2)

B. The outdoor area must be designed to allow early learning and care personnel to clearly see children while playing on all equipment. (Class 2)

C. The outdoor play area must provide shade. Shade may be provided by trees, buildings, or structures. (Class 3)

D. Children must not come into contact with any surface or equipment which poses a burn risk. (Class 2)

E. The facility's outdoor play area must be fenced as required by local ordinances to prevent access by children to all water hazards within or adjacent to outdoor play areas, such as pools, ditches, retention ponds, and fishponds. (Class 2)

F. The outdoor play area must have adequate fencing or walls a minimum of 4 feet in height. Fencing, including gates, must be continuous and must not have gaps or opening larger than 3 ½ inches that would allow children to exit the outdoor play area. The base of the fence must remain at ground level and be free from erosion or build-up to prevent inside and outside access by children or animals. These areas must have at least two exits, with at least one being remote from the buildings. If an outdoor play area was approved for usage by ACSI prior to October 25, 2017, no new exits are required to be added to meet this standard. However, if outdoor play area fencing is changed then the standard would apply, and two exits must be provided. (Class 2)

3.6 Napping/Sleeping Requirements

For the purposes of these requirements, "sleeping" refers to the normal night-time sleep cycle, while "napping" refers to a brief period of rest during daylight or early evening hours.

3.6.1 Bedding and Linens

Each child in care must be provided safe and sanitary bedding to be used when napping or sleeping. Nap bedding is not required for school-age children; however, the program must provide an area for children that choose to rest.

3.6.1.1 Sleep bedding includes beds, cribs, or mattresses. Air and foam mattresses are prohibited. (Class 3)

- 3.6.1.2 If children are sleeping overnight in the facility, early learning and care personnel must ensure accepted bedtime routines are practiced, such as brushing teeth and washing face and hands.
- 3.6.1.2.1 Toothbrushes, towels, and wash cloths may not be shared.
- 3.6.1.2.2 Toothbrushes must be stored so that they cannot touch each other.
- 3.6.1.3 Nap bedding includes sleep bedding, cots, playpens, play yards or floor mats. Air and foam mattresses are prohibited. (Class 3)
- 3.6.1.4 Floor mats must be at least one-inch thick and covered with an impermeable surface. (Class 3)
- 3.6.1.5 Bedding must be appropriate for the child's size. (Class 3)
- 3.6.1.6 Linens, if used, must be washed at least once a week and more often if soiled or dirty. Linens used by more than one child must be washed in between usage. Linens must be provided when children are sleeping, and pillows and blankets must be available. For children under the age of one, please follow the requirements outlined in section 3.6.4. (Class 3)
- 3.6.1.7 Bedding and linens, when not in use, must be stored in a sanitary manner which prevents the spread of germs or lice from other linens. All bedding and linens must be thoroughly cleaned and sanitized at least once a week, and before use by another child. (Class 3)
- 3.6.1.8 Bedding and linens shall not be stored in the bathroom, unless stored in cabinets. (Class 3)
- 3.6.1.9 No double or multi-deck cribs, cots, or beds may be used. (Class 3)

3.6.2 Nap/Sleep Space

- 3.6.2.1 Each early learning and care program must include a designated area where each child can sit quietly or lie down to rest or nap. (Class 3)
- 3.6.2.2 When not in use, napping space and indoor floor space may be used interchangeably as indoor floor space. (Class 3)
- 3.6.2.3 A minimum of 18 inches must be maintained around individual napping and sleeping spaces. A maximum of two sides of a napping or sleeping space may be against a solid barrier, such as the wall. The solid side of a crib does not meet the requirements for a solid barrier. (Class 3)
- 3.6.2.4 Napping and sleeping spaces must not be under furniture or against furniture that creates a hazard. (Class 2)
- 3.6.2.5 Napping and sleeping areas must not be in exit areas. All exits must remain clear in accordance with fire safety requirements. (Class 2)

3.6.3 Crib Requirements

Children up to one year of age must be in a crib or playpen/play yard with sides for napping. Crib sides must be secured while there is an infant in the crib. Bar spacing must not exceed 2 3/8 inches. Cribs or playpen/play yards must meet the regulations as outlined in Title 16, Parts 1219, 1220 & 1221 Code of Federal Regulations, 2014, which is incorporated by reference in 65C- 22.001(7)(w), F.A.C. (Class 2)

3.6.4 Safe Sleep

- 3.6.4.1 All personnel that care for infants must follow safe sleep practices as recommended by the American Academy of Pediatrics (AAP) as referenced in Caring for Our Children Basics Health and Safety Foundations for Early Care and Education, which is incorporated by reference in 65C- 22.001(7)(v), F.A.C. Cribs or playpens/play yards used for infants must have tight fitted sheets and no excess bedding, which includes but is not limited to: bumper pads, hanging mobiles, quilts, comforters, receiving blankets, pillows, stuffed animals and cushions. (Class 2)

3.6.4.2 When napping or sleeping, young infants who are not able to roll over must be positioned on their backs, heads uncovered, and on a firm surface to reduce the risk of Sudden Infant Death Syndrome, unless an alternate position is authorized by a physician. Sleep sacks that fit according to manufacturer's recommendations, do not restrict the infant's arms, and will not slide up around the infant's face may be used for the comfort of the sleeping infant; however, swaddling shall not be used unless authorized in writing by the child's physician. Written documentation of a physician's authorization must be on file at the facility. Documentation must include the child's name, child's date of birth, description of sleep position required, instructions for the use of any equipment needed, and length of time authorization is valid. (Class 2)

3.6.4.3 Children must not be placed in cribs, playpens, play yards or other sleeping and napping bedding with items that could pose a strangulation or suffocation risk. Cribs, playpens, play yards, other napping and sleeping bedding being used by a child must be placed a minimum of 18 inches away from window blinds, draperies or any window treatment/cover that pose a strangulation hazard. (Class 2)

3.7 Restrooms and Bath Facilities

A. Each early learning and care facility must provide and maintain bathroom facilities that are easily accessible, and at a height usable by the children. Platforms may be used if they are safely constructed and have an impervious surface that can be easily cleaned and sanitized. (Class 3)

B. Facilities must have a sufficient number of toilets and sinks for the number of children being served. For facilities having from one to fifteen children, there must be at least one toilet and one sink. There must be at least one additional toilet and sink for every 30 children thereafter. For design and construction of a new early learning and care facility or modification to an existing facility, the program must submit copies of permits obtained to do the work or proof that the permit was satisfied according to the city/county local jurisdiction. (Class 3)

C. If only diapered infants are in care at the facility, then one toilet and two sinks per 30 infants is required. (Class 3)

D. Potty chairs, if used, shall be in addition to the toilet requirements, and must be cleaned and sanitized or disinfected after each use. (Class 2)

E. Bathrooms must not open directly into an area where food is prepared. A toilet facility may open directly into an area used by children where food is served, such as into a classroom where tables/chairs have multiple uses. (Class 3)

F. Children must receive supervision and assistance as required by their age and developmental needs. They must be accounted for at all times while bathing and toileting. (Class 2)

G. Running water, soap, trash receptacles, toilet paper, and disposable towels or hand-drying machines that are properly installed and maintained must be available and within reach of children using the bathroom. (Class 3)

H. Each toilet and sink must be maintained in good operating condition, cleaned, and sanitized or disinfected as needed, but at least once per day. Sinks utilized for teeth brushing activities/procedures by the children must be sanitized prior to the activity occurring. (Class 2)

3.8 Fire Safety and Emergency Preparedness

To ensure the safety of children in care, facilities are required to receive yearly fire inspections by a certified fire inspector, and they must perform monthly drills/exercises to practice fire, inclement weather and lockdown procedures. Frequent practice of emergency procedures will facilitate a calm and competent reaction in response to an actual emergency, should it occur. (Class 2)

3.8.1 Operable Phone

There must be at least one operable corded telephone that is available to all early learning and care personnel at all times during the hours of operation. Emergency numbers including the Fire Department, Abuse Hotline, Poison Control, and 911 and facility address including directions to the facility must be posted by each phone. (Class 2)

3.8.2 Fire Safety

3.8.2.1 Unless statutorily exempted, all Early learning and care facilities must conform to state standards adopted by the State Fire Marshal. A copy of the current and approved annual fire inspection report completed by a certified fire inspector must be on file with ACSI. If the program is granted a fire inspection exemption by the local fire inspection office, the exemption must be documented and maintained on file at the program. (Class 2)

3.8.2.2 Fire extinguishers with a minimum rating of 2A:10BC must be properly installed in each classroom, serviced and maintained with current inspection tags at all times. (Class 3)

3.8.2.3 The distance to the nearest extinguisher shall not be more than 75 feet from rooms occupied by children. A fire extinguisher must be present in vehicles used to transport children and areas where food is prepared. (Class 3)

3.8.2.4 Automatic range-top fire suppression systems are required in the kitchen for facilities that deep fry food. Suppression hood systems must be maintained and inspected by a certified inspector. A copy of the current and approved annual inspection notating compliance with the Florida Fire Prevention Code must be on file with the licensing authority. (Class 2)

3.8.3 Exit Areas

The exits must be clearly marked, identifying the path to safety in case of an emergency, at all times during the operation of the early learning and care facility. The exits must not be blocked at any time. (Class 2)

3.8.4 Fire Drills

3.8.4.1 During the facility's license year, fire drills utilizing the alarm system, approved by the local fire authority, must be conducted monthly at various dates and times when children are in care. (Class 2)

3.8.4.2 When the facility's approved fire alarm alert system is activated or initiated, all adults and children must evacuate the facility. (Class 2)

3.8.4.3 A current attendance record and parent contact information must accompany early learning and care personnel out of the building during a drill or actual evacuation and be used to account for all children. The operator must maintain a written record of the fire drills showing the date, number of children and early learning and care personnel in attendance, evacuation route used, and time taken for all individuals to evacuate the premises. Each fire drill record must be maintained for a minimum of 12 months from the date of the fire drill. The fire drills conducted must include, at a minimum: (Class 2)

3.8.4.3.1 One fire drill using an alternate evacuation route,

3.8.4.3.2 One fire drill during napping/sleeping times, and

3.8.4.3.3 One fire drill in the presence and at the request of the licensing authority. This drill will be coordinated with the operator or designee.

3.8.5 Emergency Preparedness

3.8.5.1 The operator must develop a written emergency preparedness plan that includes, at a minimum, procedures to be taken by the facility during a fire, evacuation, relocation, shelter in place, lockdown, and inclement weather (for example: hurricanes, tropical storms or tornadoes), and to facilitate parent/guardian reunification onsite and offsite. The plan must describe how the facility will notify and update parents/guardians, as well as, meet the needs of all children, including children with special needs or chronic medical conditions, during and following an emergency event. A current attendance record/classroom rosters and parent contact information must accompany early learning and care personnel during the drill or actual emergency and must be used to account for all children. Daily classroom attendance rosters must be used to account for all children once gathered in a safe space after exit and upon return to the program. (Class 2)

3.8.5.2 Lockdown and inclement weather drills shall be conducted a minimum of one time each per operating year when children are in care and the documentation of these drills must be maintained for 12 months from the date of the drill. A lockdown or inclement weather drill may substitute for one monthly fire drill. Substitutions for fire drills may not occur more than three times within the licensure year. Documentation of this substitution must be maintained for 12 months from the date of the drill. (Class 2)

3.8.5.3 The operator must maintain and post in an easily seen location a written record of emergency preparedness drills showing the type of drill, date conducted, number of children and early learning and care personnel in attendance, and time taken for all individuals to complete the drill. Documentation of drills must be available at the time of inspection. (Class 3)

3.8.5.4 The operator must prepare and post an emergency evacuation plan in each room of the facility, excluding restrooms, including a diagram of safe routes by which the personnel and children may exit in the event of fire or other emergency requiring evacuation. (Class 2)

3.8.5.5 A facility that chooses to operate using an alternate power source, such as a generator, must have the power source permanently installed and maintained in accordance with the manufacturer's recommendations and comply with the Florida Building Code and the Florida Fire Prevention Code. The alternate power source and fuel supply shall be located in an area that is not subject to flooding or damage from storm surge. Additionally, if the generator is gas powered, the facility must install and maintain a carbon monoxide detector. (Class 2)

3.8.6 After a Fire, Man-made, or Natural Disaster

After a fire, man-made, or natural disaster, the operator must notify ACSI within 24 hours (via early_education@acsi.org) of operational status in order for ACSI to ensure health standards are being met for continued operation. (Class 2)

3.8.7 Emergency Procedures

Facilities must have a procedure for responding to situations when an immediate emergency response is required. A contingency plan for emergency or disaster situations needs to be in place when it may not be possible to follow standard emergency procedures. Emergency procedures must be posted and readily available. All early learning and care personnel must be trained to manage in an emergency.

3.8.7.1 The facility must have a written plan for reporting and managing any incident or unusual occurrence that is threatening to the health, safety, or welfare of the children or early learning and care personnel to ACSI. The following types of incidents must be addressed: (Class 3)

3.8.7.1.1 Lost or missing child;

3.8.7.1.2 Suspected maltreatment of a child;

3.8.7.1.3 Injuries or illness requiring hospitalization or emergency treatment;

3.8.7.1.4 Death of child or early learning and care personnel;

3.8.7.1.5 Presence of a threatening individual who attempts or succeeds in gaining entrance to the facility.

3.8.8 Food Preparation Area

A food preparation area is a designated room, such as a kitchen, or a designated space in a facility not normally used or accessible to the children in daily operations for indoor play, classroom, work or nap spaces, and not included when calculating usable indoor floor space.

3.8.8.1 A food preparation area is required for facilities that choose to prepare food in a manner consistent with the definition of “preparation of food.” Specific requirements for the food preparation area include: (Class 3)

3.8.8.1.1 Ventilation provided either by mechanical or natural means to provide fresh air and control of unpleasant odors, such as a fan, vent, or open window with a screen.

3.8.8.1.2 Smooth, nonabsorbent food contact surfaces with no unsealed cracks or seams. Food-contact surfaces are surfaces of equipment, countertops,

utensils, etc., that food comes into contact with during food preparation.

3.8.8.1.3 Food equipment maintained and stored in a sanitary manner and out of the reach of children.

3.8.8.1.4 Shielded lighting.

3.8.8.1.5 Nonabsorbent and easily cleaned walls, flooring, and floor covering.

3.8.8.1.6 Easily cleanable and replaceable ceiling in the event of water and other damage, mildew or mold.

3.8.8.1.7 A separate handwashing station with hot running water, a minimum of 100 degrees Fahrenheit. The handwashing station must include a sink with running water and drainage, soap, trash can, and disposable towels or hand-drying machines that are properly installed and maintained. A handwashing sink shall not be used for any purpose other than handwashing. Handwashing stations must include posted signs visible to early learning and care personnel and children demonstrating proper handwashing technique. Portable sinks may not be used for dishwashing or food preparation. If a portable sink is used for handwashing in the food preparation area, hot water must be provided.

3.8.8.1.8 Leak-proof, non-absorbent containers covered with a tight-fitting lid for all food waste stored inside the facility. The container must be emptied, cleaned, and sanitized or disinfected daily.

3.8.8.1.9 A food preparation area shall be clean and free of dust, dirt, food particles, and grease deposits.

3.8.8.2 Early learning and care personnel, while working in the food preparation area, must wear proper head covering, such as a hair net or hat. To prevent contact with ready-to-eat foods, Early learning and care personnel must use clean disposable gloves, utensils, or similar items in the food preparation area. (Class 2)

3.8.8.3 For safety, children must not be present in the food preparation area when meals and snacks are prepared unless being supervised or participating in a cooking activity. (Class 2)

3.8.9 Food Storage

Proper storage of food is essential to prevent food contamination, as well as, insect and rodent infestation. Correct handling and storage of all food is a key component in preventing food-borne illnesses. To prevent bacteria growth, cold food must be kept at or below 41 degrees Fahrenheit and hot foods at or above 135 degrees Fahrenheit.

