Title 15: Mississippi State Department of Health

Part 11: Bureau of Child Care Facilities

Subpart 55: Child Care Facilities Licensure

CHAPTER 1: REGULATIONS GOVERNING LICENSURE OF CHILD CARE FACILITIES

Subchapter 1: GENERAL

Rule 1.1.2 Purpose

3. The maximum capacity of a child care facility is determined by the indoor square footage, kitchen square footage, outdoor playground area, and the number of toilets, urinals, and hand washing lavatories, with the lowest capacity determination being controlling. The maximum capacity of each room that is utilized by the children in a child care facility is calculated individually and may not be exceeded except when provided in these regulations.

Source: Miss. Code Ann. §43-20-8.

Rule 1.1.4 Definitions

7. **Director Designee** Any individual designated to act as the director, having all responsibility and authority of a director, during the director's short-term absence. A director designee shall, at a minimum, be at least 21 years of age, have a high school diploma or GED, and 2 years paid experience in a licensed child care facility. Director Designees shall not retain sole director authority in a facility for more than 24 total hours per calendar week.

   EXCEPTION: A facility may have a Director Designee serve for a maximum of 14 consecutive calendar days during a licensure year. This exception may be used once during the licensure year for allowing the director personal leave, i.e., vacation, jury duty, etc.

19. **School Age Child** A child 5 years of age or older and eligible to be enrolled in public school.

    Note: A child that is five (5) years old age must have turned five (5) on or before September 1 to be considered a school age child.

Source: Miss. Code Ann. §43-20-8.

Subchapter 2: LICENSURE

Rule 1.2.2 Types of Licenses

1. **Temporary License** The licensing agency may issue a temporary license to any child care facility. This license will allow the child care facility to operate pending the issuance of a regular license. The temporary license will reflect the date of issuance of the license, the expiration date, and the number of children for which the facility is licensed. The license issue date is the actual date documentation is received and approval for initial temporary license is granted; the expiration date is the last day of the sixth month following the issue date; examples: January 01 through June 30 or January 15 through June 30.

   NOTE: Before a Temporary License is issued and the facility allowed to begin operation the following items must be submitted to and/or verified by the licensing authority, i.e., Mississippi State Department of Health:

   c. Documentation that the facility has a qualified director for the child care program that meets the standards set forth in Rule 1.5.3.

   g. Verification of passing an American National Standards Institute – Conference for Food Protection (ANSI-CFP) Accredited food manager training. Currently the following providers are authorized by the MSDH to provide the required training:

      i. National Restaurant Association, Inc., i.e., ServSafe®,

      ii. Environmental Health Testing, Inc., i.e., National Registry of Food Safety Professionals,

      iii. Prometric, Inc., or

      iv. Mississippi State University Extension Service, i.e., TummySafe©.

      NOTE: For information on ServSafe® or TummySafe© contact the Mississippi State University Extension Service at - http://msucares.com/health/food_safety/servsafecal.htm. In addition, the Mississippi Restaurant Association (MRA) also provides ServSafe® training. The MRA can be contacted at - www.msra.org. For information on the National Registry of Food Safety Professionals or Prometric, contact the MSDH Office of Environmental Heath at 601-576-7690.

   dd. Verification that the owner/operator and director have completed mandatory training on:

      i. *Regulations Governing Licensure of Child Care Facilities.*

      ii. Directors Orientation.

      iii. Playground Safety.

NOTE: Contact the Mississippi State Department of Health, Child Care Facilities Licensure Division at 601-364-2827 for more information on the availability and location of the above referenced training. Information on available training classes and approved training providers is listed on the MSDH website at http://msdh.ms.gov/msdhsite/static/30,0,183.html. Training classes provided by the Child Care Licensing Division are listed under the heading "MSDH Child Care Provider Training Calendar." Other approved providers of training for child care facility operators and staff are listed under the headings "MSDH Approved Staff Development Trainers" and "Approved Child Care Staff Development Providers."

Source: Miss. Code Ann. §43-20-8.

Subchapter 4: FACILITY POLICY AND PROCEDURES

Rule 1.4.2 Smoking, Tobacco Products, and Prohibited Substances

1. Smoking or the use of tobacco products in any form is prohibited within the physical confines or the campus of a child care facility.

2. The use of alcohol, illegal use of prescription drugs, or use of illegal drugs is prohibited within the physical confines or the campus of a child care facility.

3. Smoking or the use of tobacco products in any form, use of alcohol, illegal use of prescription drugs, or use of illegal drugs by a caregiver is prohibited anytime a child is under the care of such caregiver regardless of location. A caregiver is defined as a person who provides direct care, supervision, and guidance to children in a child care facility, regardless of title or occupation. This definition includes volunteers and parents.

Source: Miss. Code Ann. §43-20-8.

Rule 1.4.6 Posting of Information The following items shall be posted conspicuously in the child care facility at all times:

1. Accessible to employees and parents:

   b. Daily activity schedule posted in each classroom.

   c. Menus and Food Service Permit, if applicable.

2. In kitchens:

   a. Menus.

   b. Evacuation route.

Source: Miss. Code Ann. §43-20-8.

Subchapter 5: PERSONNEL REQUIREMENTS

Rule 1.5.3 Child Care Director Qualifications A child care director shall be least 21 years of age and shall have at a minimum:

4. Two years paid experience as a caregiver in a licensed child care facility, and either (1) a current Child Development Associate (CDA) credential from the Council for Early Childhood Professional Recognition (CECPR), or (2) a Mississippi Department of Human Services (MDHS) Division of Early Childhood Care and Development (DECCD) Child Care Director's Credential or MDHS OCY Child Care Director's Credential, or (3) 24 semester hours credit with a grade of "C" or better from an accredited college or university in courses specific to early childhood.

Source: Miss. Code Ann. §43-20-8.

Rule 1.5.4 Caregivers Caregivers shall be at least 18 years of age, and shall have at a minimum:

2. A current CECPR Child Development Associate (CDA) credential, a MDHS DECCD Child Care Director's Credential, or MDHS OCY Director's Child Care Credential.

Source: Miss. Code Ann. §43-20-8.

Rule 1.5.7 Use of Director Designee

2. A director designee shall, at a minimum have a high school diploma or GED two years paid experience in a licensed child care facility or licensed/accredited kindergarten program. A director designee shall not retain sole director authority in a facility for more than 24 total hours per calendar week.

   EXCEPTION: Facility may have a Director Designee serve for a maximum of 14 consecutive days during a licensure year. This exception may be used once during the licensure year for allowing the director personal leave, i.e., vacation, jury duty, etc. In addition, if a Director has a medical condition (illness, recovery from surgery, accident, etc.) that requires more than 14 consecutive day's recovery time, the time a Director Designee may be utilized may be extended. The facility is responsible to notify the Child Care Division of such circumstances and provide documentation supporting the need to extend the time the Director Designee needs to be utilized. Approval of this exception is at the discretion of the Child Care Licensure Division.

Source: Miss. Code Ann. §43-20-8.

Rule 1.5.8 Staff Development

1. Owners, Directors, and Director Designees - Before a new license to operate is issued, owners, directors and director designees of the child care facility shall complete mandatory training on courses covering Child Care Regulations, Director

Orientation, and Playground Safety. If a new director or director designee is appointed by the child care facility after the license issuance, the mandatory training courses shall be completed by such individual(s) within the first six months of appointment. In the sole discretion of the licensing agency, mandatory training may be waived upon the submission of documentation of the individual's prior completion of relevant training.

2. All child care staff, directors, director designees, and caregivers shall be required to complete 15 contact hours of staff development, accrued during the licensure year, annually. The National Association for the Education of Young Children (NAEYC), a leading organization in child care and early childhood education recommends annual training based on the needs of the program and the pre-service qualifications of the staff. Training should address the following:

    a. Health and safety.

    b. Child growth and development.

    c. Nutrition.

    d. Planning learning activities.

    e. Guidance and discipline techniques.

    f. Linkages with community services.

    g. Communications and relations with families.

    h. Detection of child abuse.

    i. Advocacy for early childhood programs.

    j. Professional issues.

3. Contact hours for staff development shall be approved by the licensing agency.

4. No more than five contact hours of approved in-service training provided by the child care facility may be counted toward the total number of hours required each year. More than five hours of in-service training may be provided by the child care facility but no more than five hours may be counted toward the required total of 15 hours.

5. All volunteers shall receive, at a minimum, one hour of orientation by the facility director. Such orientation at a minimum shall include a review of the child abuse law and reporting requirements, emergency exit procedures, and the facility transportation policy.

Source: Miss. Code Ann. §43-20-8.

