


1-5550 3/19/75

 <p>Department of Human Resources 311 W. Saratoga St. Baltimore, MD. 21201-3521</p>	<p><b>FIA ACTION TRANSMITTAL</b></p>
<p>Issuance Date: November 1, 1997</p>	<p>Effective Date: Immediately</p> <hr/> <p>Control Number: FIA/OPA 98-36</p>

**TO: DIRECTORS, LOCAL DEPARTMENTS OF SOCIAL SERVICES  
DEPUTY/ASSISTANT DIRECTORS FOR FAMILY INVESTMENT  
PURCHASE OF CARE ADMINISTRATORS  
FAMILY INVESTMENT SUPERVISORS**

**FROM: LINDA KEISNER, EXECUTIVE DIRECTOR, CCA  
KEVIN MALON, EXECUTIVE DIRECTOR, FIA**

**RE: HEALTH AND SAFETY STANDARDS FOR INFORMAL AND  
CERTIFIED PROVIDERS**

**PROGRAM AFFECTED: PURCHASE OF CARE**

**ORIGINATING OFFICE: OPD/ CHILD CARE ADMINISTRATION**

**SUMMARY:**

Prior to August 24, 1996, informal providers were paid through Title IV-A and were not required to be registered or licensed nor were they subject to health and safety requirements. Informal child care providers include relatives of the child(ren), non-related adults who provide care in the child's home and adults who provide care in their home for under 20 hours per month. Informal providers were paid at the in-home/informal jurisdictional rate. Informal care was limited to POC Priority 2 (Transitional) and Priority 3 (TCA) customers, and working Priority 5 customers. Priority 4 and 5 customers could also select certified providers who were paid under the Child Care and Development Block Grant (CCDBG). Certified providers were required to meet basic health and safety standards. Certified care not in the child's home was paid at the regional family child care rate.

The Personal Responsibility and Work Opportunities Reconciliation Act of 1996 (P.L.104-193) repealed Title IV-A child care. The Act amended the CCDBG to include all Federal child care funding and eliminated certified care effective October 1, 1997. All informal providers must now meet minimum health and safety standards. Payment

rates must be established for child care services, including informal care, that ensure subsidized children have equal access to comparable care. These changes and procedures for implementation are outlined below.

## POLICY

### I. INFORMAL CARE

#### A. INFORMAL CARE PAYMENT RATES

The local market rate for informal care is established through a state wide survey of payments made to those providers by families receiving child care subsidies. The survey is conducted by local departments of social services and utilizes payments reported by parents who use informal care, including the amount paid by the local department and any additional amount paid by the parent to the provider. A new survey was completed and in some regions established new informal rates. **Effective October 1, 1997, informal care providers are paid no more than the maximum payment rates found in COMAR 07. 04. 06.** The new rates and copayments are in CCAMIS. New rate and copayment charts have been distributed to local departments and are available through contacting Pamela Evans, (410) 767-7845.

#### B. INFORMAL PROVIDER CHILD CARE HEALTH & SAFETY STANDARDS

Effective October 1, 1997 all informal child care providers must agree to comply with Health & Safety Standards. Great-grandparents, grandparents, aunts, uncles, or siblings who do not live in the home are no longer exempt from meeting basic health and safety requirements. These relatives are now subject to the same requirements as other informal providers. They must self-affirm that they will adhere to the health and safety standards contained in the informal provider's packet.

Additionally, the Informal Provider Child Care Health and Safety Standards packet has been revised and now includes premise safety standards, and a self-assessment checklist to be completed and retained by the provider. Consequently, the previous packets are obsolete.

#### 1. PROCEDURES (see attached DHR/CCA 1716):

- a. Local departments must give the Informal Provider Child Care Health & Safety Standards Packet (Revised 10/1/97) to customers applying for Purchase of Care who select an informal child care provider. The packet includes the

standards (DHR/CCA 1714) and the forms to be signed and returned to the local department (DHR/CCA 1420 and 1421). A sample of the revised Informal Provider Child Care Health and Safety Standards packet is attached (DHR/CCA 1714) for use by local departments until they are available through the DHR warehouse. Existing POC customers should be given the packet at their next redetermination.

- b. Packets must be completed and returned whenever there is a change in providers, and at each redetermination.