Facilities choosing to prepare food must have a designated space for food storage within the designated food preparation area or in a room not calculated as part of indoor floor space, and in an area not used for diapering. Off-site food storage is permissible only if the site of storage is a licensed early learning and care facility under the same ownership that includes a food preparation area that meets ACSI standards.

3.8.9.1 Food containers, such as cans, plastic containers, boxes and bags must be stored above the floor on clean surfaces protected from splash and other contamination. (Class 3)

3.8.9.2 Stored food must be consumed or discarded on or before the expiration dates listed by the manufacturer. (Class 2)

3.8.9.3 Poisonous/toxic chemicals or cleaning products must be stored separately from food. Products must not be stored on shelves above food preparation areas and/or food products intended for human consumption, unless placed in bins that are impermeable. (Class 2)

3.8.9.4 Opened packages of perishable or leftover food items must be properly covered or sealed in containers or bags, labeled with the date, and properly stored and discarded within seven calendar days. (Class 3)

3.8.9.5 Opened packages of dried goods must be properly covered/sealed, properly stored, and discarded according to the manufacturer's recommended date or if the quality of the food has been compromised. (Class 3)

3.8.9.6 Refrigerators/freezers:

3.8.9.6.1 An accurate thermometer designed to measure cold storage temperature must be placed inside each refrigeration and freezer unit. Thermometers in refrigerators must show a reading of 41 degrees Fahrenheit or below, and thermometers in freezers must show a reading of 0 degrees Fahrenheit or below. The thermometer must be located in the center of the unit and be readily accessible. Thermometer temperature readings higher than specified above require further temperature testing of food samples stored in the unit using a probe type thermometer; and adjustments to the unit setting to reach and maintain the required readings must be made. (Class 3)

3.8.9.6.2 Food may be frozen prior to the expiration date, but when thawed, it must be labeled with the date it was removed from the freezer and discarded within seven calendar days. (Class 3)

3.8.9.6.3 Frozen food must be labeled by date and type noted below and stored according to the following table: (Class 3)

Food Item	Months
Bacon and sausage	1 to 2 months
Casseroles	2 to 3 months
Frozen dinner and entrees	3 to 4 months
Ham, hot dogs, lunch meats	1 to 2 months
Meat, uncooked	4 to 12 months
Meat, uncooked ground	3 to 4 months
Meat, cooked	2 to 3 months
Poultry, cooked	4 months
Soups and stews	2 to 3 months

3.9 Food Preparation/Food Service

3.9.1 Food Safety

Handling of food in a safe and careful manner prevents the spread of bacteria, viruses and fungi. Outbreaks of foodborne illnesses have occurred in many settings, including early learning and care facilities.

3.9.1.1 Children are at a higher risk for contracting food-borne illness, as their bodies are in the process of growing, developing, and building adequate immune systems to fight illness. While some food-borne illnesses originate at farms or food manufacturing plants, the majority are the result of poor food handling practices. (Class 3)

3.9.1.2 If an early learning and care facility provides food to children in care, it must provide nutritious meals and snacks of a quantity and quality to help meet the daily nutritional needs of the children. The USDA MyPlate is to be used to determine which food groups to serve at each meal or snack serving size and age appropriateness of the selected foods for children. In addition, meals and snacks must contain at a minimum the meal and snack patterns shown for infants and children in the early learning and care Food Program Meal Patterns. (Class 3)

3.9.1.3 Foods that are associated with young children’s choking incidents must not be served to children under 4 years of age, such as, but not limited to, whole/round hot dogs, popcorn, chips, pretzel nuggets, whole grapes, nuts, cheese cubes/sticks and any food that is of similar shape and size of the trachea/windpipe. Food for infants must be cut into pieces ¼ inch or smaller, food for toddlers must be cut into pieces ½ inch or smaller to prevent choking. This applies to all food, even food provided by parents/guardians. (Class 3)

3.9.1.4 If a facility chooses to provide food to children directly or by contract with an outside source, such as a caterer, the food must be free from spoilage and handled in a sanitary manner at all times. The facility must have adequate equipment available to maintain food safety. (Class 3)

3.9.1.4.1 Meat, poultry, fish, dairy products, and processed foods must have been inspected under the United States Department of Agriculture requirements.

3.9.1.4.2 No raw milk or unpasteurized juice may be served without the written consent of the parent or legal guardian.

3.9.1.4.3 No home-canned food may be served.

3.9.1.4.4 No homegrown eggs may be served.

3.9.1.4.5 Recalled food items must be discarded and removed from the facility.

3.9.1.4.6 All raw fruits and vegetables must be washed thoroughly before being served or cooked.

3.9.1.4.7 To prevent food from becoming potentially hazardous, hot foods must be maintained at a temperature of 135 degrees Fahrenheit or above, and cold foods must be maintained at temperature of 41 degrees Fahrenheit, or below. Hot foods are kept out of reach of children. (Class 2)

3.9.1.4.8 Foods that comprise meals included on a facility’s menu may not be prepared or partially prepared outside of the facility unless prepared by a caterer or a licensed early learning and care facility under the same ownership that includes a food preparation area that meets ACSI Standards. Food must be thoroughly cooked and/or reheated according to the following table: (Class 2)

Food	Minimum Internal Temperature
Fruits, Vegetables, Grains, and Legumes	135° F
Roasts (Fresh Beef, Pork and Lamb)	145° F (with a 3-minute rest time)
Fish	145° F
Eggs	Cook until yolk and white are firm
Egg dishes	160° F
Ground meats (beef, pork, and lamb) and fresh ham (raw)	160° F
Poultry- whole, parts, or ground	165° F
Leftovers	165° F
Foods cooked in microwave	165° F
Sauces, gravy, soups, casseroles	165° F

3.9.1.5 If a facility chooses to provide or make available food to children in care from an outside source, such as a caterer, or a licensed early learning and care facility under the same ownership that includes a food preparation area that meets

licensing standards, or as the result of a learning activity provided by an early learning and care program, such as a garden, it is the responsibility of the provider to ensure all food intended for consumption by a child in care is free from spoilage and contamination and safe for human consumption. (Class 2)

3.9.1.5.1 A log must be maintained for all prepared meals being transported into the facility. The log must be retained for a minimum of 12 months. The log must include the delivery date, time of arrival, quantity and types of food, verification by the recipient of adequate temperatures of food, and the name and signature of the recipient. The facility shall not accept food that is not at the appropriate holding temperature. (Class 3)

3.9.1.5.2 If food delivered by an outside source does not meet licensing standards, the facility must have an alternate plan for meals. (Class 2)

3.9.1.5.3 Parents and legal guardians must be advised in advance of each food- related activity, such as special occasions and learning activities that include food consumption. Written parental permission may be obtained in the form of a general or specific permission slip. Documentation of parent permission for food activities must be maintained for a minimum of 12 months from the date of each activity. (Class 3)

3.9.1.6 If a facility chooses not to provide meals and snacks, arrangements must be made with the custodial parent or legal guardian to provide nutritional food for the child. In the event that a child's parent fails to provide nutritious meals/snacks, the program must provide supplemental food items to complete the child's meal. (Class 3)

3.9.1.7 If a special diet is required for a child by a physician, a copy of the physician's order, a copy of the diet, and a sample meal plan for the special diet must be maintained in the child's file and followed. If the custodial parent or legal guardian notifies the program of any known food allergies, written documentation must be maintained in the child's file for as long as the child is in care. Special food restrictions must be shared with early learning and care personnel posted in an easily seen location that is not readily visible by parents or non-early learning and care personnel and followed. (Class 3)

3.9.1.8 Meal and snack menus must be planned, written, dated, and posted at the beginning of each week in an easily seen place, accessible to the parents/guardians, certified inspectors, and ACSI visiting team. Any menu substitutions must be noted on the menu. A generalized menu of possible snack choices for programs that receive food donations is acceptable. All meals and snacks prepared outside of the facility's kitchen or designated food preparation area, such as catered food, must be listed along with the source. Daily meal and snack menus must be maintained for a minimum of 12 months for licensing purposes. Operators who participate in the USDA Food Program must keep menus in accordance with the Department of Health and USDA requirements. (Class 3)

3.9.2 Dishwashing and Sanitization

For facilities that prepare food, non-disposable food equipment, tableware, and utensils utilized for food preparation must be properly cleaned by pre-rinsing or scraping, washing, rinsing, sanitizing, and air drying. If the early learning and care facility lacks adequate dishwashing and sanitation described in this section for dishes, equipment and utensils, only disposable single-use items may be used. All single service items must be discarded after each use. Food equipment, tableware and utensils used to prepare food must be washed and sanitized on-site except when a caterer is used, and the caterer is responsible for dishwashing as evidenced by a

written agreement. Dishwashing and sanitization must be accomplished by one of the following:

3.9.2.1 A dishwasher with a sanitizing cycle. (Class 3)

3.9.2.1.1 The dishwasher must use heat or chemical injection for sanitization.

3.9.2.1.2 If chemical sanitization is used, the wash water temperature must be set at a minimum of 120 degrees Fahrenheit, and the rinse water must be maintained at 75 degrees Fahrenheit.

3.9.2.1.3 Automatic sanitizing dispenser must be properly installed and maintained.

3.9.2.1.4 A test kit or other device that accurately measures the concentration of the sanitizing solution must be available and used to confirm appropriate concentration of solution during one full cycle per day.

3.9.2.1.5 If hot water is used for sanitization, the dishwasher must achieve a temperature of 160 degrees Fahrenheit on the surface of the equipment/dishes/utensils being washed.

3.9.2.1.6 The facility must have a means for measuring the required temperature either by an irreversible registering temperature indicator (heat strip) or an external temperature display built into the machine.

B. An installed three-compartment sink, or an installed two-compartment sink with a non-stationary or portable compartment receptacle. (Class 3)

1. Installed compartment sinks may be used to wash produce and to fill cooking pots and pans with water when not in use for dishwashing.

2. Sinks must be sanitized before and after each use.

3. The first compartment must be used for washing; the second compartment must be used for rinsing; and the third compartment must be used for sanitizing.

4. If only an installed two-compartment sink is available, the second compartment must be used for rinsing and a non-stationary or portable compartment receptacle must be available and used to sanitize.

C. Chemical Sanitization. (Class 3)

1. If chemical sanitization is used, an exposure time of at least 7 seconds is required for a chlorine solution of 50 mg/L that has a pH of 10 or less and a temperature of at least 75 degrees Fahrenheit.

2. If other sanitizers are used, the manufacturer instructions must be strictly followed.

3. A test kit or other device that accurately measures the concentration of the sanitizing solution must be available and used to confirm appropriate concentration of solution during each use.

D. Hot water sanitization. (Class 3)

If hot water is used for sanitizing, equipment/dishes/utensils must be immersed for a period of at least one half-minute in hot water at a temperature of 170 degrees Fahrenheit or above. A thermometer designed to measure the water temperature must be available and used to confirm the appropriate temperature of the hot water during each use.

3.9.3 Food Handling

3.9.3.1 Bottles and sippy cups provided by the facility must be washed, rinsed, and sanitized between each use and do not have to be labeled. (Class 3)

3.9.3.2 Bottles and sippy cups brought from home shall be individually labeled with the child's first and last name and shall be returned to the custodial parent or legal guardian daily. (Class 3)

3.9.3.3 Milk and food must not sit out for longer than 15 minutes prior to the beginning of the meal to avoid contamination and spoilage. Food must not be served to children at more than 110 degrees Fahrenheit. Allow time for food to cool before serving to children that does not exceed 15 minutes. (Class 3)

3.9.3.4 Early learning and care personnel, while distributing snacks and serving food, must use disposable gloves, utensils, or similar items to prevent skin contact with food. (Class 3)

3.9.3.5 Food provided by parents/guardians must be properly stored and handled in a sanitary manner at all times to prevent contamination or spoilage. If food is supposed to be kept cold, the food must be stored in a refrigerator until eaten, or parents/guardians must include ice packs to keep food cold. (Class 3)

3.9.4 Breastmilk, Infant Formula, and Food

3.9.4.1 Breastmilk and formula must always be handled in a sanitary manner and according to manufacturer's instructions and instructions by parents/guardians. If instructions are not readily available, early learning and care personnel must obtain information from the World Health Organization's Safe Preparation, Storage and Handling of Powdered Infant Formula Guidelines, as referenced in Caring for Our Children Basics Health and Safety Foundations for Early Care and Education. (Class 3)

3.9.4.2 The provider must make sure all formula and food brought from home are labeled with the child's first and last name. The provider is responsible for the label; therefore, if the label is not completed by the parent, early learning and care personnel must put the label on when the formula or food is received. (Class 3)

3.9.4.3 Breastmilk or infant formula provided for a specific infant by a parent or guardian should not be fed to other children. If the wrong breastmilk or formula is given to an infant in care, the provider must immediately inform the child's parent or legal guardian of the incident, as well as the parent or legal guardian of the infant that the formula or breastmilk was intended for. These incidents must be documented as an accident/incident. (Class 3)

3.9.4.4 Prepared bottles must be placed in the refrigerator immediately and used within 24 hours. (Class 3)

3.9.4.5 Previously opened baby food jars must not be accepted at the center. If food is fed directly from the jar by the caregiver, the jar can be used for only one feeding and the remainder discarded. (Class 3)

3.9.4.6 Providers must develop and follow procedures for the preparation and storage of expressed breastmilk that ensures the health and safety of all infants, as outlined by the Academy of Breastfeeding Medicine Protocol, and prohibits the use of infant formula for a breastfed infant without parental consent, as referenced in Caring for Our Children Basics Health and Safety Foundations for Early Care and Education. (Class 3)

3.9.4.7 Due to the extreme risk of choking, solid foods, including cereal, may not be given in bottles or with infant feeders to children with normal feeding habits unless authorized by a physician. Solid foods may not be fed to an infant younger than 4 months of age unless directed by a physician. Solid foods must be of a safe consistency and must be developmentally appropriate for the age and developmental ability of the infant. (Class 2)

3.9.5 Bottle Warming

For optimum digestion, breastmilk and infant formula should be served at body temperature.

3.9.5.1 Bottle warming devices and crock pots, including cords, must be kept inaccessible to children at all times. (Class 2)

3.9.5.2 Devices must be maintained on the lowest possible temperature setting and must be secured in such a way as to prevent them from tipping over, splashing, or spilling. (Class 2)

3.9.5.3 Any bottle warming device that has a water reservoir must be emptied, washed, and refilled each day. (Class 3)

- 3.9.5.4 Bottled breast milk, infant bottles, and formula must not be heated in the microwave. (Class 2)
- 3.9.5.5 Heated bottles and foods must be tested before feeding to ensure heat is evenly distributed and to prevent injury to children. (Class 2)
- 3.9.5.6 A bottle can only be warmed once. A warmed bottle cannot be returned to the refrigerator or re-warmed. (Class 2)
- 3.9.5.7 All breastmilk and infant formula left in bottles after feedings must be discarded within one hour after serving an infant. Unused breastmilk may be returned to the parent in the bottle or container provided. (Class 3)

3.9.6 Drinking Water

- 3.9.6.1 Clean, sanitary drinking water shall be readily accessible in indoor and outdoor areas, throughout the day. On hot days, bottle fed infants may be given additional breastmilk or formula mixed with water provided by their parent/legal guardian. Infants should not be given plain water in the first six months of life unless directed by the child's physician. For the purposes of providing clean, sanitary drinking water, sink/water fountain combinations are prohibited if the handwashing sink is used for hygiene procedures after toileting or diaper changing. When the water supply source is a well or other private source (i.e., not served by a public supply) on-site documentary evidence verifies that the local regulatory health authority has determined the water to be safe for human consumption.
- 3.9.6.2 A licensed early learning and care facility with a sink/water fountain combination in existence on September 16, 2019 will be allowed to continue to use the sink as long as the facility remains continuously licensed at the site occupied.