Subchapter 7: REPORTS

Rule 1.7.1 Serious Occurrences Involving Children The child care facility shall enter into the child's record and immediately report, orally to the child's parent and either orally or in writing, via email or fax, to the licensing agency, any serious occurrences involving children. If the child care facility is unable to contact the parent and the licensing official immediately, it shall document this fact, in writing, in the child's record. Oral reports and/or emailed/faxed reports shall be confirmed in writing and mailed within two days of the occurrence. Serious occurrences include accidents or injuries requiring extensive medical care, e.g., child is taken to the doctor or hospital or hospitalizations, alleged abuse and neglect, fire or other emergencies.

Source: Miss. Code Ann. §43-20-8.

Subchapter 8: STAFFING

Rule 1.8.1 General

4. During all hours of operation, including the arrival and departure of children, a child care facility employee shall be present who holds a valid CPR certification, at any location where the children are present. Said certificate shall be issued by an agent recognized by the licensing authority.

5. During all hours of operation, including the arrival and departure of children, a child care facility employee shall be present, at any location where the children are present, who holds a valid first aid certificate. Said certificate shall be issued by an agent recognized by the licensing authority.

Note: When initially acquiring or renewing the CPR and First Aid certifications required in items 4 and 5 above, online (internet, etc.) training is not acceptable. Training must be face-to-face and hands on.

Source: Miss. Code Ann. §43-20-8.

Subchapter 9: PROGRAM OF ACTIVITIES

Rule 1.9.4 Rest Periods

1. For preschool children, rest periods shall be scheduled for a minimum period of one hour, and shall not exceed two and one-half (2½) hours. Infant and toddler nap times shall be individualized to meet each child's needs as sleeping patterns can vary greatly. Half-day programs must provide for rest periods as is appropriate when the children/child indicates or is observed to require some rest time.

5. A safe sleep environment for infants to lower the risk of **Sudden Infant Death Syndrome** (SIDS) is required as follows:

a. An infant shall be placed on his/her back for sleeping unless written physician orders to the contrary are in the child's record. Sleeping infants shall be within the view of the staff and visually checked regularly when sleeping. Nothing shall obstruct the view of the staff or prevent the staff from clearly seeing infants or children.

b. Infants shall be dressed in clothing appropriate for sleeping that is designed to keep the infant warm without the possible hazard of head covering or entrapment. The room shall be kept at a draft-free seasonally appropriate temperature of 65 degrees Fahrenheit to 78 degrees Fahrenheit. If a child is already asleep and not dressed in clothing appropriate for sleeping, the caregiver does not need to awaken the infant to change his or her clothes.

c. Facilities shall use a firm mattress covered by a fitted sheet in a safety-approved crib meeting the Federal requirements of 16 CFR 1219 or 16 CFR 1220).

d. Items such as but not limited to pillows, blankets, sheepskins, bumpers, soft objects, stuffed toys, loose bedding, etc., shall not be in the crib.

Source: Miss. Code Ann. §43-20-8.

Rule 1.9.6 Infant, Toddler, and Preschool Activities

1. Infants, toddlers, and preschoolers shall be free to creep, crawl, toddle, and walk as they are physically able.

   a. Cribs, car seats, and high chairs are to be used only for their primary purpose, i.e., cribs for sleeping, car seats for vehicle travel, and high chairs for eating.

   b. Providers should limit the use of equipment such as strollers, swings, and bouncer seats/chairs for holding infants while they are awake.

   c. Providers should implement activities for toddlers and preschoolers that limit sitting or standing to no more than 30 minutes at a time.

   d. Providers should use strollers for toddlers and preschoolers only when necessary.

4. Television viewing, including video tapes and/or other electronic media, is not allowed for infants or for staff in an infant area. The playing of soothing background music in the infant and toddler areas is acceptable.

5. Television viewing, including video tapes and/or other electronic media, cell phone, or other digital media, e.g., computer, iPad®, iTouch®, etc., for toddlers preschoolers (aged two-five) is limited to one hour per day, must be of educational content and a scheduled part of the approved daily plan of activities posted in the facility. The use of CD players to play music is acceptable.

6. In half-day programs, screen time, i.e., television viewing, including video tapes and/or other electronic media, cell phone, or other digital media e.g., computer, iPad®, iTouch®, etc., for preschoolers (aged two-five) is limited to 30 minutes per day, must be of educational content and a scheduled part of the approved daily plan of activities posted in the facility. The use of CD players to play music is acceptable.

   Television viewing by staff is not permitted in areas occupied by children except for the purposes as described in item 5 and 6, above.

Source: Miss. Code Ann. §43-20-8.

Rule 1.9.7 Indoor or Outdoor Physical Activity Child care providers are to provide infants, toddlers, and preschool children with opportunities to be physically active throughout the day.

1. Toddlers and preschool children will be provided the opportunity for light physical activity for at least 15 minutes per hour when children are not involved in their scheduled rest period.

2. Toddlers should accumulate a minimum of 30 minutes of structured moderate to vigorous physical activity per day.

3. Preschoolers should accumulate a minimum of 60 minutes of structured moderate to vigorous physical activity per day.

4. Caregivers should join in and lead the structured moderate to vigorous physical activities in which the children participate.

5. Structured physical activity should involve the performance of large muscle activities.

6. Half-day programs are only required to provide for physical activity for one-half (½) the time as stated above.

NOTE: Examples of moderate physical activity are aerobic dancing, light calisthenics, getting up and down from the floor, dancing, playing on school ground equipment, singing while actively moving about, etc. Examples of vigorous physical activity are running, jumping rope, performing jumping jacks, playing soccer, skipping, etc. Regardless of the activity, it should be age appropriate and within the physical ability limits of the child. Please, understand the above requirements do not mean 30 minutes or 60 minutes vigorous activity at one time. These 30/60 minutes of vigorous physical activity can and should be spread out in short time intervals, (e.g., 5-15 minute intervals) throughout the day.

Source: Miss. Code Ann. §43-20-8.

Subchapter 10: EQUIPMENT, TOYS, AND MATERIALS

Rule 1.10.1 General

7. Television viewing by preschool children shall be limited to one hour per day and shall be educational programming only. Television viewing by staff is not permitted in areas occupied by children except for the purposes as described herein.

Source: Miss. Code Ann. §43-20-8.

Rule 1.10.7 Cribs

1. The facility shall provide a crib or other similarly commercially purchased bed unit, approved and designated for the purpose of sleeping. Mobile infants, at a minimum of eight months, may be placed on a mat during the transition period of crawling to walking. If such mat is used, it shall be a flame retardant, minimum of two (2) inch commercially purchased sleep mat, especially designated for the purpose of sleeping. All cribs, sleep units, and mats must be maintained clean, in sanitary condition and without chips, holes, fraying, tears, or stains.

2. The use of stackable cribs is prohibited.

Source: Miss. Code Ann. §43-20-8.

Rule 1.10.9 Rest Period Equipment

1. Individual beds, cots, mattresses, pads, or other acceptable equipment shall be used for rest periods, and children shall not be placed directly on the floor for rest periods. Bed linens, such as blankets or sheets, cannot be used in place of a bed, cot, mattress, or pad. These shall be kept in a sanitary condition. Once a sheet or blanket has been used by a child, it shall not be used by another child until it has been laundered.

6. The facility shall provide a crib or other similarly commercially purchased bed unit, approved and designated for the purpose of sleeping. Mobile infants, at a minimum of eight months, may be placed on a mat during the transition period of crawling to walking. If such mat is used, it shall be a flame retardant, minimum of two (2) inch commercially purchased sleep mat, especially designated for the purpose of sleeping. All cribs, sleep units, and mats must be maintained clean, in sanitary condition and without chips, holes, fraying, tears, or stains. Cribs, cots, and mats are to be a minimum of 24” to 36” apart or separated by a solid barrier. A minimum of 36 inches is recommended.

7. Children are not allowed to sleep in shared places, such as infant seats, strollers, swings, cozy areas, or on tables. If a child falls asleep in such shared place, he or she should me moved immediately to a sanitary individual sleeping place.

Source: Miss. Code Ann. §43-20-8.

Subchapter 11 BUILDINGS AND GROUNDS

Rule 1.11.1 Building

7. The ceiling, floor, and/or floor covering shall be properly installed, kept clean and in good condition, and maintained in good repair. Carpeting is prohibited in kitchen areas.