## **II. CERTIFIED CHILD CARE**

### **A. Phasing out Certified Child Care**

Due to differences in the federal funding cycles of the old CCDBG and the new amended CCDBG, we were required to continue to offer certified child care to low income families until September 30, 1997. Effective October 1, 1997, the Child Care Administration has discontinued certified care as a type of care.

After October 1, 1997, POC customers, who elect to use relatives to provide care for their child(ren), and their selected providers, will complete an Informal Provider Child Care Health and Safety Packet (DHR/CCA 1714 revised 10/97). The provider will be paid at the informal child care rate.

### **B. Procedures for Phasing out Certified Child Care**

1. Effective October 1, 1997, local departments are to discontinue distributing the Certified and Certified Exempt Health and Safety Packets customers.
2. All out of home certified providers who are relatives (great-grandparents, grandparents, aunts, uncles, or siblings who do not live in the home) providing care in their own home will continue to be paid at the family child care rate if the current certified rate exceeds the new informal rate.
3. Customers who apply and are determined eligible for a POC subsidy on or before September 30, 1997 may choose a certified provider who is eligible for payment at the family day care rate. The provider will be paid at the new informal rate or will continue to receive the higher certified payment

after October 1, 1997 if the certified rate exceeds the customer's new informal rate.

**III. PARENTAL CHOICE**

Effective October 1, 1997, Informal Child Care may be used by all POC customers without regard to priority.

**ACTION REQUIRED OF:** All local departments.

**ACTION DUE DATE:** **Immediately.** Direct inquiries to Pamela Evans (410) 767-7845, Office of Program Development, Child Care Administration.

cc: DHR Executive Staff  
CCA Management Staff  
FIA Management Staff

DEPARTMENT OF HUMAN RESOURCES  
Child Care Administration

INFORMAL PROVIDER CHILD CARE HEALTH AND SAFETY STANDARDS

Procedures

1. Customer (parent/guardian/caretaker) applies to the local department of social services.
2. Eligibility for Purchase of Child Care is determined.
3. Appropriate budget code and priority code assigned through CCAMIS.
4. Overview given by worker regarding the types of care available.
5. When informal child care is selected, CCAMIS treats this case as an informal provider and payment is at the informal rate.
6. A customer choosing child care that is not licensed or registered under Maryland law is given a voucher and the Informal Provider Child Care Health and Safety Standards packet to take to a potential provider.
7. The Informal Provider Child Care Health and Safety Standards packet is given to new customers at application or to current customers at redetermination along with the voucher and cover letter.
8. If the provider is a relative, or if the provider is not related to the child and care is provided in the child's home, or if care is in the provider's home for less than 20 hours a month, the voucher and the **Informal Child Care Provider Agreement** must be signed and returned by the potential provider. The voucher and the attached **Parent/Guardian/Caretaker Statement** must also be signed by the customer and returned to the local department.
9. The Informal Provider Child Care Health and Safety Standards and the self assessment checklist are to be kept by the provider and not returned to the local department.
10. Unless further proof of relationship is requested, the voucher can be receipted when the voucher and the appropriate signed forms are returned to the local department. Invoices can then be sent to the provider.
11. The agreement form must be signed and returned with every voucher.

**DEPARTMENT OF  
HUMAN RESOURCES**

**CHILD CARE ADMINISTRATION  
PURCHASE OF CARE PROGRAM**

**INFORMAL PROVIDER CHILD CARE HEALTH & SAFETY  
STANDARDS PACKET .**

*Please use this number when ordering this packet from the DHR warehouse.*

**DHR/CCA 1714 (10/97)**

DEPARTMENT OF HUMAN RESOURCES  
CHILD CARE ADMINISTRATION

Dear Potential Informal Child Care Provider:

You were selected to provide child care for the child listed on the attached voucher. Under Maryland law, you are not required to be registered or licensed to provide this child care. However, you must meet minimum health and safety standards to be paid by the local department of social service.

Please read and review the attached Informal Provider Child Care Health and Safety Standards with the parent who chose you to care for their child. You must follow these standards if you receive a subsidy from the Purchase of Care Program.