3.10 Sanitation

3.10.1 Handwashing

Early learning and care personnel and children must wash their hands thoroughly with soap and running water, dry, and follow personal hygiene procedures for themselves and while assisting others. Examples of activities when handwashing is required include but are not limited to before and after eating, immediately following outdoor play, after toileting, following the use of any cleaners or toxic chemicals, before and after administering medication, and during food preparation and snack distribution.

3.10.1.1 Early learning and care personnel and children must follow the Centers for Disease Control guidelines for handwashing. CDC's Handwashing Poster is to be posted by all handwashing sinks and in all diaper changing areas. (Class 3) (<https://www.myflfamilies.com/sites/default/files/2023-02/CDC%20Hand%20Washing%20Guidelines.pdf>)

3.10.1.2 The use of hand sanitizers does not substitute for handwashing. However, in areas away from the facility where no running water is available, hand sanitizers may be used. Examples of such places are field trips, nature trails or picnic areas where running water is not readily available. (Class 3)

3.10.1.3 Early learning and care personnel with open wounds and/or injury that inhibits handwashing, such as casts, bandages, or braces, must not prepare food. (Class 3)

3.10.1.4 Situations or times that children, early learning and care personnel, and/or volunteers must perform hand hygiene must be posted in all food preparation, diapering, and toileting areas. (Class 3)

3.10.2 Diapering Requirements

When children in diapers are in care, a hand-washing station that includes a sink with running water, soap, trash receptacle, and disposable towels or hand drying machines that are properly installed and maintained shall be provided in the room or in an adjoining area which opens into the room.

3.10.2.1 Hands must be washed and dried thoroughly after each diapering or toileting procedure, and all surfaces that have been touched must be cleaned and sanitized or disinfected to prevent the spread of germs. (Class 3)

3.10.2.2 Handwashing sinks must not be used for food service preparation, dishwashing, or food clean up. (Class 3)

- 3.10.2.3 The diaper changing area must be physically separated from the food preparation, food service, and feeding area. (Class 3)
- 3.10.2.4 When children in diapers are in care, there must be a diaper changing area with an impermeable surface that is cleaned and sanitized or disinfected after each use. (Class 3)
- 3.10.2.5 Children must be directly attended to at all times when being diapered or when changing clothes. Early learning and care personnel must not leave children unattended on a table or countertop. A safety strap or harness must not be used on the diaper changing table/surface. (Class 2)
- 3.10.2.6 Items unrelated to diaper changing shall not be stored in the diaper changing area nor shall they be placed on the diaper changing table. (Class 3)
- 3.10.2.7 There must be a supply of clean diapers, clothing, and linens at all times. (Class 3)
- 3.10.2.8 When diapers, clothing or linens that are being used become soiled or wet, they are to be changed immediately, and properly disposed. (Class 3)
- 3.10.2.9 Soiled or wet disposable diapers must be disposed of in a plastic lined, securely covered container that is not accessible to the children. The container must be emptied, cleaned and sanitized or disinfected, at least, daily. (Class 3)
- 3.10.2.10 Soiled cloth diapers must be emptied of feces in the toilet and soiled or wet cloth diapers shall be placed in a securely covered container that is not accessible to the children. The container must be emptied, cleaned and sanitized or disinfected, at least, daily. (Class 2)
- 3.10.2.11 Diaper changing procedure (<https://www.cdc.gov/hygiene/pdf/diapering-Childcare-508.pdf>) must be posted in the changing area and followed to protect the health and safety of children and personnel. (Class 3)

3.11 Indoor Equipment

Equipment, materials, furnishings, and play areas should be sturdy, safe, and in good repair. Providers should monitor the Consumer Product Safety Commission (CPSC) recommendations for use of equipment. Walls, ceilings, floors, furnishings, equipment, toys, and other surfaces should be suitable to the location and the users. They should be maintained in good repair, free from visible soil, peeling paint, rust, pinching points, and clean. Equipment and furnishings must be arranged to allow direct supervision of children by personnel from all areas within a room/play area. Bookshelves, televisions, and other heavy furnishings must be stable and secured so as to not pose a threat of falling over.

In efforts to prevent children from climbing to dangerous heights or enabling them to reach hazardous items, chairs and other furnishings must be placed away from cabinets and shelves. The program should make accommodations to the program environment and schedule so that children with special needs may participate.

An early learning and care facility must make available toys, equipment, and furnishings suitable to each child's age and development and of a quantity for each to be involved in activities.

A. Toys, equipment, and furnishings must be safe and maintained in a sanitary condition following a routine schedule of cleaning, sanitizing and disinfecting. These items must be cleaned and sanitized or disinfected immediately or prior to another child's use if exposed to bodily fluids, such as saliva. Facilities must have a written routine schedule for cleaning, sanitizing and disinfecting equipment, materials, furnishings and play areas. This schedule must include items to be cleaned, sanitized or disinfected on a daily or weekly basis. Daily indoor equipment items include but are not limited to counter/table tops, toys, drinking fountains, floors, diaper pails, toilets, and sinks. Weekly indoor equipment items include, but are not limited to linens, machine washable cloth toys, play activity centers, dress-up clothes, cribs, mats, and cots. (Class 3)

B. Facilities must provide age-appropriate seating for the number of children eating meals and snack at one time. Chairs with a back and seating height that allows the child's feet to touch the ground are provided for each child one-year olds and older. Tables at a height that allows a child to sit comfortably with the table between underarm and waist. (Class 3)

- C. Moveable or non-stationary indoor climbing structures require padding for landing. Permanent or stationary playground equipment installed indoors must meet the same requirements for installation and use as outlined in the Outdoor Equipment section 3.12 B, C, D, E, F and I. (Class 3)
- D. Bathtubs, buckets, diaper pails, and other open containers of water must be emptied immediately after use. (Class 3)

3.12 Outdoor Equipment

- A. An early learning and care facility must provide and maintain enough usable equipment suitable to each child's age and development and of a quantity for each to be involved in activities. (Class 3)
- B. All playground equipment must match the body dimensions of the children, be securely anchored, unless portable or stationary by design, in good repair, maintained in safe and sanitary condition, and placed to ensure safe use by the children. Maintenance must include inspections conducted every month of all supports above and below the ground and of all connectors and moving parts. Documentation of maintenance inspections must be maintained for 12 months. (Class 3)
- C. All equipment, fences, and objects on the facility's premises shall be free from sharp, broken and jagged edges, and properly placed to prevent overcrowding or safety hazards in any one area. (Class 2)
- D. Permanent or stationary playground equipment must have a fall/use zone that extends a minimum of 6 feet in all directions from the perimeter of the equipment. All types of ground cover must be maintained to provide resilience and reduce the incidence of injuries to children in the event of falls. (Class 3)
1. If the ground cover in place is loose ground cover (such as, but not limited to mulch, shredded rubber chips, or sand) a minimum of 6 inches in depth is required in the use zone. Asphalt, concrete, hard packed dirt, hay, grass or leaves are unsuitable for use in the use zone area.
 2. If the ground cover in place is a unitary playground surface, then the unitary surfacing materials must be installed, maintained, or replaced according to manufacturer's instructions. Unitary surfaces must be tested to and comply with ASTM F1292; documentation of test data must be retained at the facility and available for ACSI to review.
 3. If the play area was approved by ACSI prior to January 1, 2020 and does not meet the 6-foot fall/use zone requirement, then the facility must submit a written notification, including photographs and layout of the play area, to ACSI prior to or on April 1, 2020, notifying its intention to continue to operate using the prior approved play area. However, if the permanent or stationary playground equipment is moved or replaced then the standard would apply, and six feet of use zone must be provided. Any new equipment added would be required to have the six feet of use zone in all directions from the perimeter of the equipment.
- E. Equipment used for climbing should not be placed over, or immediately next to, hard surfaces such as asphalt, concrete, dirt, grass, or flooring covered by carpet or gym mats not intended for use as surfacing for climbing equipment. (Class 2)
- F. All equipment used in the outdoor play area must be constructed and maintained according to manufacturer's recommendations and allow for water drainage. Any open containers with water must be emptied immediately after use, i.e., pots, toys, or other equipment that collects water. (Class 3)
- G. Sandboxes must be covered at the end of each day. The covering used must prevent access to the sandbox by animals. (Class 3)
- H. Wading pools, including inflatable water slides with a landing area where water collects, are prohibited. (Class 2)
- I. The provider shall maintain manufacturer's instructions on file electronically or in paper format for outdoor playground equipment purchased or installed on or after January 1, 2020, and/or have available for ACSI to review upon request. (Class 3)

4 Training

Training requirements in this section do not apply to personnel who do not work directly with the children such as cooks, book keepers, and janitors who are considered “other personnel.” If at any time “other personnel” fill in for classroom personnel and are in direct care of the children, training is required.

Early learning and care personnel in compliance with the school-age requirements shall be considered in compliance with the personnel training requirements.

4.1 Beginning Training

All new hires, including substitutes are required to complete orientation for new employees prior to interacting with children. ACSI FLORIDA APPROVAL PROGRAM directors and inspectors complete pre-service orientation each fall. All teaching staff (including assistants and volunteers) must complete job related professional development during the first year of employment. Training must be specific to the age(s) or the special circumstances/specific needs of the children that staff teach. Topics to include: behavior management, inclusion of students with disabilities, medication administration, child abuse reporting and compliance, health, safety, child development, nutrition, evaluation, language and literacy, curriculum, parent involvement, communication skills, and diverse races, cultures, and languages. Early learning and care personnel including volunteers who work 10 hours or more per month must begin required training within 90 days of employment in the early learning and care industry and successfully complete the required training by The Department of Children and Families (DCF) within 12 months from the date training begins. Training taken prior to employment in the early learning and care industry does not constitute “begin training.” The “begin training” time frames begin at the time of employment in the early learning and care industry. Training completion may not exceed 15 months from the date of employment. This may be accomplished by classroom attendance in a DCF approved training course, acquiring an educational exemption from a DCF approved training course, beginning a DCF approved online early learning and care training course, or by receiving results from a DCF approved competency examination. The early learning and care program is responsible for obtaining a training transcript from each staff member. (Class 3)

4.2 Training Requirements

4.2.1 Mandated Introductory Training

Early learning and care personnel must successfully complete 40 hours of early learning and care training as evidenced by successful completion of competency examinations offered by DCF or its designated representative with a weighted score of 70 or better. Early learning and care personnel who successfully completed the mandatory 40-hour Introductory early learning and care Training prior to January 1, 2004, are not required to fulfil the competency examination requirement. (Class 3)

4.2.1.1 Part I Courses (30 Hours)

Early learning and care personnel must complete all of the following:

- ✓ Early learning and care Facility Rules and Regulations
- ✓ Health, Safety and Nutrition
- ✓ Identifying and Reporting Child Abuse and Neglect
- ✓ Child Growth and Development
- ✓ Behavioral Observation and Screening

4.2.1.2 Part II Courses (10 Hours)

Early learning and care personnel must also complete 10 hours of the following Part II courses:

- ✓ Special Needs Appropriate Practices (10 hours), or
- ✓ Understanding Developmentally Appropriate Practices (5 hours) and one of the following courses:
 1. Infant and Toddler Appropriate Practices (5 hours)
 2. Preschool Appropriate Practices (5 hours)
 3. School-Age Appropriate Practices (5 hours)

4.2.2 Early Literacy Training

All early learning and care personnel must complete a single course of training in early literacy and language development of children ages birth through five years that is a minimum of five clock hours or .5 CEUs. Early literacy training must be completed within 12 months of date of employment in the early learning and care industry. Proof of completion may be documented on a certificate of course completion, classroom transcript, or diploma. Early learning and care personnel must complete one of the following: (Class 3)

4.2.2.1 One of DCF's online literacy courses available on the DCF's website.

4.2.2.2 One of DCF's approved literacy courses. A list of these courses can be obtained from DCF's website. (No additional courses will be approved by DCF.)

4.2.2.3 One college level early literacy course (for credit or non-credit) if taken within the last five years.

4.2.3 Safe Sleep/Shaken Baby Syndrome Training

All early learning and care personnel who work in a facility that offers care to infants must have training regarding guidance on safe sleep practices, preventing shaken baby syndrome and abusive head trauma; recognition of signs and symptoms of shaken baby syndrome and abusive head trauma; strategies for coping with crying, fussing, or distraught child and the development and vulnerabilities of the brain in infancy in early childhood within 30 days of hire at the facility. For early learning and care personnel to satisfy this requirement the training must be accomplished through one of following methods: DCF's Health Safety and Nutrition course, Safe Sleep course, or the Early Learning Florida's Safe Sleep Practices. Documentation of training must be maintained on DCF's training transcript in the early learning and care personnel record. (Class 3)

4.2.4 First Aid and Cardiopulmonary Resuscitation (CPR)

4.2.4.1 One Early learning and care personnel with current and valid certificate(s) of course completion for first aid training and one personnel with current and valid certificate of course completion for pediatric cardiopulmonary resuscitation (CPR) procedures must be present at all times that children are in care. The same personnel may satisfy both requirements. Documentation of CPR/FA training must be kept on file and available for ACSI to review. (Class 2)

4.2.4.2 All personnel are to have current CPR and first aid certification. (Class 2)

4.2.4.3 Certificates of course completion are valid based on the time frames established by each first aid training and CPR certification program, not to exceed three years.

4.2.4.4 CPR courses must include on-site, instructor-based skill assessments by a certified CPR instructor. Documentation of completion of the online course and on- site assessment must be maintained at the facility and available for review by ACSI. (Class 2)

4.2.5 Fire Extinguisher Training

All personnel shall be trained in the use and operation of a fire extinguisher, at each facility they are employed, within 30 days of date of hire. The facility must maintain documentation that all early learning and care personnel have completed training. (Class 3)

4.2.6 Transportation Training

All Early learning and care personnel participating in the transportation of children must have training regarding guidance on safe transportation practices prior to participating in transportation of children. For early learning and care personnel to satisfy this requirement the training must be accomplished through DCF's Transportation Safety course or the Early Learning Florida's Precautions in Transporting Children course. Early learning and care personnel working at a facility currently providing transportation must complete training by April 1, 2020. Documentation of training must be maintained on the training transcript in the personnel file. (Class 3)

4.2.7 Annual In-Service Training

Upon successful completion of the 40-hour introductory training requirements, Early learning and care personnel must complete a minimum of 10 clock-hours or one CEU of in-service training annually during the state's fiscal year beginning July 1 and ending June 30. The director and assistant director must complete at least 24 hours of job-related professional development annually. Topics include: early learning and care operations and management, administration, inclusion, personnel management, behavior management, first aid, medication administration, child abuse reporting and compliance, health, safety, child development, nutrition, evaluation, language and literacy, curriculum, parent involvement, and communication skills. (Class 3)

4.2.7.1 The annual 10 clock-hours or one CEU of in-service training concentrate on children ages birth through 12. Two of the required 10 clock hours must consist of Biblically integrated courses. In-service training must be completed in one or more of the following areas (college level courses will be accepted):

4.2.7.1.1 ACSI Early Education webinars located in [EE Community group](#);

4.2.7.1.2 Health and safety, including universal precautions, prevention of infectious diseases, sudden infant death syndrome, emergencies due to food and allergic reactions, shaken baby syndrome, use of safe sleep practices, administration of medicine, emergency preparedness, and handling of hazardous materials;

4.2.7.1.3 Pediatric CPR;

4.2.7.1.4 First Aid (may be taken to meet the in-service requirement only once every two years);

4.2.7.1.5 Nutrition;

4.2.7.1.6 Child development—typical and atypical;

4.2.7.1.7 Child transportation and safety;

4.2.7.1.8 Behavior management;

4.2.7.1.9 Working with families;

4.2.7.1.10 Design and use of child-oriented space;

4.2.7.1.11 Community, health and social service resources;

4.2.7.1.12 Child abuse;

4.2.7.1.13 Early learning and care for multilingual children;

4.2.7.1.14 Working with children with disabilities in early learning and care;

4.2.7.1.15 Safety in outdoor play;

4.2.7.1.16 Literacy;

4.2.7.1.17 Guidance and discipline;

4.2.7.1.18 Computer technology;

4.2.7.1.19 Leadership development/program management and early learning and care personnel supervision;

4.2.7.1.20 Age-appropriate lesson planning;

4.2.7.1.21 Homework assistance for school-age care;

4.2.7.1.22 Food safety training;

4.2.7.1.23 Developing special interest centers/spaces and environments;

4.2.7.1.24 Other course areas relating to early learning and care or early learning and care management;

4.2.7.1.25 Any of the online courses offered through DCF's early learning and care website.

4.2.7.2 Documentation of the in-service training requirement must be recorded on CF- FSP Form 5268, early learning and care In-Service Training Record and included in the early learning and care facility's personnel records. Form CF-FSP-5268 may be obtained from DCF's website at www.myflfamilies.com/Childcare. A new in-service training record is required each fiscal year. The in-service training records for the previous two fiscal years must also be maintained at the early learning and care facility for review by ACSI.

www.myflfamilies.com/Childcare. A new in-service training record is required each fiscal year. The in-service training records for the previous two fiscal years must also be maintained at the early learning and care facility for review by ACSI.