8. All parts of the child care facility used by children shall be lead-safe, well lighted, ventilated, and free of hazardous or potentially hazardous conditions, such as but not limited to, open stairs and unprotected low windows.

    a. All buildings intended for use as a child care facility constructed before 1965 shall be tested for lead. It is the responsibility of the facility applicant/operator to have a lead hazard screen or lead-based paint risk assessment of the facility done by an individual or company certified as a risk assessor by the Mississippi Commission on Environmental Quality. If the facility is found not to be lead-safe, it will not be allowed to operate as a child care facility until all required corrective measures have been taken and the facility is determined to be lead-safe by a certified risk assessor.

    b. All buildings intended for use as a child care facility, constructed prior to 1978, shall utilize MDEQ Lead Safe Certified individuals or companies for all renovation, repair and maintenance activities which disturb painted surfaces unless the paint to be disturbed has been documented to be lead-free by an individual or company that is MDEQ Lead Safe Certified as a risk assessor or inspector.

NOTE: It is recommended that child care facility operators contact the Mississippi Department of Environmental Quality at 601-961-5630 regarding any questions they may have about compliance with the laws and regulations related to lead and lead based paint.

17. All child care facilities are to be kept clean and in good repair.

Source: Miss. Code Ann. §43-20-8.

Rule 1.11.2 Indoor Square Footage

2. Rooms in which infants both play and sleep shall have a minimum of 40 square feet of usable space per child. There shall be at least 24” to 36” between each crib. A minimum of 36” is recommended. Cribs with solid ends may be placed end-to-end.

5. Rooms in which toddlers both play and sleep shall have a minimum of 45 square feet of usable space per child. There shall be at least 24” to 36” between each crib. A minimum of 36” is recommended. Cribs with solid ends may be placed end-to-end. However, if stackable cots, mats, or other storable sleeping equipment is utilized for sleeping the room shall be measured using the standard of 35 square feet per child. Should it be determined that the sleeping equipment is not properly

stored when not in use the capacity of the room will be determined using 45 square feet per child.

7. Rooms where toddlers sleep but do not play shall have a minimum of 25 square feet of usable space per child. There shall be at least 24" to 36" between each crib. A minimum of 36" is recommended. Cribs with solid ends may be placed end-to-end.

Source: Miss. Code Ann. §43-20-8.

Rule 1.11.4 Kitchens

7. All kitchens and/or food/snack preparation areas in a child care facility shall be inspected as part of the child care inspection process.

Source: Miss. Code Ann. §43-20-8.

Rule 1.11.5 Toilets and Hand Washing Lavatories

5. Toilets, urinals, hand washing lavatories, and sinks shall be clean and operational. Bathrooms, hand washing lavatories, and sinks shall be supplied with soap, and individual towels for drying hands. Each toilet shall be supplied with toilet paper.

Source: Miss. Code Ann. §43-20-8.

Rule 1.11.9 Outdoor Playground Area All licensed child care facilities are required to have an adequate outdoor playground area. All playgrounds and playground equipment intended for use by children 2-12 years of age shall meet the standards set forth in the *Handbook for Public Playground Safety*, Publication No. 325, published by the U.S. Consumer Product Safety Commission or its successor as shown in Appendix "D."

5. The outdoor playground area shall be free of hazards and not less than 30 feet (measured horizontally parallel to the ground) from electrical transformers, high-voltage power lines, electrical substations, railroad tracks, or sources of toxic fumes or gases. Hazards, including but not limited to air conditioner units and utility mains, meters, tanks, and/or cabling shall be inaccessible to children. Fencing at least four feet high shall be provided around the outdoor playground area. Fencing higher than four feet but not to exceed eight feet may be required if the licensing authority determines that a hazard exists. Fencing twist wires and bolts shall face away from the playground. As an alternative, exposed bolt ends may be cut to no more than two exposed threads. Then the bolt ends shall be ground/sanded smooth or capped.

Source: Miss. Code Ann. §43-20-8.

Rule 1.11.14 Pest Control

All child care facilities are to use a contractor licensed by the State of Mississippi to control pests, e.g., rats, mice, insects, etc. Before a pest control contractor is used, it is the responsibility of the operator to ensure that the pest control contractor is **properly licensed. Use of agricultural chemicals for pest control is strictly prohibited**.

Source: Miss. Code Ann. §43-20-8.

Subchapter 13 NUTRITION, MEALS, FOOD SAFETY

Rule 1.13.3 Refreshments

1. Refreshments may be provided by parents only on a child's birthday or other special celebration such as Valentine's Day, Easter, Christmas, Graduation, etc. Food provided to children, including vending machines at the facility, must meet nutritional guidelines as set forth in Appendix "C."

2. It is recommended that foods for the event that are brought to the facility by parents should be "store bought" and not "home cooked."

3. Food items for the event may include cake, ice cream, fresh fruit, cheese and crackers, etc. Other items, i.e., party favors such as stickers, books, toothbrushes, and crayons, etc., are encouraged.

Source: Miss. Code Ann. §43-20-8.

Rule 1.13.6 Food Safety and Food Manager

1. All kitchens and/or food/snack preparation areas in a child care facility must be inspected as part of the child care inspection process.

2. Each child care facility must have a Certified Food Manager meeting the standards set forth in Rule 1.2.2.1.g. The only exception would be if two facilities had COMPLETELY different operating hours. If this situation exists then could one Certified Food Manager could serve more than one facility. Should such occur documentation to that affect must be in the each facility's file.

3. A Certified Food Manager shall be present during meal preparation. In the absence of the Certified Food Manager, an individual trained in food service must be present.

Source: Miss. Code Ann. §43-20-8.

Subchapter 14: DISCIPLINE AND GUIDANCE

Rule 1.14.1 Prohibited Behavior The following behaviors are prohibited by anyone (i.e., parent, caregiver, or child) in all child care settings:

3. Abusive or profane language to include but not limited to yelling at, and/or using harsh tones toward the children or in close proximity (hearing distance) to children.

Source: Miss. Code Ann. §43-20-8.

Subchapter 15: TRANSPORTATION

Rule 1.15.3 Occupant Restraints

1. All children will be properly restrained whenever they are being transported in a motor vehicle.

    a. Every person transporting a child under the age of four (4) years in a passenger motor vehicle, and operated on a public roadway, street or highway, shall provide for the protection of the child by properly using a child passenger restraint device or system meeting applicable federal motor vehicle safety standards, e.g., child safety seat.

    b. Every person transporting a child in a passenger motor vehicle operated on a public roadway, street or highway, shall provide for the protection of the child by properly using a belt positioning booster seat system meeting applicable federal motor vehicle safety standards if the child is at least four (4) years of age, but less than seven (7) years of age and measures less than four (4) feet nine (9) inches in height or weighs less than sixty-five (65) pounds.

    c. **Any** vehicle equipped with seatbelts is subject to the requirements in items a. and b. above.

6. An individual seat restraint must be used for each child. The use of an individual seat restraint for two or more children is not allowed.

Source: Miss. Code Ann. §43-20-8.

Rule 1.15.4 Staff-to-Child Ratio

2. On vehicles with at GVWR of 10,000 lbs. or more, the staff-to-child ratio shall be one caregiver to each 25 children or fraction thereof. The driver of the vehicle shall not be counted as a caregiver while transporting the children. In facilities that are dually licensed, i.e., licensed to provide care for both preschool and school age children, if the vehicle is only transporting school age children (no preschool children, infants, or toddlers are being transported), the driver may be counted as a caregiver while transporting the school age children.

Source: Miss. Code Ann. §43-20-8.

Subchapter 16: DIAPERING AND TOILETING

Rule 1.16.1 **Diaper Changing Area** Each room in which diaper-wearing children play shall contain a diapering area. A diapering area shall contain a hand washing lavatory with hot and cold running water, a smooth and easily cleanable surface, a plastic-lined, covered garbage receptacle, and sanitizing solution. The hand washing lavatories located in a diapering area shall not be included in the ratio of hand washing lavatories to children for determining a child care facility's capacity nor shall they be used for any other purpose. Example: The diaper-changing sink may not be used for washing/rinsing cups, baby bottles, food, dishes, utensils, pacifiers, etc. In addition, the diaper changing area is not to be used as a storage area for anything other than those items used when changing diapers, such as but not limited to, gloves, towels, soap, etc. For proper diaper changing procedure, see Appendix G - PROCEDURE FOR DIAPERING A CHILD.

Source: Miss. Code Ann. §43-20-8.

Subchapter 18: FEEDING OF INFANTS AND TODDLERS

Rule 1.18.3 **Formula Storage** Formula shall be labeled with the child's name, dated, and placed in the refrigerator upon arrival.

Source: Miss. Code Ann. §43-20-8.