To be paid, you must sign the forms included with the Informal Provider Child Care Health and Safety Standards. The parent who chooses you to provide care is responsible for assuring that the forms are returned to the local department of social services with the voucher. The forms are:

1. Informal Child Care Provider Agreement and Parent Statement signed by the parent of the child and by the individual providing child care; and
2. The Completed Voucher.

The Informal Provider Child Care Health and Safety Standards are for you to keep and refer to when needed. If you need help understanding the Standards, please contact the Regional Office of the Child Care Administration in your area. If you want to become a registered family child care provider or if you want more child care health and safety information, the Regional Office can help.

A self-assessment is enclosed in the packet for your use. It is recommended but not required that the self-assessment be completed by you and the parent. You may complete the self-assessment independently, but the results must be shared with the parent. You must keep the self-assessment on file in your records.

DEPARTMENT OF HUMAN RESOURCES  
Child Care Administration

INFORMAL PROVIDER CHILD CARE PROVIDER  
HEALTH AND SAFETY STANDARDS

<p><b>PERSONAL STANDARDS</b></p> <p>The informal child care provider shall:</p>	<ol style="list-style-type: none"> <li>1. Be 18 years of age or older;</li> <li>2. Be free from physical, mental, and emotional conditions that limit his/her ability to care for children;</li> <li>3. Be free from communicable disease;</li> <li>4. Not be dependent on alcohol or illegal drugs;</li> <li>5. Not have a record of child abuse, neglect, or other serious criminal offenses that show behavior harmful to children; and</li> <li>6. Not have had a license, registration, or certification for any type of care denied, suspended, or revoked in the last five (5) years.</li> </ol>
<p><b>ILLNESS</b></p> <p>The Provider must:</p>	<p>Call the child's parent(s), or another person(s) authorized by the parent(s) if the child becomes ill. Some signs of illness are vomiting, fever, seizures, severe pain, and diarrhea.</p>



**ADMISSION TO CARE**

The informal child care provider shall record and maintain the following information for each child in care:

1. Child's name;
2. Birth date;
3. Child's home address;
4. Parents' name(s);
5. Location and telephone number where parent(s) may be reached while the child is in care;
6. Name, address, and telephone number of at least one person who may be called in an emergency when child's parent(s) cannot be reached; and
7. Name, address, and telephone number of child's doctor, hospital, or clinic.

Each child in care should have current immunizations according to the schedule approved by the Maryland Department of Health and Mental Hygiene.

**PREMISES SAFETY STANDARDS FOR  
INFORMAL CARE PROVIDERS**

**Safety of the Home:**

The provider should ensure that the home meets all of the following safety conditions:

1. The home meets all applicable State and local fire and health codes.
2. The home is free of health and safety hazards. At a minimum, this means that the home should:
  - a. Be soundly constructed and in good repair;
  - b. Be free of infestation by insects or rodents;
  - c. Be well-lit and well-ventilated;
  - d. Have hot and cold running water;
  - e. Have an inside toilet which is in good working condition;
  - f. Have utility services for cooking, lighting, and heating;
  - g. Have an operable and safe heating system; and
  - h. Have an operable refrigerator and stove.
3. The home contains an operable telephone, operable smoke detectors, and a first-aid kit.
4. All items which might be harmful to children are properly stored and kept inaccessible to children. Such items include, but are not limited to:
  - a. Sharp or pointed tools, utensils, and implements;
  - b. Medications of any kind;
  - c. Matches and lighters;
  - d. Alcoholic beverages;
  - e. Firearms;
  - f. Flammable products;
  - g. Cleaning agents; and
  - h. Poisonous substance.

**GENERAL CLEANLINESS**

The child care provider shall:

1. Use sanitary methods when disposing of all trash, garbage, and wet or soiled diapers.
2. Wash his/her hands and the child's hands (or make sure the child washes his/her own hands) thoroughly with soap and warm running water. Wash hands after toileting, diapering, before food preparation and eating, after playing outdoors, after handling animals, and at other times when necessary to prevent the spread of disease.
3. Immediately change a child's diaper, clothing, and bedding when soiled or wet.
4. Follow diapering procedures to prevent the spread of disease.
5. Keep diapering area in a clean and sanitary manner.