4.2.7.3 All early learning and care personnel employed in the industry beyond 15 months, who change employment from one early learning and care program to another during the fiscal year must complete the annual in-service training requirement.

4.2.7.4 Early learning and care personnel not in compliance with the annual in-service training requirement described in this section must complete the remaining in-service training requirement within 30 days of the noncompliance finding by ACSI. These hours cannot be used to meet the current year's in- service training requirements.

4.3 Break in Service

A. In the event an individual leaves the early learning and care industry in compliance with training requirements and returns to the industry either at the same or a different early learning and care facility, he or she will be given 90 days to comply with any new training requirements established during the gap in employment in the early learning and care industry. (Class 3)

B. In the event an individual leaves the early learning and care industry not in compliance with the training requirements and returns to the industry either at the same or a different early learning and care facility, he or she must comply with the training requirements described in this section, as well as any new training requirements that may have been added during the gap in employment in the early learning and care industry prior to re-employment. (Class 3)

4.4 Training Exemptions

4.4.1 Competency Examination Exemptions

Early learning and care personnel have one opportunity, if they choose, to exempt from one or more of DCF's Introductory Childcare Training courses prior to attending training by achieving a weighted score of 70 or better on the corresponding competency examination(s).

4.4.2 Educational Exemptions

4.4.2.1 DCF or its designated representative will exempt from the Health, Safety and Nutrition; Child Growth and Development; and Behavioral Observation and Screening courses those personnel who meet one of the following educational qualifications:

4.4.2.1.1 Associate degree or higher with six college credit hours in the areas of early childhood education/child growth and development, or degree in the area of elementary education with certification to teach any age birth through 6th grade.

4.4.2.1.2 An active National Early Childhood Credential (NECC) or an active Birth Through Five Floridan early learning and care Professional Credential (FCCPC).

4.4.2.2 DCF or its designated representative shall exempt personnel with a bachelor's degree or higher in the areas of early childhood education/child growth and in the areas of early childhood education/child growth and development from the Understanding Developmentally Appropriate Practices course, the Infant and Toddler Appropriate Practices course, and the Preschool Appropriate Practices course.

4.4.2.3 DCF or its designated representative shall exempt personnel with a bachelor's degree or higher in the area of elementary education from the Understanding Developmentally Appropriate Practices course and the School- Age Appropriate Practices course.

4.4.2.4 DCF or its designated representative shall exempt personnel with a bachelor's degree or higher in the area of exceptional student education from the Special Needs Appropriate Practices course.

There are no educational exemptions from the Childcare Facility Rules and Regulations course or from the Identifying and Reporting Child Abuse and Neglect courses.

4.4.3 Part II Exemption

Early learning and care personnel employed at the same facility prior to October 1, 1992, with no break in employment with the same employer, are exempt from completing Part II of the Childcare training.

4.5 Documentation of Training

DCF's training transcript is the only acceptable verification of successful completion of DCF's training, early literacy courses and school-age training documentation.

- A. DCF's training transcript from DCF's website at www.myflfamilies.com/Childcare.
- B. A copy of the training transcript must be included in each early learning and care personnel's record maintained at the early learning and care facility. (Class 3)
- C. Early literacy courses and school-age training documentation must be uploaded into the Florida Pathways (Registry), which may be accessed from DCF's website at www.myflfamilies.com/Childcare.
- D. Any course completion certificate not documented on the training transcript will be considered invalid, requiring that the course(s) be retaken. Until the coursework is retaken and completed, early learning and care facilities will be out of compliance for the mandatory training standard.

4.6 Staff Credentials

The early learning and care facility must have a minimum of one credentialed personnel for every 20 children. (Class 3)

- A. A credentialed personnel is defined as an early learning and care professional who has been issued a Staff Credential Verification documented on the individual's Training Transcript. Florida law requires that VPK instructional personnel possess an appropriate credential. If ACSI identifies that a designated VPK teacher does not have an active credential, ACSI will notify the local Early Learning Coalition or its designated representative.
- B. To apply for a staff credential verification, a candidate must complete CF-FSP Form 5211, Floridan early learning and care Staff Credential Verification Application and may be obtained from DCF's website at www.myflfamilies.com/Childcare. The candidate must meet one of the following five qualifications as cited on CF-FSP Form 5211:
 - 1. An active National Early Childhood Credential (NECC).
 - 2. Formal Educational Qualifications.
 - 3. An active Birth Through Five Childcare Credential awarded as a Floridan early learning and care Professional Credential (FCCPC); Florida Department of Education Childcare Apprenticeship Certificate (CCAC), or Early Childhood Professional Certificate (ECPC).
 - 4. An active School-Age Childcare Credential awarded as a Floridan early learning and care Professional Credential (FCCPC) or School-Age Professional Certificate (SAPC). Graduates who successfully complete a school-age training program offered by a branch of the U.S. Military will be recognized as having met the School-Age FCCPC requirement. A School-Age FCCPC will not be accepted to meet the minimum staff credential requirements for Voluntary Pre-Kindergarten (VPK).
 - 5. Employment History Recognition Exemption. An Employment History Recognition Exemption shall not be accepted to meet the minimum staff credential requirements for Voluntary Pre-Kindergarten (VPK) or towards a Director Credential. Effective July 1, 2006 DCF discontinued issuing this exemption, however individuals that received the exemption prior were not affected by this change.

4.6.1 Calculating Number of Credentialed Personnel Necessary

4.6.1.1 Early learning and care facilities with 19 or fewer children or that operate less than eight hours per week are not subject to the staff credential requirement.

4.6.1.2 For every 20 children, an early learning and care facility must have one personnel who meets the staff credential requirement. Based on this formula, facilities with 20-39 children must have one credentialed personnel, facilities with 40-59 children must have two credentialed personnel, and so on. ACSI will calculate the number of credentialed personnel required based on daily attendance. (Class 3)

4.6.1.3 Early learning and care personnel meeting the staff credential requirement must work at the facility a minimum of 20 hours per week, excluding naptime. Credentialed personnel, must be on-site during all operational hours for those facilities that operate 20 hours or less per week.

- 4.6.1.4 Volunteers who work at the facility a minimum of 20 hours per week and meet the credential requirement may be included in calculating the credential ratio.
- 4.6.1.5 Children who are five years old, and who are enrolled in and attend a kindergarten program or grades one and above are excluded from the credential ratio.
- 4.6.1.6 An individual with an inactive credential is ineligible to be counted as a credentialed personnel, until the credential is renewed or the individual meets one of the qualifications listed above.

4.6.2 Training Documentation

A copy of the Training Transcript for each credentialed personnel, must be maintained on-site at the facility, in the employee personnel file and available for review by ACSI. facilities must maintain written documentation of credentialed personnel's work schedules for a period of 12 months. Examples of written documentation are employee time sheets, personnel work schedules, and employment records. (Class 3)

4.6.3 Staff Credential Renewal

- 4.6.3.1 To maintain an active National Early Childhood Credential, it must be renewed through the agency that awarded the original credential or renewed as a Florida Birth Through Five Childcare Credential. Once renewed, for licensing purposes, individuals must complete a CF-FSP Form 5211, Floridan early learning and care Staff Credential Verification Application to have the individual's Training Transcript updated with renewed credential information. An individual with an inactive National Early Childhood Credential may submit a renewal application, but while inactive the individual shall not be counted to meet the staff credential requirement. The application will be reviewed, and if approved, a certificate will be issued with a renewal date of five years from the date the completed renewal application was processed.
- 4.6.3.2 A staff credential awarded for formal education qualifications is always active and does not need to be renewed.
- 4.6.3.3 To maintain an active Birth Through Five or School-Age Childcare Credential, every five years a candidate must complete the renewal Section of the CF-FSP Form 5211; if all criteria are met, the individual's Training Transcript will be updated with renewed credential information. Renewal applications may be submitted by the candidate no earlier than one year prior to the end of the active period of the Birth Through Five or School-Age Childcare Credential. An individual with an inactive Birth Through Five or School-Age Childcare Credential may submit a renewal application, but while inactive the individual shall not be counted to meet the staff credential requirement. The application will be reviewed, and if approved, a certificate will be issued with a renewal date of five years from the date the renewal requirements are met.
- 4.6.3.4 A staff credential awarded for Employment History Recognition Exemption is always active and does not need to be renewed.

4.7 Director Credential

ACSI requires an early learning and care facility to have a credentialed director. The Director must meet one of the following: a) an undergraduate degree in early childhood education, child development, social work, early childhood special education, nursing, program management, or other child related field OR a combination of coursework and experience that includes a minimum of four college level courses in those topics or two years experience as a lead teacher or director serving children of the age groups in care. Every applicant for a license to operate an early learning and care facility or a license for a change of ownership of an early learning and care facility must document that the facility director has an active Director Credential prior to issuance of the license.

An applicant for the Director Credential must meet the requirements referenced in CF- FSP Form 5290, Floridan early learning and care and Education Program Director Credential and Renewal Application. CF-FSP Form 5290 may be obtained from DCF's website at www.myflfamilies.com/Childcare. All applications and documentation will be verified, and, if complete, the credential will be issued by DCF or its designated representative on CF-FSP Form 5252, Floridan early learning and care and Education Program Director Credential. Each facility must have a credentialed director who is on-site a majority of operating hours, excluding weekends and evening hours that the facility is in operation. Documentation of majority of hours must be maintained and available for review by ACSI.

A. CF-FSP Form 5252, Floridan early learning and care and Education Program Director Credential, must be maintained at the facility for review by ACSI. A Director Credential, as documented on CF-FSP Form 5252, Floridan early learning and care and Education Program Director Credential, is active for five years from the date of issuance. (Class 2)

B. An individual may not be the director of facilities that overlap in the hours of operation. (Class 2)

C. An individual with an inactive Director Credential is ineligible to be the director of an early learning and care facility. (Class 2)

D. Every applicant for a license to operate an early learning and care facility or a license for a change of ownership of an early learning and care facility must document that the facility director has an active Director Credential prior to issuance of the license.

E. Early learning and care facility owners must notify ACSI within five working days when the facility loses a credentialed director or when there is a change of director or owner. The [ACSI Florida Approval Program Change of Director Form](#) an interim director is to be appointed during the provisional period, and contact information is to be sent to ACSI and DCF. (Class 3)

1. ACSI will then issue a provisional certificate for a period not to exceed six months for any facility without a credentialed director.

2. The ACSI provisional certificate will have an effective date the first day the facility is without a credentialed director.

3. The facility must appoint an interim director to manage the day-to-day operations of the program and is responsible for maintaining compliance with ACSI's Florida Approval Program Standards.

4.7.1 Director Credential Requirements for Before-School and/or After-School Sites Only

4.7.1.1 A credentialed director may supervise multiple before-school and after-school sites for a single organization as follows:

4.7.1.1.1 Three sites regardless of the number of children enrolled, or

4.7.1.1.2 More than three sites if the combined total number of children enrolled at the sites does not exceed 350. In calculating the total number of children enrolled, the number of children in the before-school and after-school program shall be calculated and viewed as separate programs.

4.7.1.1.3 In counties where the public school district has included four-year old children in public before-school and after-school programs, the school district may participate in the multi-site supervision option. Public school districts which serve four-year-old children in the before-school and after-school programs are required to have a credentialed personnel pursuant to the credentialing requirements to accommodate the four-year-old children.

4.7.1.2 When a credentialed director is supervising multiple sites, the individual left in charge of the site during the director's absence must meet the following requirements:

4.7.1.2.1 Be at least 21 years of age.

4.7.1.2.2 Have completed the approved 40 clock-hour Introductory Childcare Training approved by DCF and

4.7.1.2.3 Have completed DCF's Part II specialized training course, Special Needs Appropriate Practices, or completed a minimum of eight hours of in-service training in serving children with disabilities or

4.7.1.2.4 Have completed DCF's 10-hour School-Age-Appropriate Practices specialized training module or the 5-hour Understanding Developmentally Appropriate Practices course and the 5-hour School-Age-Appropriate Practices course.

4.7.2 Director Credential Renewal

4.7.2.1 To maintain an active Director Credential at either level, candidates must complete the renewal section of the CF-FSP Form 5290, Floridan early learning and care and Education Program Director Credential and Renewal Application, which may be obtained from DCF's website at www.myflfamilies.com/Childcare.

4.7.2.2 A Director Credential renewal, as documented on DCF's training transcript is active for five years from the date of issuance. The completed renewal application, including all required documentation, may be submitted to DCF for review and issuance of a Floridan early learning and care and Education Program Director Credential no earlier than one year prior to the end of the active period of the Director Credential. The Director Credential renewal date is determined by the end date of the active period.

4.7.2.3 If a renewal application is received after the end of the active period for the Director Credential, the Floridan early learning and care and Education Program Director Credential and Renewal Application will be reviewed and, if approved, a certificate will be issued with a renewal date of five years from the date the completed renewal application was processed.

5 Background Screening

5.1 Initial Screening

A screening must be conducted as a condition of employment. The employer/owner/operator must review each employment application to assess the relevancy of any issue uncovered by the complete background screening, including arrest, pending criminal charge, or conviction, and must use this information in employment decisions in accordance with state laws.

A. Level 2 screening is required for all personnel and includes a criminal records check (both national and statewide), a sexual predator and sexual offender registry search, and child abuse and neglect history of any state in which an individual resided during the preceding 5 years. All fingerprints must be submitted and processed through the Background Screening Clearinghouse and therefore a Live Scan vendor that is Clearinghouse compatible must be used for submission of fingerprints. (Class 2)

B. The fingerprint results from the Federal Bureau of Investigation will be returned to DCF via the Florida Department of Law Enforcement. DCF will review both the federal and state criminal history results, along with state criminal records, national sex offender registry, Florida sex offender registry, and the Florida child abuse and neglect registry.

C. DCF will issue an eligible or non-eligible result through the Clearinghouse upon completion of searches and results from other states, if applicable.

D. The employer/owner/operator must conduct employment history checks, including documented attempts to contact each employer that employed the individual within the preceding five years, and documentation of the findings. Documentation must include the applicant's job title and description of his/her regular duties, confirmation of employment dates, and level of job performance. The employer/owner/operator must make at least three attempts to obtain employment history information. Failed attempts to obtain employment history must be documented in the personnel file and include date, time, and the reason the information was not obtained. (Class 3)

E. **Beginning February 1, 2023, the DCF Background Screening Program will complete requests for all out-of-state criminal records for non-participating National Fingerprint File (NFF) states identified for applicants in the Background Screening Clearinghouse. Childcare providers will no longer need to request out of state criminal records for non-participating NFF states.**

If the individual meets the preliminary review, the profile in the Clearinghouse will be changed to "Screening in Process" and notification will be emailed to the Provider advising that the individual can be provisionally hired for 45 days while awaiting out-of-state criminal history results. During this time, the individual must work under the supervision of a fully screened personnel, and must never be left alone with the children.