Subchapter 22: SCHOOL AGE CARE

Rule 1.22.7 In after school programs, screen time, i.e., television viewing, including video tapes and/or other electronic media, cell phone, or digital media, e.g., iPod®, iPad®, iTouch®, etc., is limited to one hour per day. Screen or media use or other educational electronic equipment is acceptable provided such is for educational purposes.

Source: Miss. Code Ann. §43-20-8.

Subchapter 24: HOURLY CHILD CARE

Rule 1.24.8 Buildings and Grounds

8. Facilities must meet the requirements of Rule 1.2.2.1.k and Rule 1.11.1.8 of these regulations.

Source: Miss. Code Ann. §43-20-8.

Subchapter 25: HEARINGS, EMERGENCY SUSPENSIONS, LEGAL ACTIONS AND PENALTIES

Rule 1.25.9 Violations and Penalties

1. Any Class I violation of these regulations, in the discretion of the licensing agency, is punishable by a monetary penalty of five hundred dollars ($500.00) for a first occurrence and a monetary penalty of one thousand dollars ($1000.00) for each

subsequent occurrence of the same violation. Each violation is considered a separate offense.

The following are Class I violations:

b. Allowing a child to be unattended at a licensed child care facility before or after operating hours. This also includes a child being left alone during operating hours when no staff is present at the facility. Further, a child left unattended outside of a child care facility is also considered to be a Class I violation.

2. Any Class II violation of these regulations, in the discretion of the licensing agency, is punishable by a monetary penalty of fifty dollars ($50.00) for a first occurrence and a monetary penalty of one hundred dollars ($100.00) for each subsequent occurrence upon further inspections within the same licensure term. Each violation is considered a separate offense. Example: If a facility is five children over maximum capacity it constitutes five separate Class II violations and would be subject to a two hundred fifty dollar ($250.00) or five hundred dollar ($500.00) monetary penalty, whichever is applicable.

The following are Class II violations:

b. Exceeding licensed maximum capacity (Rule 1.1.2 (3) or Rule 1.11.2, i.e., facility or room capacity.

c. Failure to have a proper criminal record check in a personnel record (Rule 1.5.2 or Rule 1.6.4 (1f)).

d. Failure to have a proper child abuse central registry check in a personnel record (Rule 1.5.2 or Rule 1.6.4 (1f)).

k. Unauthorized individual assigned administrative and supervisory responsibility for the facility when the director is absent or violation of Rule 1.5.6 Use of Director Designee or Rule 1.8.1(3).

p. Failure to have adequate staff on site holding a valid CPR certificate. (Rule 1.8.1(4))

q. Failure to have adequate staff on site holding a valid First Aid certificate. (Rule 1.8.1(5))

r. The presence of any individual who has failed to satisfy the personnel requirements of Subchapter 5.

u. Altering of documents supporting suitability for employment in a child care facility, i.e., Letter of Suitability for Employment or Child Abuse Central Registry Check. Refer to Subchapter 5, Personnel Requirements.

Source: Miss. Code Ann. §43-20-8.

APPENDIX C

Nutritional Standards

Introduction

Meals shall meet the nutritional standards as prescribed in this section. A child care facility shall provide adequate and nutritious meals prepared in a safe and sanitary manner.

Healthy diets help children grow, develop, and perform well in learning environments. Healthy diets contain the amounts of essential nutrients and calories needed to prevent nutritional deficiencies while preventing an excess amount of discretionary calories. Planned meals and snacks provide the right balance of carbohydrate, fat, and protein to reduce risks of chronic diseases, and are part of a full and productive lifestyle. Such diets are obtained from a variety of foods.

Nutrition and feeding practices for children strongly affect the development and long-term health of the child. Proper nutritional care during the early years is essential for intellectual, social, emotional, and physical growth. It is also necessary that an environment be provided which encourages the development of good food habits.

Meals and vending services shall meet the standards from the Offices of Healthy Schools and Child Nutrition for the Mississippi State Department of Education as well as USDA Food and Nutrition Service guidelines.

THE GOALS OF A CHILD CARE FACILITY IN RELATION TO NUTRITION SHALL BE:

1. Menus shall be nutritionally adequate and consistent with the Dietary Guidelines for Americans.
2. Foods shall be provided in quantities and meal patterns that balance energy and nutrients with children's ages, appetites, activity levels, special needs, and cultural and ethnic differences in food habits.
3. Parents shall be involved in the nutrition component of their child-care facility.
4. A variety of fruits, vegetables, and whole-grain products shall be offered to children for meals and snacks. Mealtime should be used as an opportunity to teach nutrition and/or food concepts.
5. The addition of fat, sugar, and sources of sodium shall be minimal in food preparation and service.
6. Food preparation and service shall be consistent with best practices for food safety and sanitation.
7. Furniture and eating utensils shall be age-appropriate and developmentally suitable to encourage children to accept and enjoy mealtime.
8. Child-care personnel shall encourage positive experiences with food and eating.

9. Caregivers shall receive appropriate training in nutrition, food preparation, and food service.
10. Child-care facilities shall obtain assistance as needed from the Child Care Licensure Division and the supportive staff.
11. Nutrition education for children and for their parents shall be encouraged as a component of the child-care program.
12. Child-care programs must comply with local and state regulations related to wholesomeness of food, food preparation facilities, food safety, and sanitation.
13. Family style dining is encouraged.

Based upon the American Dietetic Association Benchmarks for Nutrition Programs in Child-Care Settings

FEEDING SCHEDULE FOR INFANTS AND CHILDREN ONE YEAR AND OLDER

1. Children's food needs are based on the amount of time spent in the child care facility.

2. Any child in a child care facility at the time of service of a meal or snack will be served that meal or snack

3. Child care facilities that are open 24 hours are required to serve three meals and three snacks.

IF YOU ARE OPEN	**YOU MUST SERVE**		
Nine hours or less	Two snacks and one meal	OR	One snack and two meals
Over nine hours	Two snacks and two meals	OR	Three snacks and one meal
24 hours or during all meals	Three meal and three snacks: one snack should be a late night snack only served to children who are awake.		

I. **Meal Time**

Meals and snacks shall be served at regularly scheduled times each day.

The same meal or snack shall not be served more than one time in any 24-hour (one-day) period.

No more than four and no less than a two and one-half hour period must elapse between the beginning of a meal and a snack.

If breakfast is not served, then a mid-morning snack shall be provided.

Since not all children arrive at the facility at the same time, certain parental options regarding breakfast will be allowed as follows:

1. Parent can feed the child prior to arrival at the child care facility.

2. The parent may have the meal provided by the child care facility.

Note: Either option above must be documented and included in the child's record.

Outside foods shall not be brought into the facility, with the exception of special dietary needs. Exempt facilities are facilities that operate less than six hours and as noted in the regulations, otherwise noted in other sections of the standards. Any outside foods shall meet the Office of Healthy School and MSDH Nutrition Standard guidelines.

II. **Meal Time Environment**

Age appropriate utensils, plates, bowls, cups, and dining area shall be provided.

Children shall not wait longer than fifteen minutes at the table for food to be served.

Sufficient time shall be allowed for children to wash their hands and prepare for the meal.

Mealtime shall be used for socialization, and shall be a relaxed, happy time for the children. No media, e.g., televisions, videos, or DVD's may be viewed during meal and snack times. Family style dining is encouraged with serving platters, bowls, and pitchers on the table so that all present can serve him/her self. Children are encouraged to assist with table setting and bowling up fruits for dessert. All foods served must meet the serving guidelines, and be age appropriate. "Seconds" of foods can be served as indicated at the request of the child or by hunger cues.

A caregiver shall sit and join the children while they are eating. When caregivers are allowed to eat with the children, which is encouraged, staff will eat items that meet nutrition standards. It is suggested that the staff eat the same food items that are served to the children. The staff will encourage social interaction, conversation, and use the mealtime for education purposes. Extra assistance and time shall be provided for slow eaters.

Caregivers shall not eat foods outside of the foods served in the facility in front of the children.

Food shall not be used as a reward or punishment. Children will not be encouraged to "clean your plate," but encouraging children to try two bites of each food served is acceptable.

Additional servings shall be provided for the child who requests more food at a meal or snack. It is at the discretion of the facility and knowledge of the child's eating pattern to allow seconds on food items. This time to teach children on portion control, monitoring extra intake, and better food selections is higher in nutritional value.

Meals and snacks provided by a parent must not be shared with other children, unless a parent is providing baked goods for a celebration or party being held at the operation. Foods for a party or celebration shall meet the Office of Healthy School guidelines.

Children will be permitted in meal preparation areas when under the direct supervision of a staff person, when there is no danger of injury from equipment, and for instruction/teaching purposes only.