<p><b>INFORMATION CONCERNING CHILD ABUSE, NEGLECT, AND MISTREATMENT</b></p> <p>As a child care provider and according to Maryland law, you shall:</p>	<ol style="list-style-type: none"> <li>1. Not abuse, neglect, or mistreat a child; and</li> <li>2. Immediately report any suspected child abuse or neglect to the protective services unit of the Local Department of Social Services or to the law enforcement agency.</li> <li>3. Discipline a child according to the age of the child and in a way that does not hurt the child emotionally or physically. Discipline <u>may not</u> include: <ol style="list-style-type: none"> <li>a. spanking;</li> <li>b. hitting;</li> <li>c. biting;</li> <li>d. shaking;</li> <li>e. shaming, ridiculing, or name calling; or</li> <li>f. any other means of physical discipline.</li> </ol> </li> </ol>
<p><b>Child Abuse:</b> Child abuse is defined in Section 5-701 of the Family Law Article of the Annotated Code of Maryland. Child Abuse means:</p>	<ol style="list-style-type: none"> <li>1. The physical or mental injury of a child where a child's health or welfare is harmed or at substantial risk of harm; or</li> <li>2. Sexual abuse of a child, whether or not physical injuries are sustained.</li> </ol>
<p><b>Child Neglect:</b> Child neglect is defined in Section 5-701 of Family Law Article of the Annotated Code of Maryland. Child Neglect means:</p>	<p>Leaving a child alone or otherwise not taking care of a child under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm.</p>

<p><u>Child Mistreatment:</u> Child Mistreatment means:</p>	<p>Any deliberate act which hurts a child physically or emotionally, including:</p> <ol style="list-style-type: none"><li>1. spanking;</li><li>2. biting;</li><li>3. hitting;</li><li>4. shaking;</li><li>5. any other means of physical discipline;</li><li>6. not attending to a child's physical needs;</li><li>7. shouting;</li><li>8. cursing;</li><li>9. shaming;</li><li>10. ridiculing;</li><li>11. washing a child's mouth with soap;</li><li>12. putting pepper or other spicy or distasteful items in a child's mouth;</li><li>13. requiring a child to stand on one foot as punishment; or</li><li>14. tying a child to a cot or other equipment.</li></ol> <p><b>NO ONE MAY ABUSE, NEGLECT, OR MISTREAT A CHILD!</b></p>
---	---

**CHILD CARE INFORMAL PROVIDER  
SELF ASSESSMENT CHECKLIST**

Name \_\_\_\_\_ SS# \_\_\_\_\_

Care Location Address \_\_\_\_\_ County \_\_\_\_\_

**Directions:** Please mark yes or no to indicate whether the home in which child care will be provided meets or will meet the following standards.

**PROVIDER STANDARDS:**

**Yes No**

- |                          |                          |  |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | I am 18 years of age or older.   |
| <input type="checkbox"/> | <input type="checkbox"/> | I am free from infections that can be passed on and from communicable diseases.  |
| <input type="checkbox"/> | <input type="checkbox"/> | I am free from dependency on alcohol or illegal drugs.   |
| <input type="checkbox"/> | <input type="checkbox"/> | I do not have a record of child abuse, neglect or other serious criminal offenses nor does anyone living in my home if care is given in my home. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have not had a license registration or certification for any type of care denied, suspended or revoked in the last five (5) years.             |
| <input type="checkbox"/> | <input type="checkbox"/> | I nurture, encourage and provide children with a variety of age appropriate learning and social activities that meet their needs.                |
| <input type="checkbox"/> | <input type="checkbox"/> | I seek to increase my skills in working with children through experience and training.   |
| <input type="checkbox"/> | <input type="checkbox"/> | I establish and use rules which are realistic and designed to promote cooperation and respect.   |

**ADMISSION OF CARE:**

**This information is kept for all children in my care:**

**Yes No**

- |                          |                          |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Child's name, address, home phone number, and birthday.   |
| <input type="checkbox"/> | <input type="checkbox"/> | Parents' name(s), location and telephone number where parent(s) may be reached while child is in my care.                     |
| <input type="checkbox"/> | <input type="checkbox"/> | Name, address, and telephone number of person(s) who will pick up child.  |
| <input type="checkbox"/> | <input type="checkbox"/> | Name, address, and telephone number of at least one person who may be called in any emergency when parents cannot be reached. |
| <input type="checkbox"/> | <input type="checkbox"/> | List of chronic medical conditions and regular medications.   |
| <input type="checkbox"/> | <input type="checkbox"/> | Documentation of child's up to date immunizations.  |
| <input type="checkbox"/> | <input type="checkbox"/> | Name of child's doctor, hospital or clinic, address and telephone number.   |

SUPERVISION:

Yes No

When a child is in my care, I will be physically present and within sight and sound of the child at all times.