1. Out-of-state criminal records received within the 45 days: The Background Screening Program will review the records and the eligibility determination will be completed in the Clearinghouse as either "Eligible" or "Not Eligible" based on information received. The provider will be issued an email notification regarding the

eligibility status change. If "Eligible" the provider will update the Clearinghouse roster to reflect the employee is no longer in provisional status and is in permanent hire status. If "Not Eligible" the provider will update the Clearinghouse roster to reflect the employee's end date, and the employee must be terminated immediately.

2. Out-of-state criminal records still pending for 46 days or more: If results are still pending at day 45, the Background Screening Program will determine the individual "Eligible" in the Clearinghouse. The provider will be issued an automated email notification regarding the eligibility status change if the individual is on the provider roster. At that point, the individual may be fully employed and can work unsupervised with the children. The provider will update the Clearinghouse roster to reflect the employee is no longer in provisional status and is in permanent hire status.

Subsequently, if out-of-state criminal records are received later, and include any disqualifying offenses, the individual's screening status will change to "Not Eligible," the provider and the employee will be notified, and the employee must be terminated immediately.

F. The employer/owner/operator must send a request for a search of each state's child abuse and neglect registry if the individual has lived outside the state of Florida in the preceding five years. Visit www.myflfamilies.com/backgroundscreening, click on the National Records Request link to obtain the instructions and forms to complete to submit a request for a search. Documentation of the date the search was requested, and the date the results were received, must be maintained in the employee's file for review by ACSI. (Class 3)

G. The employer/owner/operator must conduct a search of the sexual offender/predator registry of any state the individual has lived in outside the state of Florida in the preceding five years. Visit www.myflfamilies.com/backgroundscreening, click on the National Records Request link to obtain the instructions and forms to complete to submit the request for a search. Documentation of the search date, and findings from each state, must be documented in the employee's file for review by ACSI.

H. The employer/owner/operator must maintain on-site at the program copies/ documentation of completion of all applicable elements in the screening process for an individual in the personnel file for review by the licensing authority. (Class 2)

I. An individual may be hired under one of these circumstances:

1. If all components are complete with an eligible screening and documented in the employee's file.

2. 'Provisional hire' status upon notification email from DCF allowing the individual to be hired for a 45-day period while out of state records are being requested and awaiting clearance. During those 45 days the individual must be under the supervision of screened and trained personnel when in contact with the children. (Class 3)

3. Screening requests have been initiated, but before results have been received, the individual may be hired for training and orientation purposes. Until screening is complete showing good moral character, the employee may not be in contact with the children as specified in this statute.

J. The employer/owner/operator must initiate the screening through the Clearinghouse prior to fingerprinting. Failure to initiate the screening may result in an invalid screening and the individual will have to be re-fingerprinted and pay the fees again.

K. The employer/owner/operator must add personnel to their Employee/ Contractor Roster in the Clearinghouse within 10 days of when the individual has received an early learning and care eligible result and has been hired at the facility. Employer/owner/operator must add an end date for individuals on the Employee/Contractor Roster in the Clearinghouse within 10 days of employment termination. (Class 3)

L. The employer/owner/operator will receive an email notification if any employee on the Employee/Contractor Roster is arrested for a disqualifying offense. The employer/ owner/operator is required to take appropriate action if an employee becomes disqualified from employment. (Class 1)

M. If the facility is located in or adjacent to the home of the operator, then background screening documentation must be maintained for all household members. Household members aged 12 to 17 years must complete a Juvenile Records Check with FDLE. (Class 2)

5.2 Re-Screening

A screening conducted under this rule is valid for five years, at which time a re-screen must be conducted in the same manner as the initial screening.

A. The five-year re-screen is required for all personnel.

B. The five-year re-screen must include, at a minimum, a criminal records check (both national and statewide), a sexual predator and sexual offender registry search, and child abuse and neglect history of any state in which an individual resided during the preceding 5 years.

C. Early learning and care personnel must be re-screened following a break in employment in the industry that exceeds 90 days. Early learning and care personnel/individual with a break in service that exceeds 90 days are considered unscreened personnel/individuals until completion of re-screening. These personnel/individuals shall not have unsupervised contact with children in care. (Class 2)

D. All screening and rescreening must be processed using the Background Screening Clearinghouse. Go to: <https://www.myflfamilies.com/services/background-screening>

E. If Early learning and care personnel take a leave of absence, such as maternity leave, extended sick leave, migrant programs, etc. re-screening is not required unless the five-year re-screen comes due during the leave of absence.

6 Health Requirements

There are three common modes of transmission for the spread of microorganisms in early learning and care settings: contact, droplet, and airborne. Many common infections encountered in the setting are transmitted by direct or indirect contact. Early learning and care facilities shall develop a written exposure plan regarding universal safety precautions, recommended by the Centers for Disease Control and Prevention (CDC), to follow in the event there is exposure to blood and potentially infectious fluids. Personnel are required to be educated on the facility's exposure plan regarding standard precautions before beginning to work and annually thereafter. Written documentation that early learning and care personnel have participated in the facility's annual refresher education for the exposure plan and understand the proper procedures in the event there is exposure to blood and potentially infectious fluids must be retained for 12 months and be available for ACSI to review.

6.1 Communicable Disease Control

A. Children in care must be observed daily for signs of communicable disease. (Class 3)

B. Any child, early learning and care personnel, or other person in the facility suspected of having a communicable disease must be removed from the program or placed in an isolation area until removed. Such person may not return without medical authorization, or until the signs and symptoms of the disease are no longer present. If the local health department official or primary health care provider suspects that a child or personnel are contributing to the transmission of the illness, are not adequately immunized when there is an outbreak of a vaccine-preventable disease, or the

circulating pathogen poses an increased risk to the individual. The child or personnel must not return until the health department or primary health care provider determines the risk of transmission is no longer present. Early learning and care personnel who work in the food preparation area may not return until the signs and symptoms of the disease have not been present for 48 hours. (Class 3)

C. A child's condition must be reported to the custodial parent or legal guardian. For children whose symptoms do not require exclusion, verbal or written notification to the parent/guardian at the end of the day is acceptable. (Class 2)

D. Signs and symptoms of suspected communicable disease include:

1. Severe coughing, causing a child to become red or blue in the face or to make a whooping sound.
2. Difficult or rapid breathing.
3. Stiff neck.
4. Diarrhea (more than one abnormally loose stool within a 24-hour period);
5. Temperature of 101 degrees Fahrenheit or higher in conjunction with any other signs of illness (Any infant younger than 2 months of age with fever should get immediate medical attention);
6. Pink eye.
7. Exposed, open skin lesions.
8. Unusually dark urine and/or gray or white stool.
9. Yellowish skin or eyes; or
10. Any other communicable disease symptoms.

E. A child identified as having head lice must not be permitted to return until the following day, and then only if treatment has occurred and been verified. Verification of treatment may include a product box, box top, empty bottle, or signed statement by a parent that treatment has occurred. The facility must treat areas, equipment, toys, and furnishings with which the child has been in contact. (Class 3)

6.1.1 Isolation Area

6.1.1.1 Each facility must have a designated isolation area for a child who becomes ill while in care. (Class 3)

6.1.1.2 Such space must be adequately ventilated, cooled, heated, and equipped with a bed, mat, or cot, and materials that can be cleaned and sanitized or disinfected easily. (Class 3)

6.1.1.3 Linens are to be changed after each use and used linens must be kept in a closed container in the isolation area until cleaned. (Class 3)

6.1.1.4 Disposable items must be kept in a closed container in the isolation area until thrown away. (Class 3)

6.1.1.5 The isolated child must be always within sight and hearing of personnel. The child must be carefully observed at all times for worsening conditions. (Class 2)

6.1.2 Outbreaks

6.1.2.1 Operators are required to notify the local county health department immediately upon any suspected outbreak of communicable disease and must follow the health department's direction. (Class 2)

6.1.2.2 A suspected outbreak occurs when two or more children or early learning and care personnel have the onset of similar signs or symptoms within a 72-hour period or when a case of a serious or reportable communicable disease is diagnosed or

suspected in a child or employee. Some examples include shigella, salmonella, chicken pox, measles, pertussis, and hand, foot, and mouth disease. Contact your local health department for a determination of whether reporting is required. (Class 2)

6.2 First Aid Kit Minimum Requirements

A. At least one first aid kit must be maintained on the premises at all times. The kit(s) must be always accessible to the personnel and kept out of the reach of children. If the first aid kit is stored in the food preparation area, it must be stored in a manner to prevent contamination of food, food contact surfaces, or first aid supplies. First aid kits or supplies must be restocked after each use. (Class 2)

B. A first aid kit must be accessible and available to early learning and care personnel when children are participating on field trips, during transporting, and other activities away from the facility. (Class 2)

C. Each kit must be kept in a closed container and labeled "First Aid" and must, at a minimum, include: (Class 3)

1. Soap and hand sanitizer (to be used with supervision if hands are not visibly soiled and if no water is present),
2. Adhesive bandages,
3. Disposable, non-porous gloves,
4. Cotton balls or applicators,
5. Sterile gauze pads or rolls,
6. Adhesive tape,
7. Digital thermometer,
8. Tweezers,
9. Pre-moistened wipes,
10. Scissors,
11. Bottled water (for cleaning wounds or eyes), and
12. A current resource guide on first aid and CPR procedures.

6.3 Emergency Telephone Numbers

A. Emergency service telephone numbers must be posted on or near all telephones, including 911, ambulance, fire, police, poison control center, Florida Abuse Hotline, and the county public health department. Additionally, the address and directions to the facility must be posted with descriptions of major intersections and local landmarks. (Class 3)

B. For life threatening injuries, the provider shall call 911 and then notify the parent. (Class 2)

C. Custodial parents or legal guardians must be notified immediately if the event of any serious illness, accident, injury or emergency to their child, and their specific instructions regarding action to be taken under such circumstances must be obtained and followed. (Class 2)

D. If the custodial parent or legal guardian cannot be reached, the facility owner or director will contact those persons designated by the custodial parent or legal guardian to be contacted under those circumstances and must follow any written instructions provided by the custodial parent or legal guardian on the enrollment form.

6.4 Accident/Incident Notification

A. All accidents and incidents or unusual occurrences that are threatening to the health,

safety, or welfare of a child that occur while the child is in care must be documented on the same day they occur. Special circumstances pick up are addressed at the end of the day. (Class 3)

B. This documentation must be shared with the custodial parent or legal guardian on the date of occurrence. (Class 3)

C. Documentation must include the name of the affected party, date and time of the occurrence, description of the occurrence, actions taken and by whom, and appropriate signatures of program early learning and care personnel and the custodial parent or legal guardian. Program personnel signatures may include the director/personnel that witnessed the incident, who were involved in the incident, and/or responded to the child's needs. (Class 3)

D. The documentation must be maintained for 12 months. If the parent or legal guardian does not pick up the child on the date of occurrence of the accident or incident, the individual authorized to pick up the child must sign and be provided a copy of the accident/incident form. (Class 3)

E. In the event of serious injury or death, the incident must immediately be reported to the ACSI office. The Florida Approval Program Incident/Complaint form is to be completed and submitted via email to early_education@acsi.org. (Class 2)

6.5 Medication

Early learning and care programs are not required to give medication; however, if a program chooses to do so, it must comply with the following requirements:

A. The program must have written authorization from the custodial parent or legal guardian to give prescription and non-prescription medications. This authorization must be dated and signed by the custodial parent or legal guardian and contain the child's name; the name of the medication to be given; and date, time, and amount of the correct dosage to be given. Prescription and non-prescription medications that are used on an "as needed" basis require the parent/ legal guardian to provide additional documentation on the authorization form to describe symptoms that would require the medication to be given. The early learning and care personnel must never administer a medication that is prescribed for one child to another child. (Class 2)

B. Any known allergies to medication or special restrictions must also be documented, maintained in the child's file, shared with personnel, and posted with the child's stored medication. (Class 2)

C. Prescription and non-prescription medication brought to the facility by the custodial parent or legal guardian must be in the original container. Prescription medication must have a label stating the name and contact information of the physician and/or child's name, name of the medication, and medication directions. All prescription and non-prescription medication must be dispensed according to written directions on the prescription label or printed manufacturer's label and maintained at the appropriate temperature. (Class 3)

D. In the event of an emergency, non-prescription medication that is not brought in by the parent or legal guardian can be dispensed only if the program has written permission from the parent or legal guardian to do so. (Class 2)

E. Any medication given under these conditions must be documented in the child's file, and the custodial parent or legal guardian must be notified on the day of occurrence. (Class 3)

F. The facility must maintain a record for each child receiving any medications that documents the full name of the child, the name of the medication, the date and time the medication was given, the amount and dosage, and the name and signature of the person who gave the medication. This record must be initialed or signed by the program personnel who gave the medication. The record must be maintained for a

minimum of 12 months after the last day the child received the dosage. (Class 3)

G. All medication must have child resistant caps, if applicable, and must either be stored in a locked area or must be out of any child's reach. If medication is stored in the food preparation area, it must be stored in a manner to prevent contamination of food, food contact surfaces, or medication. (Class 2)

H. Medication that has expired or that is no longer being dispensed must be returned to the custodial parent or legal guardian or discarded. (Class 3)

I. Prior to administering medication to children, early learning and care personnel responsible for administering medication must be educated on proper administration procedures. Written documentation must be maintained in the personnel file that personnel administering medication have been educated on proper administration procedures. (Class 3)

J. Early learning and care personnel must ensure sun safety for themselves and children under their supervision. It is recommended that infants younger than six months of age are kept out of direct sunlight, limiting sun exposure when ultraviolet rays are strongest. Sunscreen may only be utilized with written permission from parents/guardians. Manufacturer instructions must be followed. (Class 2)

K. Use of diaper creams and insect repellant may only be utilized with written permission from parents/guardians. Manufacturer instructions must be followed. (Class 2)

L. Sunscreen, diaper cream, and insect repellant do not need to be documented on the medication log unless prescribed by a physician.

7 Record Keeping

7.1 Personnel Records

A. Position and date of hire (Class 3)

B. Employment Application (Class 3)

C. Signed ACSI statement of faith (Class 3)

D. Personnel File Requirement Form (Class 3)

E. Background Screening Documents (Class 2)

1. A copy of the eligible results, for the Level 2 screening, generated from the Clearinghouse must be on record for each personnel. If awaiting Out-of-State criminal history results, a copy of the DCF email informing of the individual's eligibility for a provisional hire status must be in the personnel file.

2. A copy of the DCF letter/email informing of search conducted of the Florida's child abuse and neglect registry must be on record for each personnel screened between July 1st and December 15th of 2016.

3. A copy of each request made to out of state child abuse and neglect registries for individuals who lived outside the state of Florida in the preceding five years.

4. A copy of each search conducted for out of state sexual offender/predator registries for individuals who lived outside the state of Florida in the preceding five years.

5. A copy of the Juvenile Records Check with FDLE for any household members aged 12 to 17 years if facility is located in or adjacent to home of the operator.