III. **Menus**

A complete two-week cycle of menu plans shall be submitted annually to Child Care Licensure as part of the renewal process. Although a minimum complete, two-week cycle menu is required to be submitted annually, child care facilities at their discretion may submit a 4 to 8 week cycle of menu plans.

Daily menus for all meals and snacks prepared and/or served in the child care facility shall be plainly posted. Any substitution shall be of comparable food value and shall be recorded on the menu and dated.

Menus shall be written at least one week in advance. Menus can be completed on a rotating cycle for 4-12 weeks.

Menus shall be posted in the food preparation area and in a conspicuous place in the child care facility at all times.

Menus shall be planned to include food with variety in texture, color, and shape. Record of dated menus served, and any substitutions made, shall be kept on file for a minimum of one year.

New food shall be introduced to help develop good food habits. Introduce only one new food per meal or snack. Foods used for activities/teaching can be included on the written record of foods served for the day.

It is the facility's responsibility to discuss recurring eating problems with the child's parent.

IV. **Child Requiring a Special Diet**

A child requiring a special diet due to medical reasons, allergic reactions, or religious beliefs, shall be provided meals and snacks in accordance with the child's needs. If medical reasons exist for the special diet, a medical prescription from the child's physician stating that the special diet is medically necessary is required. Information required for dietary modifications include:

- Child's full name and date of instructions, updated annually;
- Any dietary restrictions based on the special needs;
- Any special feeding or eating utensils;
- Any foods to be omitted from the diet and any foods to be substituted;
- Limitations of life activities;
- Any other pertinent special needs information;

- What, if anything, needs to be done if the child is exposed to restricted foods.

Religious or ethnic requests should include the above information as needed, plus a certified statement of request based upon the religious or ethnic beliefs of the family.

The facility shall not serve nutrient concentrates and supplements such as protein powders, liquid protein, vitamins, minerals, and other nonfood substances without written instructions from the child's physician.

The child's parent shall meet with the facility staff and/or director to review the written instructions. Such instructions shall list any dietary restrictions/requirements and shall be signed and dated by the child's physician requesting the special diet.

Parents of children with severe restrictions and dietary needs will be given a copy of the facility's menu to pre-select foods to be served. The parents will be responsible for ensuring the accuracy of foods served based upon the preplanned menu.

The child care facility may request the parent to supplement food served by the child care facility. When food is supplied by the parent, the child care facility shall be responsible for assuring that it is properly stored and served to the child in accordance with the diet instructions on file at the child care facility. Any food item that must cooked, shall be prepared by the facility, such as a soy patties. Meals and snacks provided by a parent must not be shared with other children, unless a parent is providing baked goods for a celebration or party being held at the operation.

Records of food intake shall be maintained when indicated by the child's physician.

Vegetarian/Vegan Dietary Requests
Request for a vegetarian/vegan diet shall be accommodated with the same information completed as for dietary modifications. Specialty items may be supplied by the parent to meet nutritional needs. Contact with the nutritionist with MSDH is recommended.

To the extent authorized by Federal laws, the facility may determine that the special nutritional needs of a child cannot be met at the facility and the child may be excluded from admission into the facility.

V. **Food Preparation**

Recipes shall be used and a file of recipes used to prepare the food shall be maintained.

Foods shall be prepared in a form that is easy for children to handle. Bite size pieces and finger foods are suitable. Bones shall be removed from any food served to any child in the child care setting.

Foods shall be prepared as close to serving time as possible to preserve nutrients, flavor, and color.

Food should not be highly seasoned. No extra salt or fats should be added to the foods in cooking. The use of salt free, low fat products is allowed. Children need to learn the flavors of food.

Raw vegetables and foods that may cause choking in young children shall not be served to children less than two years of age.

VI. **Choking Prevention**

A caregiver shall join the children while they are eating. This is an opportunity to teach socialization skills, nutrition education, and is a safety measure to help prevent choking.

Children should be encouraged to eat slowly, take small bites, and chew well before swallowing.

FOODS THAT MAY CAUSE CHOKING

Sausage shaped meats (hot dogs)*	Pop Corn
Hard Candy*	Chips*
Nuts	Thick Pretzels Rods* Thin pretzel sticks and rounds would be allowed
Grapes	Chunks of peanut butter
Gum*	Marshmallows
Dried Fruits	

*Not allowed to be served

To Reduce Choking Hazards

Cook food until soft and cut into thin slices or small pieces. Remove bones from meat, chicken, and fish, and remove seeds and pits from fruit. With toddlers, cutting foods into "pea" size is recommended.

VII. **Feeding of Infants**

When a pregnant mother is visiting the facility to consider enrollment, breastfeeding should be encouraged.

Breast milk is the recommended feeding for infants and should be encouraged and supported by child care facility staff. The mother may choose to come to the child care facility to nurse her infant, or may choose to supply bottles of expressed breast milk for the child care facility staff to feed the infant. To help a mother be successful with breastfeeding the faculty may:

1. Encourage the mother to come to the facility to breastfeed and provide a

- Quiet, comfortable and private place to feed;
- Place to wash the hands;
- Pillow to support her infant if desired;
- A comfortable chair, stool for feet while nursing;
- The mother may opt to nurse while in the infants room;

2. Encourage the mother to provide a back-up supply of frozen breast milk that is labeled with the infant's name and date of expression. The mother's expressed milk shall be used for her infant only. Note: *Excessive shaking of human milk may damage some components that are valuable to the infant.*

The Centers for Disease Control's (CDC) guidelines for storage of frozen expressed breast milk are as follows:

- Freezer compartment of a refrigerator at a temperature of 5° F or -15° C the expressed breast milk can be safely stored for 2 weeks
- Freezer compartment of refrigerator with separate doors 0° F or -18° C the expressed breast milk can be safely stored for 3-6 months
- Freezer compartment of refrigerator with separate doors -4° F or -20° C the expressed breast milk can be safely stored for 6-12 months

Note: Store milk toward the back of the freezer, where temperature is most constant. Milk stored for longer durations in the ranges listed is safe, but some of the lipids in the milk undergo degradation resulting in lower quality. You can go to the CDC website at http://www.cdc.gov/breastfeeding/recommendations/handling_breastmilk.htm for more information.

3. Note: for the breast fed infant, it is acceptable to introduce iron-fortified cereal earlier, at four months if desired, but preferably at 6 months.

A written schedule for feeding the infant shall be provided by the parent and posted for reference by the child care facility staff.

Feeding should be by hunger cues whenever possible. Hunger cues may include:

- Sucking on his tongue, lips, hands, or fingers while asleep
- Moving his arms and hands toward his mouth
- Restless movements while asleep
- Rapid eye movements under his eyelids
- Opening his mouth when his lips are touched
- "Rooting" or searching for the nipple
- Making small sounds

Late hunger cues include:

- Crying
- Fussiness

Signals when an infant is full and feeding should stop:

- "Falls off" the breast, releasing the nipple;
- Falls asleep; or
- Relaxes his body and opens his fists.

Breast milk or formula shall be brought to the child care facility daily, ready to be warmed and fed. Each bottle shall be labeled with the infant's name and the date. No cereal, juice or other foods may be added to the infant's breast milk/formula without a physician's written request, as done for a child with special needs.

Bottles should be warmed for five minutes in a pan of hot, not boiling water; **never** microwave. Before feeding, test the temperature by squirting a couple of drops on the back of your hand.

At the end of each feeding, discard any milk left in the bottle. Staff will send all used bottles home with the parent for proper cleaning and sanitizing.

Age-appropriate solid foods (complimentary foods) may be introduced no sooner than when the child has reached 4 months of age, but ideally at six months. The first food introduced usually is cereal mixed with breast milk or formula (not in a bottle). Adding juice to dry cereal is not allowed.

Commercially prepared baby foods shall be brought in unopened jars and labeled with the infant's name. Home prepared/blended and home canned infant foods shall not be served. A facility may chose to mash and puree the foods served to older children for the infants 7 months to one year - no additional juice, sauces, or fats may be added to the pureed foods.

Iron-fortified dry infant cereal shall be brought in sealed container premeasured for each feeding and labeled with the infant's name.

Juice shall not be served to infants (children less than 12 months of age).

A small amount of water is encouraged at 8-12 months.

Infants shall be held cradled in the arms during feeding. At no time shall an infant be fed by propping a bottle.

Introduction of solid foods to an infant should be done in consultation with the parent and/or according to the schedule of the Mississippi State Department of Health Infant Feeding Guide.

Solid foods must be spoon-fed. No solid foods shall be fed by bottle or infant feeder without written direction from a physician.