ILLNESS:

Yes No

Parent(s), or other persons named by the parent, are called when their child becomes ill and arrangements must be made to keep the ill child from other children until the parent(s) or their designee can pick up the child from the home, unless the care is in the child's home. Some signs of illness are vomiting, fever, seizures, severe pain and diarrhea.

Prescription and non-prescription medications are given only when the parent or doctor gives written permission; from the original container, labeled with name of child and name of physician; and not beyond the expiration date.

HOME STANDARDS:

Yes No

The grounds at the home are maintained in a safe and clean condition.

Conditions exist in or on the grounds of the home that would not endanger the health, safety, and welfare of the children in my care.

The home's outside play area is free of broken parts, sharp objects, edges, and exposed nails.

The play equipment is well anchored; in good repair; and swings have closed hooks.

The home has adequate plumbing facilities, hot and cold running water and a working toilet.

There is adequate heat, light and ventilation in the home.

The home's kitchen has a sink, stove and refrigerator in working condition.

There is a telephone in the home. I have emergency numbers posted for immediate availability for: police, fire department and poison center.

The home has a smoke detector in working order and placed where needed.

The home has protective coverings in electrical outlets.

All stairways are guarded by a protective gate if child(ren) in care are infant(s) or toddler(s).

Dangerous items are properly stored and out of reach of children in the home. Dangerous items include knives, sharp tools, medications, matches, alcoholic beverages, flammable products, cleaning agents, poisonous products, etc.

Wood burning stoves and fire places are inaccessible to children in the home.

HOME STANDARDS: (CONTINUED)

- The home has first aid supplies (soap, band-aids, sterile gauze squares, adhesive tape, syrup of ipecac) kept in a designated area.
- The home has firearms stored in a locked area that is inaccessible to children.

GENERAL CLEANLINESS:

Yes No

- I keep all areas of the home clean so as not to endanger children's health.
- I dispose of all trash, garbage, and wet or soiled diapers in a sanitary manner.
- I wash my hands and child's hands (or make sure the child washes his/her hands) thoroughly with soap and running water after toileting, diapering, before food preparation and eating, and at other times when necessary to prevent the spread of disease.
- I immediately change a child's diaper, clothing, and bedding when soiled or wet.
- I keep diapering areas in a clean and sanitary manner.
- I follow recommended diapering procedures to prevent spread of disease.

FOOD SERVICE AND NUTRITION:

Yes No

- I serve a variety of nutritious foods and beverages on a regular schedule and in amounts to satisfy a child's appetite. Food may be provided by the parent or by the child care provider. Food Service may not include: propping an infant's bottle; forcing a child to eat; punishing a child for refusing to eat; or withholding food as a punishment.
- I make meals and snack time a pleasant social and learning experience for children.
- I interact with children during meals to provide a model of good nurturing habits.
- I store all food in a safe and sanitary manner.
- I refrigerate perishable foods such as meat, milk, and other dairy products.
- I provide individual eating utensils and, if reusable, wash after each use; if disposable, discard after one use.
- I wash, sanitize, and properly store infant bottles, nipples, caps, collars, and tongs.

CHILD COMFORT AND WELFARE:

Yes No

- I provide adequate time for meals, snacks, and rest according to the ages and activities of the children.
- I get prior written permission from the parent(s) to transport the child in a vehicle.
- I use car seats and seat belts as required by Maryland Law.
- I provide or ask the parents to supply clean, safe, individual cribs, playpens, beds, or mats for each child.
- I assure that no more than one child will occupy a crib or cot at one time.