F. Signed statement of receipt of employee policy & procedures (Class 3)

G. Employment reference verifications (Class 3)

H. [Attestation of Good Moral Character](#)(CF-FSP 1649A, July, 2024) (Class 3)

I. Signed [Child Abuse and Neglect Mandated Reporter](#) (CF-FSP 5337, May 2017, annually) (Class 3)

J. Current CPR/1st Aid certification documentation (Class 3)

K. Blood Borne Pathogens Training Documentation (within one year of hire, annually)

- L. Fire Extinguisher training documentation (within 30 days of hire) (Class 3)
- M. DCF's Training Transcript for each personnel as documentation of completion of introductory training, early literacy training (if applicable), school-age training (if applicable), safe sleep training (if applicable), and transportation training (if applicable). (Class 3)
- N. In-service documentation (10 hours annually; with 2 years of records on file) (Class 3)
- O. Current ACSI Staffing Form (Class 3)
- P. Annual observations/evaluations
- Q. Additional local licensing requirements per county, if applicable.
- R. For the driver only: Florida driver's license and driver physical examination documentation. A copy of the driver's license and the physician certification, or another form containing the same elements of the physician certification, granting medical approval to operate the vehicle, and valid certificate(s) of course completion for first aid training, pediatric cardiopulmonary resuscitation (CPR) procedures, and background screening must also be maintained in the driver's personnel file. (Class 2)
- S. Prior to beginning volunteering in an early learning and care facility, a [Volunteer Acknowledgment](http://www.myflfamilies.com/Childcare) from DCF's website www.myflfamilies.com/Childcare must be completed and on file at the facility for the volunteer. Written documentation of volunteer hours must be maintained at the facility for a minimum of 12 months and available for review by ACSI. (Class 3)
- T. Documentation of Emergency Care Plan training and medication administration training, if applicable. (Class 3)
- U. Documentation of training on water safety devices (a ring buoy and rope, a rescue tube, or a throwing line and a shepherd's hook), if applicable. (Class 3)
- V. Documentation of credentialed personnel's work schedules for a period of 12 months. (Class 3)
- W. Documentation of the director working the majority of hours on-site at the facility. (Class 3)

7.2 Student Records

- A. Enrollment information (Class 3)
 - 1. Enrollment information shall be kept on file, current and available for review by ACSI.
 - 2. The enrollment information shall include, in writing, permission for the facility to release the child to any person(s) authorized or in the manner authorized by the custodial parent or legal guardians. The name, address, and phone number of authorized persons must be in the enrollment information.
 - 3. There shall be signed statements from the custodial parents or legal guardian that the facility has provided them with the following information:
 - a. The facility's written policies and procedures including disciplinary and expulsion policies
 - b. The facility's food and nutrition policies include language on food safety and food allergens.
 Students with special health care needs require a care plan which is updated by a pediatrician every ninety days.
 - c. Annually, during the months of August or September, the facility must provide parents/guardians of children enrolled in the facility with information detailing the causes, symptoms, and transmission of the influenza virus. (DCF brochure, CF/PI 175-70, Influenza Virus, Guide to Parents)
 - d. Annually, in the months of April and September, the facility must provide parents/guardian of the children enrolled in the facility with information regarding the potential for distracted adults to fail to drop off a child at the facility and instead kept them in the adult's vehicle upon arrival at the adult's destination.
 - e. Enrollment information shall include parental/guardian consent for personnel to have access to child's records.
- B. Birth Certificate (Class 3)
- C. Name, address, and telephone number of child's physician (Class 3)
- D. Parent/Legal Guardian name and contact information (Class 3)
- E. Physical or mental conditions (Class 3)
- F. Health Form 3040 (obtain within 30 days of enrollment, current if within two years of exam) (Class 3)

- G. Current Florida Certificate Immunization Form 680 or Religious Exempt Form (obtain within 30 days of enrollment) (Class 3)
- H. Any child who has or is at an increased risk for a chronic physical, developmental, behavioral, or emotional condition and requires additional services must have a current Emergency Care Plan, prepared by the parent/guardian or physician, included in the child's file and readily accessible for those caring for the child. Documentation of emergency care plans, if applicable, must be maintained as long as the child is in care. Accident/incident report forms are required including description of incident, care provided, supervisor or director, and parent signatures. Documentation of accident/incidents must be maintained for 12 months from the date of accident/incident. (Class 3)
- I. A child from birth to the age of school entry, who is under court-ordered protective supervision or in out-of-home care and is enrolled in an early education or program must attend the program 5 days a week unless the court grants an exemption. See Rilya Wilson Act Flyer Addendum 2. (Class 3)
- J. School-age children are required to have current immunization records on file at the center. (Class 3)
- K. Any child requiring a special diet shall have a copy of a physician's order, a copy of the diet, and a sample meal plan for the special diet as documentation in the child's files for as long as the child is in care. (Class 3)
- L. Written permission from parent/guardian authorizing early learning and care personnel to administer medication, diaper cream, sunscreen, or insect repellent, if applicable. Record for each child receiving medication must be maintained for a minimum of 12 months. (Class 2)
- M. Documentation of known food allergies must be maintained for as long as the child remains in care. (Class 2)

7.3 Health and Safety

- A. Written records of fire drills must be maintained for a minimum of 12 months. (Class 3)
- B. Posted emergency telephone numbers, the facility address, and directions to the facility. (Class 3)
- C. Documentation of emergency preparedness plan drills must be maintained for a minimum of 12 months from each drill. (Class 3)
- D. Daily meal and snack menus, including meal substitutions, must be maintained for a minimum of 12 months. (Class 3)
- E. Food Acceptance Log must be maintained for a minimum of 12 months. (Class 3)
- F. Copy of license or permit for caterers. (Class 3)
- G. Daily indoor inspection log must be maintained for a minimum of 12 months. (Class 3)
- H. Documentation of monthly playground equipment inspections must be maintained for a minimum of 12 months. (Class 3)
- I. Documentation of unitary surface materials tested to and complying with ASTM F1292, if applicable. (Class 3)
- J. Documentation of insurance for vehicles used by the facility to transport children in care.

(Class 2)

K. Current vaccination records for any animals at the facility, if applicable. (Class 2)

7.4 Policies and Procedures

A. Transportation logs must be retained for a minimum of 12 months. (Class 3)

B. Documentation of parental permission for field trips & food activities/special occasions must be retained for 12 months. (Class 3)

C. Daily attendance of children records must be maintained for a minimum of 12 months. (Class 3)

D. Any child requiring an alternate sleep position shall have documentation of a physician's authorization for an alternate napping/sleeping position and/or swaddling must be maintained in child's file for as long as the child is in care. (Class 3)

E. Written policy and procedures to identify and prevent shaken baby syndrome and abusive head trauma, if applicable. (Class 3)

F. Written plan for reporting and managing an incident or unusual occurrence that is threatening to the health, safety, or welfare of the children or personnel. (Class 3)

G. A written emergency preparedness plan that includes procedures to be taken by the facility during fire, evacuation, relocation, shelter in place, lockdown, and inclement weather; facilitating parent/guardian reunification onsite and offsite; notifying and updating parents/guardians; and meeting the needs of children during and following an emergency event. (Class 3)

H. A written plan of scheduled activities must be posted. (Class 3)

I. Written approval from the local governing body to verify compliance with building requirements. (Certificate of Occupancy) (Class 3)

7.5 Daily Attendance

Daily attendance of children must be taken and recorded accurately by the early learning and care personnel, documenting the time when each child enters and departs the program.

A. Attendance devices used for the purpose of tracking attendance may be used, but personnel must ensure the accuracy of the documented attendance. Each classroom must have an attendance sheet/class roster for the group of children occupying that space. Attendance sheet/class roster must accompany the personnel and the group of children throughout the day should they leave the classroom. (Class 3)

B. The custodial parent or guardian may document the time when his/her child enters and departs the facility or program. However, early learning and care facility personnel are responsible for ensuring that attendance records are complete and accurate. (Class 3)

C. Attendance records for Voluntary Pre-Kindergarten or School Readiness may be used, if applicable.

8 Access/Child Safety

8.1 Access

A. An early learning and care program must provide the custodial parent or legal guardian access, in person and by telephone, to the facility during the facility's normal hours of operation or during the time the child is in care. (Class 2)

B. The facility must not interfere with or prevent ACSI from accessing facility, copying records, photographing, or recording a location or activity on the premises as documentation for the inspection. (Class 1)

8.2 Child Safety

- A. Acts or omissions that meet the definition of child abuse or neglect provided in Chapter 39 or Chapter 827, Florida Statutes, constitute a violation of the ACSI ACSI FLORIDA APPROVAL PROGRAM standards and will support imposition of a sanction. (Class 1)
- B. As a mandatory reporter, all incidents of suspected child abuse must be reported immediately to the Florida Abuse Hotline Information System by: (Class 1)
 - Telephone @ 1-800-96-ABUSE (1-800-962-2873), or
 - Fax @ 1-800-914-0004, or
 - Online @ <http://www.dcf.state.fl.us/abuse/report/>
- C. All incidents of child abuse or suspected child abuse by early learning and care personnel are to be reported to ACSI within 24 hours. The [Florida Approval Program Incident/Complaint form](#) is to be completed and submitted via email to early_education@acsi.org. (Class 1)
- D. Failure to perform the duties of a mandatory reporter pursuant to Section 39.201, Florida Statute, constitutes a violation of ACSI ACSI FLORIDA APPROVAL PROGRAM Standards. (Class 1)
- E. Early learning and care personnel must appropriately interact with children to foster a healthy, safe environment that will encourage the child's physical, intellectual, motor, and social development. Interactions with children that are aggressive, demeaning or intimidating in nature are strictly prohibited. (Class 2)

8.3 Handling of Complaints or Incidents

- A. The ACSI office is to be notified within 24 hours if the program receives a complaint. The [Florida Approval Program Incident/Complaint form](#) is to be completed and submitted via email to early_education@acsi.org.
- B. The ACSI office is to be notified within 24 hours of any investigation conducted by the Florida Department of Children and Families or other legal authorities in relation to a complaint. The [Florida Approval Program Incident/Complaint form](#) is to be completed and submitted via email to early_education@acsi.org.
- C. The ACSI office is to be notified within 24 hours of any incident or emergency in which a child was injured, placed at risk or harmed.
- D. A visit to the program may take place if warranted by the inspector or ACSI staff if warranted at the program's expense.

8.4 Corrective Actions and Fines

Violations of ACSI's Florida Approval Program Standards and failure to meet INSPIRE accreditation protocols may result in corrective action including a written warning, fines, suspension and/or revocation of approval status resulting in the dismissal from the Florida Approval Program.

Technical Assistance

Technical Assistance is provided to each early learning and care program found to be noncompliant with one or more ACSI ACSI FLORIDA APPROVAL PROGRAM Standards. ACSI staff shall provide technical assistance for each standard violated by offering recommendations to the provider on how to comply with ACSI ACSI FLORIDA APPROVAL PROGRAM Standard(s). According to p. 3 of the INSPIRE EE Addendum, the INSPIRE accreditation visiting EE team member(s) will rate the *additional* and *modified* indicators, evaluate evidence, and complete a reflection for each Flourishing School culture domain where they will comment on their observations and additional evidence. A school may receive commendations or recommendations that pertain specifically to the Early Education program.

Corrective Action

Corrective Action documentation is required for all ACSI ACSI FLORIDA APPROVAL PROGRAM Standards cited for noncompliance and may include corrective action requirements, task(s) and due dates to

meet the minimum ACSI ACSI FLORIDA APPROVAL PROGRAM Standards.

Administrative Fine

An administrative fine is a disciplinary sanction based on the Classification Level of ACSI ACSI FLORIDA APPROVAL PROGRAM Standard violations.

Provisional-Status Certification

The provisional-status certificate is issued for an owner or operator to remedy a violation or violations which are beyond the control of the provider. The provisional status certification is not a disciplinary sanction and may be issued for a period not to exceed six months.

Probation-Status Certification

The probation-status certificate is issued when the license is in jeopardy of being revoked or not renewed due to violations of ACSI ACSI FLORIDA APPROVAL PROGRAM Standards. Suspend, Deny or Revoke a certificate. Suspension of a ACSI FLORIDA APPROVAL PROGRAM certificate or registration is based on the nature and severity of violation(s), repetition of the violation(s), progressive enforcement history and/or the immediate threat to the health, safety or well-being of the children in care. A suspended ACSI FLORIDA APPROVAL PROGRAM certificate or registration shall be for a fixed amount of time.

8.5 Non-Compliance and Classification of Violations

During an inspection, if an ACSI ACSI FLORIDA APPROVAL PROGRAM Standard is found to be out of compliance the ACSI Inspector will determine if the correction can be "completed at time of the inspection." If it is determined that the program will need reasonable time to correct the non-compliance(s), a due date for each violation will be determined and documented in the inspection report. The ACSI inspector may take a picture of the violation for documentation. When the violation has been corrected the director is to email ACSI at early_education@acsi.org and their inspector notification of the completion. The director may include a picture of the correction if applicable and/or documentation. A re-inspection may be conducted to ensure all noncompliance items have been brought into compliance.

There are three class violation levels and may result in fines from \$100 for Class 3 violations up to \$500 for Class 1 violations. The school will be notified within 48 hours (about 2 days) if a violation includes a fine and the follow up required.

“Class 1 Violation”- is the most serious type of non-compliance. Class 1 violations are issued for occurrences that could result, or do result, in death or serious harm to the health, safety and well-being of a child. This includes overt abuse and negligence in relation to the operation and maintenance of a facility or home. Class 1 violations could result in a center being placed on probation or revoked. In addition, a fine per occurrence will be assessed and corrective action required.

“Class 2 Violation”- is a less serious violation in nature than Class 1 violations, and could potentially pose a threat to the health, safety, or well-being of a child, although the threat is not imminent. Technical assistance, along with corrective action will be required. Failure to correct violations could result in fines, suspension of ACSI FLORIDA APPROVAL PROGRAM certification or revocation of ACSI FLORIDA APPROVAL PROGRAM certificate.

“Class 3 Violation”- is the least serious violation in nature and poses a low potential for harm to children in care. Technical assistance, along with corrective action will be required. Failure to correct violations could result in fines, suspension of certification or revocation of ACSI FLORIDA APPROVAL PROGRAM certificate.

ACSI Florida Gold Seal Addendum

Some items are not listed in the INSPIRE protocol but are regulations identified in the ACSI Florida Approval Program standards and or/manual.