Infants are fed when hungry by noting hunger cues, such as crying, being restless. Feeding is stopped when it is determined that the infant is satisfied. Signs of satiety include, refusing the nurse, turning away from the nipple, falling asleep.

Infants are encouraged to start using a cup at six to nine months, based upon motor skills. When the cup is used, the breast milk or formula may be brought into the center in a clean closed container that is clearly labeled. By the age of one, all children should be off a bottle.

Older infants are encouraged to hold and drink from cups, to use child appropriate eating and serving utensils. Self-feeding should be encouraged. All food should be served in a manner to prevent choking, such as mashing, cutting in small "pea" size portions.

Breast or formula is served to at least 12 months. Cow's milk is not served until age one, unless provided with a written exception from the infant's physician. Children ages one to two, shall be served whole cow's milk, after age two, toddlers should be served fat free/skim milk. *When there are children older than two in the classroom with younger children, all children shall be served the whole milk.*

Guidelines for Milk Storage and Use for All Infants

Storage Method and Temperature	Maximum Amount of Time For Storage
Room (25 C or 77 F)	**4 hours**
Refrigerator (4 C or 39 F)	**48 hours**
Previously thawed –	
Refrigerated milk	**24 hours**
Freezer (-20 C or 0 F)	**3 months**

From the ACOG/AAP publication: Breastfeeding Handbook for Physicians

When centers are reimbursed for meals and must supply formula for their infants, only ready to use formula may be purchased for use. The center may require the parents to supply clean bottles daily. If the center supplies the bottles, there must be provisions in place for the proper cleaning, sanitizing, and drying of all bottles and supplies outside of the infant room.

FEEDING SCHEDULE FOR INFANTS THROUGH ONE YEAR

INFANT'S FOOD NEEDS ARE BASED ON THE AMOUNT OF TIME SPENT IN THE CHILD CARE FACILITY.

ANY INFANT IN A CHILD CARE FACILITY AT THE TIME OF SERVICE OF A MEAL OR SNACK SHALL BE SERVED FOODS APPROPRIATE TO THE AGE.

MEAL/SNACK	BIRTH THROUGH 5 MONTHS	6 THROUGH 12 MONTHS

Breakfast	4-6 fl. oz. breast milk or formula	6-8 fl. oz. breast milk or formula 2-4 Tbsp. prepared infant cereal (optional) 1-4 Tbsp. fruit and/or vegetable(infant or mashed)
Lunch or Supper	4-6 fl. oz. breast milk or formula	6-8 fl. oz. breast milk or formula 2-4 Tbsp. prepared infant cereal (optional) 1-4 Tbsp. fruit and/or vegetable(infant or mashed) 1-4 Tbsp. infant meat
Supplement/Snack	4-6 fl. oz. breast milk or formula	2-4 fl. oz. breast milk or formula 0-1/2 dry bread or 0-2 crackers (optional)

Infant cereal and formulas shall be iron fortified. Infant feeding is individualized after consultation with the parent and by hunger cues from the infant.

MENU PLANNING

Dietary Guidelines for Americans provide assistance in planning meals for ages two and older, which will promote health and prevent disease.

The guidelines, applied to child care feeding are:

1. Offer a variety of foods.

2. Serve meals and snacks that help maintain a healthy weight.

3. Serve fresh, frozen, canned, or dried vegetables, fruits whenever possible, and whole grain products.

4. Avoid excessive fat, saturated fat, and cholesterol. No fried foods or foods with transfats shall be served.

5. Use and serve sugar only in meal preparation and then in moderation. No concentrated sweets, such as candy, syrup, sweetened drinks sodas, or flavored milks may be served.

6. Limit sodium products and the use of salt.

7. Promote an alcohol, tobacco and drug free lifestyle for children, parents, and caregivers.

8. Promote and encourage daily physical activity.

PARTIES AND SPECIAL OCCASIONS

Parties and special party type events should not be held more that once a month. Food for parties should be prepared at the facility when possible. It is recommended that if foods for the event are brought to the facility by parents it should be "store bought" and not "home cooked."

It is suggested that a plain "store bought" cake be served. Other items may include ice cream, fresh fruit, cheese and crackers, and party favors such as stickers, books, toothbrushes, crayons, etc., are encouraged.

Meal Pattern Points to Remember

Keep in mind the following points when you plan menus to meet meal pattern requirements for each of the food groups.

- Plan your meats first. Then select fruits and vegetables, making sure that you have a Vitamin C source daily and a Vitamin A source every other day, or three times a week. Refer to the vitamin tables. Limit starchy vegetables to once/day - these include lima beans, butterbeans, white/sweet potatoes, English peas, black-eye peas, field peas, Crowder peas, cream and whole kernel corn, any dried pea/bean(unless counted for a meat substitute).

- Two vegetables or two fruits may be served at the mealtime, but it is recommended to serve a vegetable and a fruit for variety. Including brightly colored fruits and vegetables, such as tomatoes, broccoli, carrots, greens, strawberries, melon, peaches, will help to meet the vitamin requirements.

- The same meal may not be served more than once in a day (i.e. facilities who are open for lunch and supper may not serve the same meal for both meals).

- Snacks are to be served early afternoon and late afternoon, usually 30-60 minutes before closing. Water can be used as the beverage while foods are served. Snack time is an excellent time to introduce fruits and vegetables.

- Use only 100-percent-strength juice for snack no more than once a day. Give fruit for breakfast/morning snack instead of juice.

- Juice should not be served as part of the snack when milk is the only other component. It is poor menu planning to offer such a combination since it provides too much liquid for children.

- Fruit-flavored drinks, sport drinks, soft drinks, caffeinated beverages, artificially sweetened beverages shall not be served.

- Avoid serving two forms of the same fruit or vegetable in the same day. Example: an orange

and orange juice or an apple and applesauce are combinations that should not be used. Serve a variety of vegetables and fruits to ensure a nutritionally well-balanced meal.

- Dry milk shall not be used as a milk beverage, but may be used for cooking purposes.

- Guidelines from USDA FNS (US Department of Agriculture Food Nutrition Supplement) program are used as the standard for menu planning and guidelines. However, when one set of guidelines are stricter then the stricter guidelines shall be enforced (in comparing MSDH and USDA FNS). Emphasis shall be placed on serving more whole grains and fewer foods high in fat, sugar, and sodium.

- Drinking water shall be freely available to children of all ages and offered at frequent intervals. Extra water served with meals, snacks, and during and after physical activity is encouraged. Facilities may have water fountains in the classroom or dining area. This water source should be encouraged before and after all meals and snacks and takes the place of water served at the table.

- To prevent nutrient and vitamin loss from foods during preparation, cooking, or storage, try to
    - Serve fruits and vegetables raw as appropriate for the age. The risk of choking is greater for the child under the age of two.
    - Steam, boil, or simmer foods in a very small amount of water, or microwave for the shortest time possible.
    - Cook potatoes in their skins. Be sure to wash the dirt off the outside of the potato.
    - Refrigerate prepared juices and store them for no more than two to three days.
    - Store cut raw fruits and vegetables in an airtight container and refrigerate—do not soak or store in water. Nutrients may be diluted from soaking in water. Manufacturer packaged fresh fruits and vegetables are the exception due to packaging processes.

MEAL PATTERNS FOR CHILDREN IN CHILDCARE FACILITIES: BREAKFAST

BREAKFAST	**AGES 1YR-2YR**	**AGES 3 YR-5 YR**	**AGES 6 YR–12 YR**
Milk (Must be fluid, skim/fat free), or 1% milk)	½ c.	¾ c.	1 c.
Fruit or Vegetable	¼ c.	½ c.	½ c.
Grains/Breads Enriched, Whole Grain Bread OR Enriched Dry Cereal OR Enriched Hot Cereal OR Enriched, Whole Grain Pasta, Noodles, Rice	 ½ slice ¼ c. OR 1/3oz. ¼ c. ¼ c.	 ½ slice 1/3 c. OR ½ oz. 1/3 c. 1/3 c.	 ½ slice ¾ c. OR 1oz. ½ c. ½ c.
Water	½ c.	¾ c.	1 c.

Milk:

Milk shall be served at Breakfast. The milk shall be pasteurized fluid milk, fortified with vitamin A and D. Whole milk is served to infants and toddlers less than 2 years of age. After age two, skim/fat free or 1% milk shall be served

Soymilk may be served when indicated with dietary restrictions.

Bread and Bread Alternates:

Use enriched whole-grain breads and bread alternatives. Dry cereals need to be of high fiber and not sugar coated. Hot cereals cannot be instant. Whole grain pasta, noodles, or brown rice may be used occasionally for the breakfast meal.