ACTIVITIES, TOYS, EQUIPMENT:

Yes No

- I provide indoor and outdoor activities and toys according to the age and needs of the child.
- I provide toys and equipment in good shape, clean, nontoxic, and free from hazards, including lead paint.
- I ensure that toys with small parts which can be swallowed are unavailable to children under four (4) years of age.

CHILD PROTECTION:

Yes No

- I allow the parent(s) to visit their child at all times and see the areas of the home used for child care.
- I immediately report to the child's parent any serious injury or accident to the child.
- I report to the child's parent the same day any non-serious injury or accident to the child.
- I release a child only to the child's parent(s) or to a person named by the parent(s). I will check the identification of the person.
- I discipline a child according to the age of the child and in a way that does not hurt the child emotionally or physically. Discipline may not include: spanking, hitting, or shaking; any other means of physical discipline: shaming, ridiculing, name calling, or cursing; washing a child's mouth with soap; putting pepper or other spicy or distasteful items in a child's mouth.

I agree to share the above information with the parent(s) and/or caretaker(s) of the child(ren) in my care.

Department of Human Resources  
Child Care Administration

Informal Child Care Provider Agreement

Under Maryland law, anyone paid to care for an unrelated child must be registered or licensed by the Child Care Administration, unless the care is in the child's home or the care is in the provider's home for less than 20 hours a month. However, relatives who are not registered or licensed by the Child Care Administration may provide care for a related child for more than 20 hours a month, if the relative reads and completes this agreement. Under the Purchase of Care Program, a relative is a person related to a child by blood, marriage or adoption. Relatives include parents, grandparents, brothers, sisters, stepparents, stepsisters, stepbrothers, uncles, aunts, first or second cousins, great-grandparents, great-uncles, or great-aunts. Unrelated providers caring for the child in the child's home or for under 20 hours a month in the provider's home must also complete this agreement.

My signature on this agreement indicates that I have read and understand that:

1. As an informal child care provider, I am to be paid for providing child care for the child listed on the voucher. I also understand that I cannot be paid to provide care to my children, stepchildren, or any child in my custody. I have read and understand the contents of the Informal Provider Child Care Health and Safety Standards. I also understand that I must meet the Standards for each child for whose care I receive payment.
2. My payment may stop if the local department has information that the health or safety of the child is at risk. This includes documented complaints of child abuse or neglect against anyone in the household, a documented health or safety hazard, or a documented conviction or pending charge against anyone in the household of behavior that is harmful to children.
3. I must allow the parent/guardian/caregiver to visit the child while the child is in my care and to see the areas of the home used for child care.
4. I must allow representatives of the Child Care Administration or other State, or local government agency to enter and look at the home where the child care is given when a complaint is made.
5. I am agreeing to follow the terms listed on the attached voucher.
6. I will give proof of my relationship to the local department if requested.

\_\_\_\_\_  
Your Name

\_\_\_\_\_  
Child's Name

\_\_\_\_\_  
Your Relationship to the child

\_\_\_\_\_  
Address Where Care is Provided

**Parent/Guardian/Caregiver Statement**

Under Maryland law, anyone paid to care for an unrelated child must be registered or licensed by the Child Care Administration, unless the care is in the child's home or the care is in the provider's home for less than 20 hours a month. **Unrelated providers caring for the child in the child's home or for under 20 hours a month in the provider's home must complete this agreement. Relatives who are not registered or licensed by the Child Care Administration may provide care for a related child for more than 20 hours a month, if the relative reads and completes this agreement.** Under the Purchase of Care program, a relative is a person related to a child by blood, marriage or adoption. Relatives include parents, grandparents, brothers, sisters, stepparents, stepsisters, stepbrothers, uncles, aunts, first or second cousins, great-grandparents, great-uncles, or great-aunts. If asked, I agree to furnish proof that the provider is related to my child to the Department.

I have read the Informal Provider Child Care Health and Safety Standards. I understand that the person I have chosen to care for my child must follow the Standards. I understand that staff from the Child Care Administration and other agencies may investigate complaints from the public about my child care provider. I also understand that I can report any problem or concern about the care of my child to the Regional Licensing Office of the Child Care Administration.

\_\_\_\_\_  
Signature of Parent/Guardian/Caregiver

\_\_\_\_\_  
Date

**Please sign and return to the Department of Social Services**