Standards were developed from the National Health and Safety Performance Standards found at <https://nrckids.org/CFOC> and Model Childcare Health Policies at <https://ecels-healthychildcarepa.org/publications/manuals-pamphlets-policies/item/248-model-child-care-health-policies.html>

Gold Seal Criteria	INSPIRE Protocol	EE Addendum	ACSI FLORIDA APPROVAL PROGRAM Standards	ACSI FLORIDA APPROVAL PROGRAM Manual
Validation Process				
A1.f: 5 year renewal	X	X	x	X
Schools will need to follow accreditation renewal procedures and submit a renewal application every 5 years.				
A1.e: Revocation of accreditation	X	X	X	X
Changes in a program's accreditation status by ACSI may result from a program's failure to meet or maintain accrediting standards as evidenced by sub-paragraph d. or any other relevant information received by the accrediting association. Before a change in accreditation status is made for any of these reasons, the program will be notified in writing by ACSI and given 30 days in which to respond. Based on the program's response, the ACSI will determine appropriate action. This section involves the substantive review of program materials and responses in determining whether ACSI should change a program's accredited status and if a school is deemed to have withdrawn by its failure to meet its procedural obligations as an accredited program.				
Staff-to-Child Ratio				
B8	X	X	X	X
Schools must have a procedure in place for obtaining substitutes (e.g. working with the local Early Learning Coalition (CCRRS) and have a substitute list for each classroom. Ratios, group size, and qualifications of teacher/caregiver meet the national best practice standards. <i>CFOC3</i> Stds. 1.1, 1.2, 1.3, 1.4.4, 3.6.2.3, 3.6.2.5, 4.4, 6.5				
Staff Qualifications				
C3 and C4	X	X	ACSI FLORIDA APPROVAL PROGRAM 1.4.B	X
Staff Qualifications are aligned with the National Health and Safety Standards. Ratios, group size, and qualifications of teacher/caregiver meet the national best practice standards. <i>CFOC3</i> Stds. 1.1, 1.2, 1.3, 1.4.4, 3.6.2.3, 3.6.2.5, 4.4, 6.5 The profession of early childhood education is being informed by the research on early childhood brain development, child development practices related to child outcomes. For additional information on qualifications for early learning and care staff, refer to the Standards for Early Childhood Professional Preparation Programs from the National Association for the Education of Young Children (NAEYC). Additional information on the early childhood education profession is available from the Center for the Childcare Workforce (CCW). Schools serving children with special health care needs associated with developmental delay should employ an individual who has had a minimum of eight hours of training in inclusion of children with special health care needs. Teachers/assistant teachers must be at least 18 years of age. This voids ACSI FLORIDA APPROVAL PROGRAM standard that all teaching staff must be at least 16 years of age. Staff under the age of 18 must be closely supervised by a credentialed employee. (Class 2) Volunteers must be at least 16 years of age and be under the direct supervision and are not counted in the staff to child ratio.				
C5	X	X	X	X
Associate/assistant teachers must have a high school diploma or General (GED). Education Development certificate				
C9	X	X	X	X

A new employee is not considered permanent until and ability to work effectively with young children. The director has assessed his/her mental and physical health. New employee's permanent status depends on effectively working with young children, as well as the director's approval of their physical and mental health assessment.				
Staff Training/Continued Professional Development				
D1c, d			X	X
The pre-service orientation includes, but is not limited to: a. program policies and procedures b. health, safety, and emergency procedures c. Accepted guidance and classroom management d. Observing experienced teachers e. How teaching staff will accurately use the program's procedure for assessment of child progress and program quality				
D4	X	X	X	X
All teaching staff who supervise or mentor other staff must document completion of specialized college-level course work or professional development training and preparation in adult supervision, mentoring, and leadership. Teaching staff supervised or mentored must have completed specialized college-level courses or professional development training in adult supervision, mentoring, and leadership.				
D5 All teaching staff are encouraged to join and participate in ACSI membership. School leaders may list employees in the school's roster and/or they may seek individual membership.				
Director Qualifications				
E2b	X	X	X	X
A combination of coursework and experience that includes a minimum of four (4) college-level courses in Early Childhood Education and Child Development, Elementary Education, Early Childhood Special Education, Childcare Management; and two (2) years of experience as a lead teacher or director serving the children of the age groups in care. A minimum of four (4) college-level courses in Early Childhood Education, Child Development, Elementary Education, Early Childhood Special Education, and Childcare Management, along with two (2) years of experience as a lead teacher or director, is required for this position.				
Curriculum/Teaching Materials				
F6-F7	X	X	X	X
The program demonstrates sufficient materials and equipment that are rich in variety to sustain curriculum plans. Materials and equipment are available in sufficient quantities to occupy each child that meets his or her interests; is used facilitate focused individual and peer play/learning; and reflect and respect society's diversity and the cultures of the families being served. The tools and materials utilized encourage focused play and learning among peers and individuals.				
F9-F10	X	X	X	X
Staff rotate and adapt materials on a reasonable basis to promote learning and extend children's play opportunities. To encourage learning and increase the possibilities for children to play, staff members rotate and alter resources on an appropriate basis. Staff rotate and adapt materials on a reasonable basis to promote learning and extend children's play opportunities.				
F11a, b, c, d	X	X	X	X

All children are provided materials to experience varied opportunities of the key principles of the following: a. Art, music, dramatic play, and dance in ways that reflect cultural diversity. b. The principles of math, such as building understanding of numbers; number names; the relationship of numbers to object quantities and to symbols; using numerical symbols; and to explore operations on quantities, such as adding, subtraction, and dividing into equal and unequal subsets. c. Science d. The physical characteristics of their local environment, and how people positively and negatively affect their environment. The diversity of cultures is reflected in the resources offered to children for their exploration of the fundamentals of music and movement, art, and dramatic play. They gain a comprehension of basic mathematical concepts, such as how to interpret numbers, number names, and numerical symbols. Operations like addition, subtraction, and dividing are also taught. Physical aspects of the environment and how humans impact it are topics covered in science instruction.				
Daily Schedule				
F12e, h, i	X	X	X	X
The program's daily schedule provides a balance of activities in consideration of the child's total daily experience. This includes: e. Daily group activities h. Activity that provides choices i. Activity that allows for spontaneity. The program's daily schedule balances activities for a child's total experience, including group activities, choices, and spontaneity activities.				
Lesson Plans and Implementation				
F13b, c, d, e	X	X	X	X
Teachers use: b. Children's interest in and curiosity about the world to engage them with new content and developmental skills, including self-help activities that promote competency and mastery. c. Their knowledge of individual children to modify strategies and materials to enhance children's learning. d. The child's routine to include tasks for which the children take responsibility, according to their ability to give children a sense of self-reliance. e. Environmental design/modifications, schedules and activity modifications, adult or peer support, effective transitions, engaging activities, and other teaching strategies to prevent challenging or disruptive behaviors and support the child's appropriate behavior.				
F14a-i	X	X	X	X

Teachers demonstrate and use their knowledge of content and developmental areas, and of children's social relationships, interests, ideas, and skills in their lesson plans by: a. Creating experiences that engage children in purposeful and meaningful learning related to key curriculum concepts. b. Posing problems and asking questions that stimulate children's thinking. c. Guiding children in acquiring specific skills and explicitly teaching those skills to promote children's engagement and learning. d. Helping children express their ideas and build on the meaning of their experiences. e. Helping children identify and use prior knowledge, and providing experiences that extend and challenge children's current understandings. f. Having and using a variety of teaching strategies that include a broad range of approaches and responses. g. Tailoring learning opportunities for groups and individuals. h. Incorporating indoor and outdoor activities. i. Planning for children to revisit experiences and materials over periods of days, weeks, and months, and adjusting challenges as children gain competence and understanding, learn and acquire new skills.				
F15	X	X	X	X
Teachers' lesson plans are reviewed weekly by the director and/or administration. The director and/or administration assess teachers' lesson plans on a weekly basis.				
Inclusion				
* F17	X	X	X	X
When children with special needs enroll, each child has an individual program plan; each child is professionally evaluated; the program has access to a referral system; and reviews of each child's progress are done using a team concept. Enrolling children with special needs involves an individual program plan, professional evaluation, referral system, and team-based progress reviews. Center policies must address specific procedures (individual program plan) for serving children with disabilities (e.g., medical conditions, learning, and behavioral disabilities).				
Child Assessment				
F18a-e	X	X	X	X
Teachers use multiple sources to informally and formally assess each child development for future learning opportunities. The ongoing assessment process should be used to: a) identify what children have learned, b) identify any possible learning hindrances and disabilities, c) adapt curriculum and teaching to meet children's needs and interest, d) foster each child's curiosity and extend child's engagement, and support self-initiated learning, and e) communicate each child's progress to parents, including both in and out of teacher/parent conferences.				
Learning Environment				
G2	X	X	X	X
Each room provides separate learning "areas" that offer a variety of experiences and learning opportunities. Space may be arranged so children can work individually, in small groups, or in a large group. Classroom areas are set up so that traffic patterns do not interfere with activities. The program has taken measures in all rooms occupied by children to control noise levels so normal conversation can be heard without raising one's voice. Each room offers a minimum of six distinct learning areas, allowing children to work individually, in small groups, or in large groups. Classrooms are designed to prevent traffic interference and noise levels are controlled to ensure normal conversation is heard without raising one's voice.				
G3	X	X	X	X

Soft furniture, cushions, carpets, and other comforting items are used to make classroom spaces more inviting. To encourage children to utilize the materials, staff arranges and places them on low, open shelves.				
G5	X	X	X	X
Teachers create classroom displays of children's recent work that help children reflect on and extend their learning. Displays are at children's eye level. To encourage students to reflect on and expand their learning, teachers construct displays of the most current work in the classroom and present them at the children's eye level.				
G8b, c	X	X	X	X
Outdoor play areas are designed with equipment that is age and developmentally appropriate, and located in clearly defined spaces with semi-private areas where children can play alone or in small groups. Outdoor play areas will accommodate or facilitate: a. Motor experiences such as running, climbing, balancing, riding, jumping, crawling, scooting, or swinging. b. Activities such as dramatic play, block building, manipulative play, or art activities. c. Exploration of the natural environment, including a variety of natural and manufactured surfaces, and areas with natural materials such as nonpoisonous plants, shrubs, and trees.				
Social Development				
H1	X	X	X	X
Children have varied opportunities to recognize and name their own and others' feelings, and are given varied opportunities to learn the skills needed to regulate their emotions, behavior, and attention. Children have varied opportunities to learn to understand, empathize with, and take into account other people's perspectives.				
H2	X	X	X	X
Children have varied opportunities to develop skills for entering into social groups by interacting positively, respectfully, and cooperatively with others; developing friendships; learning to help and learning from and with one another; resolving conflicts in constructive ways and other pro-social behavior. Children develop social group skills through positive interactions, friendships, learning to help, and constructive conflict resolution. They also learn from one another and promote pro-social behavior.				
H3	X	X	X	X
Children are provided opportunities and materials to foster positive identity and an emerging sense of self and others by learning about the community in which they live, and engaging in discussions about fairness, friendship, responsibility, authority, and differences. Children develop positive identity through learning about their community and engaging in discussions about fairness, friendship, responsibility, authority, and differences, fostering a sense of self and others.				
H5	X	X	X	X
Children have opportunities to engage in classroom experiences with members of their families. Children have opportunities to interact with their family in the classroom.				
Literacy Support				
I1	X	X	X	X
Children's language development is promoted through songs, stories, books and games. Children have varied opportunities to be read to regularly in individualized ways including one-to-one or in small groups (2-6 children). Children's language development is encouraged regularly via songs, stories, books, and activities, with customized reading opportunities in one-on-one or small groups.				
I2	X	X	X	X

Children have varied opportunities to develop competence in verbal and nonverbal communication by responding to questions; communicating needs, thoughts, and experiences; and describing things and events. Children may communicate their wants, feelings, and experiences, as well as describe objects and events, in a variety of ways that give them opportunity to improve their verbal and nonverbal communication skills.				
I3	X	X	X	X
Children have multiple and varied opportunities to write, to develop phonological awareness, and to understand spoken language by the utilization of pictures, familiar objects, body language, and physical cues. Through the use of pictures, familiar objects, body language, and physical clues, children are given numerous and diverse chances to write, develop phonological awareness, and comprehend spoken language.				
Indoor Environment				
J2b	X	X	X	X
b. Hand-washing sinks within arm's length of diaper-changing tables within reach of diaper-changing tables are hand-washing sinks				
J2f	X	X	ACSI FLORIDA APPROVAL PROGRAM Standard 3.6.2.C	X
f. A solid barrier or at least three (3)-foot spacing that separates sleeping children from one another. ACSI FLORIDA APPROVAL PROGRAM Standard C: A minimum of 18 inches must be maintained around individual napping and sleeping spaces. A maximum of two sides of a napping or sleeping space may be against a solid barrier, such as the wall. Children who are sleeping should be separated from one another by a sturdy barrier or at least three (3) feet of space.				
J5	X	X	X	X
Cleaning materials, detergents, aerosol cans, health and beauty aids, and other toxic materials are stored in their original labeled containers and used according to the manufacturer's instructions and purpose. All art and craft materials used in the program are non-toxic. No paint containing lead in excess of 0.06% is used in areas accessible to children. The program follows manufacturer recommendations for storing cleaning supplies, detergents, aerosol cans, and other dangerous items in labeled containers. Art and craft supplies are non-toxic, and lead-based paint is not utilized in child-accessible areas.				
Outdoor Environment				
J10	X	X	ACSI FLORIDA APPROVAL PROGRAM Standard 3.4.4.A	X
At least 75 square feet of outside play space is provided for each child playing outside at any one time. The total amount of required play space is based on a maximum of one-third of the total center enrollment being outside at one time. This voids the ACSI FLORIDA APPROVAL PROGRAM standards that allows only 45 square feet. Each child receives 75 square feet of outdoor play space, with a maximum of one-third of the center's enrollment being outside at one time.				
J14	X	X	ACSI FLORIDA APPROVAL PROGRAM Standard 2.6.E	X
Program staff protect children and adults from exposure to high levels of air pollution from smog or heavy traffic by limiting outdoor and physical activity as a precaution during smog or other air pollution alerts. During smog or other air pollution alerts, program personnel limit outdoor and physical activity as a precaution to prevent children and adults from being exposed to excessive levels of air pollution from smog or heavy traffic.				

J19a	X	X	X	X
The program maintains facilities, so they are free from harmful animals, insect pests, and poisonous plants: a. Poisonous or potentially harmful plants are not in areas accessible to children. The program warrants facilities are free from harmful animals, pests, and poisonous plants, ensuring child-accessible areas are free of such hazards.				
J21	X	X	X	X
To protect against cold, heat, sun injury, and insect-borne disease, parents are required to provide their children with at least one change of clothing suitable for daily outdoor play. Parents/guardians provide at least one change of clothes for their child, that is appropriate for everyday outside play in order to protect them from the cold, heat, sun damage, and sickness spread by insects.				
Personal Hygiene and Best Practices				
J24	X	X	X	X
Toilets, drinking water facilities, and hand-washing facilities are within 40 feet of the indoor areas that children use. The hand-washing sinks are accessible to staff and children (step stools are available if needed). Toilets, drinking water, and hand-washing facilities are accessible within 40 feet of children's use areas, with hand-washing sinks accessible for staff and children.				
J26	X	X	X	X
Sinks used for food preparation may not be used for handwashing or any other purpose. No other activities, including handwashing, are permitted in sinks used for food preparation.				
Nutrition and Food Safety				
J28d, e	X	X	X	X
The program prepares written daily, weekly, and/or monthly menus that: d. Illustrate that meals and snacks are at regularly established times. e. Illustrate that meals and snacks are at least two (2) hours apart but not more than three (3) hours apart. The program creates daily, weekly, or monthly menus showcasing meals and snacks at regular times, with meals and snacks at least two hours apart and no more than three hours apart.				
J29			ACSI FLORIDA APPROVAL PROGRAM Standards 3.9.3.B	
The program participates in the United States Department of Agriculture's Child and Adult Care Food Program (USDA's CACFP), OR at least two (2) times a year, a registered dietitian or pediatric public health nutritionist evaluates the provider's menus				
J31	X	X	X	X
Mealtime is relaxed and pleasant for children. Staff sit and eat with the children while modeling appropriate behavior and using mealtime as a learning experience. Children enjoy and relax at mealtime. While demonstrating acceptable conduct and utilizing meals as a teaching opportunity, staff members sit and eat with children.				
J32a	X	X	ACSI FLORIDA APPROVAL PROGRAM Standards 3.9.3.B	X