Breakfast breads may include muffins, biscuit, toast, breakfast bread, no more than weekly pancake or waffle (with no syrup). Crust used as part of the main dish (i.e., for quiche) is allowed as a bread alternate. These items may not be served: doughnuts, honey buns, breakfast tarts, pastries, packaged snack cakes, and other high fat/sugar foods.

Fruits and Vegetables:

Use fresh, canned, dried, or frozen fruit for breakfast. No sugar may be used in the packaging or preparation of the fruit. Canned or frozen fruit should be packed in juice or water - not syrup or sugar packed.

Vegetables, such as tomatoes, may be used occasionally for the breakfast meal. Cultural differences may also dictate that items such as tomatoes, peppers, onions, or salsas may be served with brown rice for the vegetable and bread component at breakfast.

Water:

Water is to be made available with all meals and snacks. Tap or bottled water may used. Facilities may have water fountains in the classroom or dining area. This water source should be encouraged before and after all meals and snacks and takes the place of water served at the table.

Meat and Meat Alternates:

The Meat component is not required for the breakfast meal. IF the facility desires to serve a meat item with the breakfast, that would be allowed. Meats and meat alternates that would be acceptable include eggs, fat free yogurt, low fat cheese, fat free cottage cheese, lean ham, Canadian bacon, and peanut butter. Bacon is not considered a meat and shall not be served due to the high fat and high sodium content.

MEAL PATTERNS FOR CHILDREN IN CHILDCARE FACILITIES: LUNCH/SUPPER/DINNER

LUNCH/SUPPER/DINNER	AGES 1YR-2YR	AGES 3 YR-5 YR	AGES 6 YR–12 YR
Meat/Meat Alternate			
Cooked Meat, No Bone	1 oz.	1 ½ oz.	2 oz.
Cooked Dry Beans/Peas	¼ c.	3/8 c.	½ c.
Low Fat Cheese	1 oz.	1 ½ oz.	2 oz.
Egg	1 small	1 medium	1 medium
Peanut Butter	2 Tbsp.	3 Tbsp.	4 Tbsp.
Fat Free Yogurt/Cottage Cheese	4 oz/1/2 c.	6 oz./3/4 c.	8 oz./1 c.
Fruit or Vegetable: Must include 2 different foods- 1 vegetable/1 fruit OR 2 vegetable OR 2 fruit	¼ c. total 1/8 c. of 2 foods	½ c. total ¼ c. of 2 foods	3/4 c. total 3/8 c. of 2 foods
Grains/Breads			
Enriched, Whole Grain Bread	½ slice	½ slice	½ slice
OR			
Enriched Dry Cereal	¼ c. OR 1/3oz.	1/3 c. OR ½ oz.	¾ c. OR 1oz.
OR	¼ c.	1/3 c.	½ c.
Enriched Hot Cereal			
OR	¼ c.	1/3 c.	½ c.
Enriched, Whole Grain Pasta, Noodles, Rice			
Milk (Must be fluid, skim/fat free), or 1% milk)	½ c.	¾ c.	1 c.
Water	½ c.	¾ c.	1 c.

Meat and Meat Alternates:

It is recommended to have at least one meatless meal a week. An alternate for meat could be cooked, dried beans, or peas. Cooked dried beans and peas cannot count for a vegetable and meat alternate in the same meal. Canned beans and peas will include the canned kidney, black bean, garbanzo, etc. Note: Canned beans are much higher in sodium/salt.

Edible portion for meats and meat alternates is used. Bone and skin shall not be counted as servings. No bones may be served. Note: 1 ounce of cooked meat is equal to one medium cooked chicken leg wtih bone removed.

Processed, pre-fried meats are not allowed due to the sodium/salt and fat content. Meats not allowed include hot dogs, corndogs, bologna, bacon, sausage, pancake sticks, small chicken nuggets, fish sticks, and steak fingers.

Processed cheese, such as cheese spread, canned cheese sauce, and cheese in packaged snack crackers is not allowed. Low fat or fat free cheese would be a meat alternate that is allowed.

For menu variety, use meat, and low fat cheese in combination to equal a full serving portion.

It is not recommended serving nuts and seeds due to nut/seed allergies prevalent in the youth today.

Bread and Bread Alternates:

Use enriched whole-grain breads and bread alternatives. Whole grain pasta, noodles, brown rice, wheat rolls, and cornbread are encouraged for the lunch/supper/dinner meals.

Bread alternates may include crust used as part of the main dish (i.e. pizza or quiche), Dry oatmeal used in a fruit crisp.

Pre-fried items, such as hash browns, French fries, and tater tots are not recommended due to the fat and sodium content Any pre-fried item served is limited to once a week.

Cookies, pastries, packaged snack cakes, and other high fat/sugar foods cannot be counted for any bread serving at the lunch/supper/dinner meal.

Fruits and Vegetables:

Must serve a Vitamin C source daily and must serve a Vitamin A source every other day, three times a week – refer to the guidelines. Fruits and vegetables supply these nutrients. More than once vitamin source a day is also encouraged.

Use a different combination of two or more servings for the meal service. Use fresh, canned, dried, or frozen vegetables and fruits for lunch/supper/dinner. No sugar may be used in the packaging or preparation of the fruit. Canned or frozen fruit should be packed in juice or water - not syrup or sugar packed.

Vegetables and fruits may be served as combination dishes (i.e., beef stew with meat, potatoes, carrots, English peas, OR shredded carrot salad with diced pineapple).

Avoid serving two forms of the same fruit or vegetable in the same day. Example: an orange and orange juice or an apple and applesauce are combinations that should not be used. **Serve a variety of vegetables and fruits to ensure a nutritionally well-balanced meal.**

It is highly recommended to either serve at least one raw vegetable and two raw fruits per week, for a meal or snack

Limit serving starchy vegetables to once per meal. Starchy vegetables include white/sweet potatoes, lima beans, butter beans, English peas, black-eye peas, field peas, Crowder peas, cream and whole kernel corn, any dried bean/pea (unless counted for a meat alternate).

Vegetables shall be seasoned with powders, spices, and herbs. The use of high sodium/salt and high fat seasonings should be restricted as much as possible.

Small amounts (less than 1/8 cup) of lettuce, tomatoes, onions, relish, catsup, salsa, jams, jellies, or other condiments may be added for flavor or garnish as "other foods," but do not count as a fruit or vegetable.

Milk:

Milk shall be served at Lunch/Supper/Dinner. The milk shall be pasteurized fluid milk, fortified with vitamin A and D. Whole milk is served to infants and toddlers less than 2 years of age. After age two, skim/fat free milk or 1% milk shall be served. Flavored milk may be served no more than once a week, using flavoring added to whole/skim/fat free milk or 1% milk.

Soymilk may be served when indicated with dietary restrictions.

Provisions must be made to serve calcium in alternate forms when no milk/substitute may be served to the child due to dietary restrictions.

If a child cannot be served milk for medical reasons or upon parent's instructions, then that child is not to be served high content milk products, e.g., pudding, ice cream, cheese, etc.

All milk equivalent used as a meat alternate must be low in fat.

Water:

Water is to be made available at all meals and snacks. Tap or bottled water may used. Facilities may have water fountains in the classroom or dining area. This water source should be encouraged before and after all meals and snacks and takes the place of water served at the table.

MEAL PATTERNS FOR CHILDREN IN CHILDCARE FACILITIES: SNACK

SNACK – MUST SELECT TWO OF THE FOUR COMPONENTS, PLUS WATER	**AGES 1YR-2YR**	**AGES 3 YR-5 YR**	**AGES 6 YR–12 YR**
Meat/Meat Alternate			
Cooked Meat, No Bone	1/2 oz.	½ OZ.	1 oz.
Cooked Dry Beans/Peas	1/8 c.	1/8 c.	1/4 c.
Low Fat Cheese	1/2 oz.	1/2 oz.	1 oz.
Egg	1 small	1 medium	1 medium
Peanut Butter	1 Tbsp.	1 Tbsp.	2 Tbsp.
Fat Free Yogurt/Cottage Cheese	2 oz/1/4 c.	2 oz./1/4 c.	4 oz./1/2 c.
Fruit or Vegetable	1/2 c.	½ c.	3/4 c.
Grains/Breads			
Enriched, Whole Grain Bread	½ slice	½ slice	½ slice
OR			
Enriched Dry Cereal	¼ c. OR 1/3oz.	1/3 c. OR ½ oz.	¾ c. OR 1oz.