Staff take steps and work with families to ensure that food and beverages brought from home: a. Meet the United States Department of Agriculture's Child and Adult Care Food Program (USDA's CACFP) food guidelines. ACSI FLORIDA APPROVAL PROGRAM Standard: The USDA MyPlate is to be used to determine which food groups to serve at each meal or snack serving size and age appropriateness of the selected foods for children; Childcare Food Program Meal Patterns Staff collaborate with families to ensure food and beverages brought from home meet USDA's CACFP guidelines.				
J32b	X	X	ACSI FLORIDA APPROVAL PROGRAM Standard 3.9.6.B	X
b. Are labeled with the child's first and last name and the date. ACSI FLORIDA APPROVAL PROGRAM Standard: The provider must make sure all formula and food brought from home are labeled with the child's first and last name. The provider is responsible for the label; therefore, if the label is not completed by the parent, Early learning and care personnel must put the label on when the formula or food is received. The provider must make sure all formula and food brought from home are labeled with the child's first and last name, and the date.				
J32e	X	X	X	X
e. Must be either whole fruits or commercially prepared packaged foods in factory-sealed containers if food is intended to be shared. If food is intended to be shared, it must either be whole fruits or professionally prepared packaged items in factory-sealed containers.				
J33	X	X	X	X
For all infants, and for children with disabilities who have special feeding needs, a daily record is kept and documents the type and quantity of food a child consumes and provides families with that information. Families are given a daily record that details the kinds of foods their infant ate and how much of each.				
J36c	X	X	ACSI FLORIDA APPROVAL PROGRAM Standard 3.9.7. E	X
In regard to food safety: c. If staff warm formula or human milk, the milk is warmed in water at no more than 120 degrees Fahrenheit for no more than five minutes. ACSI FLORIDA APPROVAL PROGRAM Standard: No temp indicated; Heated bottles and foods must be tested before feeding to ensure heat is evenly distributed and to prevent injury to children. (Class 2) Add "no more than 120 degrees Fahrenheit for no more than five minutes."				
J36e	X	X	X	X
e. Except for breast milk, staff serve only formula and infant food that come to the facility in factory-sealed containers (e.g., ready-to-feed powder or concentrated formulas and baby food jars) and are prepared according to the manufacturer's instructions. Staff serve formula and infant food in factory-sealed containers, prepared according to manufacturer's instructions.				
J37c, d	X	X	X	X
The program supports breastfeeding by: c. Ensuring that staff gently mix, not shake, the milk before feeding to preserve special infection-fighting and nutritional components in breast milk; and d. Providing a comfortable place for breastfeeding and coordinating feedings with the infant's mother.				
J38a, b	X	X	X	X

In regard to infants and toddlers:				
a. The program does not feed cow's milk to infants younger than 12 months, and it serves only whole milk to children of ages 12 months to 24 months.				
b. If the program provides food to infants, staff work with families (who are informed by their child's health care provider) to ensure that the food is based on each infant's individual nutritional needs and developmental stage.				
J38d, e, f	X	X	X	X
d. Teaching staff offer children fluids from a cup as soon as the families and teachers decide together that a child is developmentally ready to use a cup.				
e. Teaching staff do not offer solid foods and fruit juices to infants younger than six months of age, unless that practice is recommended by the child's health care provider and approved by families.				
f. Sweetened beverages are avoided.				
J39	X	X	ACSI FLORIDA APPROVAL PROGRAM Standard 3.6.1.C, F	X
Cots, mats, cribs, sheets, and blankets are marked with individual children's names and washed at least once a week or more often if soiled or dirty. Linens used by more than one child must be washed in between usage. Linens must be provided when children are sleeping, and pillows and blankets must be available. For children under the age of one, please follow the requirements outlined in section 3.6.4. (Class 3)				
Program staff identify choking hazards and remove them from the proximity and reach of children.				
J40	X	X	X	X
Program staff identify choking hazards and remove them from the proximity and reach of children.				
J41	X	X	X	X
Before walking on surfaces that infants use specifically for play, adults and children remove, replace, or cover with clean foot coverings any shoes they have worn outside that play area. If children or staff are barefoot in such areas, their feet are visibly clean.				
J42				
Adults have a comfortable place to sit, hold, and feed infants. Staff place rocking chairs and glider chairs in locations that will avoid injury to children who may be on the floor.				
J43				
Infants and toddlers do not have bottles while in a crib or bed and do not eat from propped bottles at any time. They also do not carry bottles, sippy cups, or regular cups with them while crawling or walking.				
J44	X	X	X	X
Teaching staff who are familiar with the infant feed him or her whenever the infant seems hungry. Feeding is not used in lieu of other forms of comfort.				
J45	X	X	X	X
At least once daily, in a program where children older than one (1) year receive two (2) or more meals, teaching staff provide an opportunity for tooth brushing and gum-cleaning to remove food and plaque. (The use of toothpaste is not required.)				
After each feeding, infant's teeth and gums are wiped with a disposable tissue (or clean, soft cloth used only for one child and laundered daily) to remove liquid that coats the teeth and gums.				
J46	X	X	ACSI FLORIDA APPROVAL PROGRAM Standard 3.6.3	X
Cribs are inspected to ensure security. Drop-side cribs are not used.				
To guarantee safety, cribs are examined and there are no drop-side cribs in use.				
J48c	X	X	X	X
Diaper/Changing area:				
c. Non-absorbent paper liners are used, which must be large enough to cover the changing surface.				

J49	X	X	X	X
Bathrooms have barriers to prevent entry by unattended infants and toddlers to 2 years old.				
J51d	X	X	ACSI FLORIDA APPROVAL PROGRAM Standard 2.4.6.B	X
Written procedures address all aspects of the arrival, departure, and transportation of children. The procedures: d. Address specific procedures for children with disabilities. Center policies must address specific procedures (individual program plan) for serving children with disabilities (e.g., medical conditions, learning, and behavioral disabilities).				
J58	X	X	X	X
Staff maintain areas used by staff or children who have allergies or any other special environmental health needs according to the recommendations of health professionals. Areas used by staff or children who have allergies to dust mites or to components of furnishings or supplies are maintained by the program according to the recommendations of health professionals.				
J60	X	X	X	X
The program provides regular vision, speech and language, hearing, and developmental screenings for children either on-site or through referral to a community health agency. The program documents annual screenings for each child.				
J66	X	X	X	X
There is a health/medical consultant available to the program for questions and advice. The health consultant observes program practices and reviews and makes recommendations about the program's practices and written health policies to ensure health promotion and prevention of infection and injury. The consultation addresses physical, social-emotional, nutritional, and oral health, including the care and exclusion of ill children.				
Teacher-Child Interactions				
K1b, c	X	X	X	X
Policies prescribe that each group of children be assigned teaching staff who have primary responsibility for working with that group. Every attempt is made to maintain continuity of relationships between teaching staff and children and among groups of children: c. Policies encourage keeping infants and toddlers to age two (2) together with their teaching staff for nine (9) months or longer.				
K2a, b, c, d, e, f	X	X	X	X
Teaching staff's daily interactions: a. Demonstrate their knowledge of the children they teach, their families, and the social, linguistic, and cultural context in which the children live. b. Support and challenge children's learning during interactions or activities that are teacher-initiated and child-Initiated. c. Are available and responsive to children; encourage children to share experiences, ideas and feelings. d. Engage in collaborative inquiry with individual children and small groups of children. e. Include listening to children attentively and with respect; teachers speak to each child frequently (by name), make eye contact and use clear, correct language patterns, and affectionate, supportive words. f. Encourage and recognize children's work and accomplishments.				
K3a, b, d, e,	X	X	X	X

Teachers manage behavior by: a. Helping individual children learn socially appropriate behavior by providing guidance that is consistent with the child's level of development. b. Implementing classroom rules and expectations in a manner that is consistent and predictable. d. Observing patterns in children's challenging behaviors to provide thoughtful, consistent, and individualized responses. e. Convening families and professionals to develop individualized plans to address behavior.				
K4	X	X	X	X
Teachers make a concerted effort to understand what children are trying to communicate and respond sensitively when children are frustrated or angry. Teaching staff actively seek to understand infants' needs and desires by recognizing and responding to their nonverbal cues and by using simple language.				
K5	X	X	X	X
Teachers observe children who have challenging behavior and respond quickly and calmly to prevent children from hurting each other while showing understanding of the children's needs and feelings. Teaching staff assist children in resolving conflicts by helping them identify feelings, describe problems, try alternative solutions, and identify events, activities, interactions, and other contextual factors that predict challenging behavior and may contribute to the behavior.				
K6	X	X	X	X
Staff promote pro-social behavior and create a climate of mutual respect for children and their families by treating them with respect and dignity. No adult or child is treated differently because of a disability, or because of his/her race, religion, ethnic origin, or physical appearance.				
K9	X	X	X	X
Teaching staff give one-to-one attention to infants when engaging in caregiving routines. Teaching staff engage infants in frequent face-to-face social interactions each day. These include both verbal behaviors (e.g., talking, cooing, repeating infant sounds, and singing) and nonverbal behaviors (e.g., smiling, touching, and holding).				
K10	X	X	X	X
Teaching staff quickly respond to infants' and toddlers'/2-year-olds' cries or other signs of distress by providing physical comfort and needed care. The teaching staff are sensitive to infants' and toddlers'/2-year-olds' various signals and learn to read their individual cries. Teaching staff facilitate an infant's social interaction when he or she is interested in looking at, touching, or vocalizing to others.				
K11	X	X	X	X
Teaching staff support children's development of friendships and provide opportunities for children to play with and learn from each other. Teaching staff facilitate positive peer interaction for children who are socially reserved or withdrawn and for those who are bullied or excluded.				
K12	X	X	X	X
Teachers provide children opportunities to develop the classroom community through participation in decision-making about classroom rules, plans, and activities.				
Program Operations				
L1-2c	X	X	ACSI FLORIDA APPROVAL PROGRAM Standard 1.4.B	X

All components of program operation are guided by written policies that a) articulate through plans, systems, and procedures, b) enable the program to run smoothly and effectively, c) guide the program toward achieving its goals, d) detail staff responsibilities, planning time, training, and resources, e) guide the appropriate use of specialized consultants to support the program's goals. In Gold Seal designated schools all employees must be at least 18 years old (except directors and vehicle drivers, who must be at least 21). This voids the ACSI FLORIDA APPROVAL PROGRAM program standard which indicates all teaching staff must be at least 16 years of age.				
L2c-d	X	X	X	X
Each employee must have cleared a sexual predator check and possess a high school diploma or an equivalent.				
L2e	X	X	X	X
Have provided personal references and a current health assessment that attest to the prospective employee's ability to perform the tasks required to carry out the responsibilities of their position.				
L3a, b, c, d, e, f	X	X	X	X
The early learning and care program: a. Fosters staff communication through staff meetings, a newsletter, written memoranda, suggestion boxes, etc. b. Provides a written job description for each position and a policy in writing on nondiscrimination. c. Provides staff with a staff lounge or separate break area and a staff bathroom. Staff have ways of taking breaks and finding relief at times of high stress. d. Offers a benefits package for full-time staff that satisfactorily completes their introductory period of employment. e. Has a teacher retention plan. f. Has in place technology-based information management systems that collect and analyze data used to monitor program operation and to inform program improvement.				
L5	X	X	X	X
At least annually, directors, parents, program staff and other ancillary professionals collaborate on a written evaluation of the program's effectiveness in meeting the needs of children, parents, and program modification. Staff and families have the opportunity to assist in making decisions to improve the program. The program uses this information to plan professional development and program quality-improvement activities, as well as to improve operations and policies.				
L6	X	X	X	X
The program has a formal merit evaluation program, and every staff person is formally reviewed by a supervisor at least once each year. An individual professional development plan is generated from the staff evaluation process and is updated at least annually and ongoing as needed.				
L7	X	X	X	X
All teaching staff evaluate and improve their own performance based on ongoing reflection and feedback from supervisors, peers and families. They add to their knowledge and increase their ability to put knowledge into practice. They develop an annual individualized professional development plan with their supervisor and use it to inform their continuous professional development.				
L8b, f, g	X	X	X	X

Financial policies and the procedures to implement them: b. Are consistent with the program's vision, philosophy, mission, goals, and expected child outcomes. The program has resources to support the program's vision, philosophy, mission, goals, operation, and expected child outcomes. f. Include the person directly responsible for program implementation (administrator, site manager, program manager, or supervising teacher) in long-range fiscal planning and in operating budget preparation, reconciliation, and review. g. Include a yearly audit. Fiscal records (such as revenue and expenditure statements, balance sheets, banking reconciliation, etc.) are kept as evidence of sound financial management.				
L9	X	X	X	X
Program staff maintain a current list of child and family support services available in the community based on the pattern of needs they observe among families and based on what families request (e.g., health, mental health, oral health, nutrition, child welfare, parenting programs, early intervention-special education screening and assessment services, and basic needs such as housing and school readiness subsidies). They share the list with families and assist them in locating, contacting, and using community resources that support children's and families' well-being and development.				
L10h, i, j, k, l	X	X	X	X
h. Inform families about community events sponsored by local organizations, such as museum exhibits, concerts, storytelling, and theater intended for children. i. Invite members of the performing and visual arts community, such as musical performers, coordinators of traveling museum exhibits, local artists, and community residents, to share their interests and talents with the children. j. Engage with other community organizations and groups to cosponsor or participate in cultural events to enrich the experience of children and families in the program. k. Are encouraged to participate in local, state, or national early childhood education organizations by joining and attending meetings and conferences. Program staff are also encouraged to participate regularly in local, state, or regional public-awareness activities related to early care and education. l. Are encouraged and given the opportunity to participate in community or statewide interagency councils or service integration efforts.				
L11a, b, c	X	X	X	X
The program leadership: a. Encourages staff and families to work together to participate in and support community improvement or advocacy projects. b. Builds mutual relationships and communicates regularly with close neighbors, informing them about the program, seeking out their perspectives, involving them in the program as appropriate, and cooperating with them on neighborhood interests and needs. c. Is knowledgeable about how policy changes at local, state, tribal, or national levels affect the services and resources available for children and their families.				
M1c, d, e	X	X	X	X
The program has written policies and procedures that are updated at least annually and: c. Are available in languages that families use and understand. d. Include parent conflict resolution procedures. e. Include program operations, such as tuition and fee schedules, payment and refunds, and attendance and vacation.				
M2	X	X	X	X

The program offers a parent display/bulletin board which covers, at a minimum, program description, policy statements, philosophy, schedules, and menus. The program compiles and provides program information to families in a language the family can understand. This information includes program policies and operating procedures.				
M3	X	X	X	X
Families may visit any area of the facility at any time during the program's regular hours of operation as specified by the procedures of the facility. Nursing mothers have a place to breast-feed their children that meets their needs for comfort and privacy.				
M4	X	X	X	X
The program has a procedure for transitioning children to another program or elementary school. This process includes reviewing children's specific needs, a family needs assessment, and a mechanism to share summary information. An informed consent form will be signed by the parent that identifies specifically what will be shared.				
M6a, b, c	X	X	X	X
To better understand the cultural backgrounds of children, families, and the community, program staff (as a part of program activities or as individuals): a. Participate in community cultural events, concerts, storytelling activities, or other events and performances designed for children and their families. b. Use a variety of formal and informal strategies (including conversations) to become acquainted with and learn from families about their family structure; their preferred child-rearing practices; and information families wish to share about their socioeconomic, linguistic, racial, religious, and cultural backgrounds. c. Actively use information about families to adapt the program environment, curriculum, and teaching methods to the families they serve.				
M7d, f, g, h, j, k, l, p, q, r	X	X	X	X
Program staff: d. Share information with families about classroom rules, expectations, and routines not only at enrollment but also as needed throughout the year. f. Inform parents about the program and the curriculum, and about policy or regulatory changes and other critical issues that could potentially affect the program. g. Provide parents with information regarding social services within the community, including health care services, assistance with basic and emergency family needs, and tuition payment alternatives. h. Establish intentional practices designed to foster strong reciprocal relationships with families from the first contact and maintain them over time. j. Use a variety of formal and informal methods to communicate with families about the program philosophy and curriculum objectives, including educational goals and effective strategies that can be used by families to promote their children's learning. k. Facilitate opportunities for families to meet with one another on a formal and informal basis, work together on projects to support the program and learn from and provide support for each other. l. Work together with families to plan events. Families' schedules and availability are considered as part of this planning. p. Encourage families to raise concerns and work collaboratively with them to find mutually satisfying solutions that staff then incorporate into classroom practice. q. Encourage and support families to make the primary decisions about services that their children need, and encourage families to advocate to obtain needed services. r. Use a variety of techniques to negotiate difficulties that arise in their interactions with family members. Program staff make arrangements to use these techniques in a language the family can understand.				

F17, J51d	X	X	ACSI FLORIDA APPROVAL PROGRAM Standard 2.4.6.B	X
Polices must address specific procedures (individual program plan) for serving children with disabilities (e.g. medical conditions, learning, and behavioral disabilities). ACSI FLORIDA APPROVAL PROGRAM Standard: states "...children with chronic medical conditions..." Isn't specific to children with disabilities.				