OR Enriched Hot Cereal OR Enriched, Whole Grain Pasta, Noodles, Rice	¼ c. ¼ c.	1/3 c. 1/3 c.	½ c. ½ c.
Milk (Must be fluid, skim/fat free), or 1% milk)	½ c.	1/2 c.	1 c.
Water	½ c.	1 c.	1 c.

Meat and Meat Alternates:

It is recommended to have at least one meatless meal a week. An alternate for meat could be cooked, dried beans or peas. Cooked dried beans and peas cannot count for a vegetable and meat alternate in the same meal. Canned beans and peas will include the canned kidney, black bean, garbanzo, etc. Note: Canned beans are much higher in sodium/salt.

Edible portion for meats and meat alternates is used. Bone and skin shall not be counted as servings. No bones may be served. Note: 1 once of cooked meat is equal to one medium cooked chicken leg with bone removed.

Processed, pre-fried meats are not allowed due to the sodium/salt and fat content. Meats not allowed include hot dogs, corndogs, bologna, bacon, sausage, pancake sticks, small chicken nuggets, fish sticks, and steak fingers.

Processed cheese, such as cheese spread, canned cheese sauce, and cheese in packaged snack crackers is not allowed. Low fat or fat free cheese would be a meat alternate that is allowed.

For menu variety, use meat, and low fat cheese in combination to equal a full serving portion.

Nuts or seeds *may be used* as a meat alternate for snack time, but is not recommended due to nut/seed allergies prevalent in the youth today.

Bread and Bread Alternates:

Use enriched whole-grain breads and bread alternatives. Whole grain pasta, noodles, brown rice, wheat rolls, and cornbread are encouraged for the lunch/supper/dinner meals.

Bread alternates may include crust used as part of the main dish (i.e. pizza or quiche), dry oatmeal used in a fruit crisp.

Pre-fried items, such as hash browns, French fries, tater tots are not recommended due to the fat and sodium content Any pre-fried item served is limited to once a week. Fresh, “homemade” oven baked fries or wedges would be allowed.

Plain, low sugar type cookies may be served occasionally for a snack component. These cookies may include animal crackers, graham crackers, vanilla wafers, oatmeal, oatmeal raisin, peanut

butter, and ginger snaps. Items that may not be served include chocolate chip, most packaged cookies/cakes.

Low fat granola bars, cereal bars, whole grain fruit bars, rice krispie treats may be used for a snack bread component. Packaged crackers with cheese/peanut butter filling are discouraged due to the fat/sodium content. The cheese/peanut butter filling cannot count as a meat serving.

Baked chips, chips, popcorn, hard pretzels, and other low-moisture, high sodium foods cannot meet the bread requirement for a snack. Crackers, cheese and vegetable flavored crackers are allowed. Trail mixs made of various dry, no sugar coated cereals, dried fruits, and small marshmallows are a suggested snack item to meet a bread component.

Fruits and Vegetables:

Use fresh, canned, dried, or frozen vegetables and fruits for snack. No sugar may be used in the packaging or preparation of the fruit. Canned or frozen fruit should be packed in juice or water-not syrup or sugar packed.

Vegetables and fruits may be served as combination dishes (i.e., shredded carrot salad with diced pineapple, fat free yogurt parfait with fresh fruit).

Avoid serving two forms of the same fruit or vegetable in the same day. Example: an orange and orange juice or an apple and applesauce are combinations that should not be used. **Serve a variety of vegetables and fruits to ensure a nutritionally well-balanced meal.**

It is highly recommended to either serve at least one raw vegetable and two raw fruits per week, for a meal or snack. Younger children may have an appropriate substitution due to the choking hazard or the item may be cooked first.

Small amounts (less than 1/8 cup) of lettuce, tomatoes, onions, relish, catsup, salsa, jams, jellies, or other condiments may be added for flavor or garnish as "other foods," but do not count as a fruit or vegetable.

Juice should not be served as part of the snack when milk is the only other component. It is poor menu planning to offer such a combination since it provides too much liquid for children.

100% Fruit juice is allowed once a day. Vitamin fortified fruit juices, such as apple juice, with extra Vitamin C, will not be recognized as a good vitamin source.

The best time to serve this juice would be at the late 4:30/5:30 p.m., snack period.

Milk:

The milk shall be pasteurized fluid milk, fortified with vitamin A and D. Whole milk is served to infants and toddlers less than 2 years or age. After age two, skim/fat free milk, or 1% milk shall

be served. Flavored milk may be served no more than once a week, using flavoring added to whole/skim/fat free milk, or 1% milk.

Soymilk may be served when indicated with dietary restrictions.

Provisions must be made to serve calcium in alternate forms when no milk/substitute may be served to the child due to dietary restrictions.

If a child cannot be served milk for medical reasons or upon parent's instructions, then that child is not to be served high content milk products, e.g., pudding, ice cream, cheese, etc.

All milk equivalents used as a meat alternate must be low in fat.

Water:

Water is to be made available with all meals and snacks. Tap or bottled water may used. Facilities may have water fountains in the classroom or dining area. This water source should be encouraged before and after all meals and snacks and takes the place of water served at the table.

VITAMIN C SOURCES
VITAMIN C SOURCE MUST BE SERVED DAILY
**BEST CHOICE
*GOOD CHOICE
#ACCEPTABLE CHOICE (ONLY COUNT FOR A VITAMIN SOURCE ONCE PER WEEK)

Fruits			**Vegetables**		
Food	Serving Size		Food	Serving Size	
Blackberries	¼ c.	#	Asparagus	¼ c.	*
Blueberries	¼ c.	#	Artichoke	¼ medium	*
Cantaloupe	¼ c	**	Bok Choy	¼ c.	*
Grapefruit	¼ medium	**	Broccoli	¼ c.	**
Grapefruit Juice	½ c	**	Brussel Sprouts	¼ c.	**
Grapefruit-Orange Juice	½ c.	**	Cabbage	¼ c.	*
Guava	¼ c.	**	Cauliflower	¼ c.	*
Honeydew Melon	½ c.	*	Chicory	¼ c.	*
Kiwi	½ medium	**	Collard Greens	¼ c.	*
Mandarin Orange Sections	¼ c.	*	Kale	¼ c.	#
Mango	¼ medium	*	Kohlrabi	¼ c.	**
Melon balls	¼ c.	*			
Orange	½ medium	**	Mustard Greens	¼ c.	#
Orange Juice	¼ c.	**	Okra, not fried	¼ c.	#

Papaya	¼ c.	*	Peppers, green & red	¼ c.	**
Peach, frozen only	¼ c.	**	Potato, White, or Red Skinned Baked only-no instant/fries/tots	½ medium	*
Pineapple	¼ c.	#	Rutabagas	¼c.	#
Pineapple Juice	¼ c.	*	Snow Peas	¼ c.	#
Pineapple-grapefruit or orange juice	¼c.	**	Spinach	¼ c.	#
Raspberries	¼ c.	*	Sweet Potato	½ medium	*
Starfruit	¼ c.	#	Tomato	½ medium	*
Strawberries	¼ c.	**	Tomato or V-8 Juice	¼ c.	**
Tangelo	½ medium	**	Turnip Greens	¼ c.	*
Tangerine	½ medium	**	**Miscellaneous**		
Tropical fruit mix	¼ c.	*			
Watermelon	½ c.	#	Liver, beef	1 oz.	**

VITAMIN A SOURCES
VITAMIN A SOURCE MUST BE SERVED EVERY OTHER DAY, 3 TIMES PER WEEK
** BEST CHOICE
* GOOD CHOICE
#ACCEPTABLE CHOICE (ONLY COUNT FOR A VITAMIN SOURCE ONCE PER WEEK)

Fruits			**Vegetables**		
Food	Serving Size		Food	Serving Size	
Avocado	¼ medium	#	Asparagus	¼ c.	#
Apricot	2 halves	*	Artichoke	½ medium	#
Cantaloupe	¼ c.	*	Bok Choy	¼ c.	*
Cherries, red sour	¼ c.	*	Broccoli	¼ c.	*
Mandarin Orange Segments	¼ c.	*	Brussels Sprouts	¼ c.	*
Mango	¼ medium	**	Carrots	¼ c.	**
Melon Balls	¼ c.	*	Collard Greens	¼ c.	**
Nectarine	¼ medium	#			
Papaya	¼ c.	*	Kale	¼ c.	**
Peaches	¼ c.	#	Lettuce, Green, Romaine, or Red NOT Iceberg	½ c.	#
Plantain	¼ c.	#	Mixed Vegetables	¼ c.	**
Prunes	¼ c.	*	Mustard Greens	¼ c.	**
Tangerine	½ medium	*	Okra, not fried	¼ c.	#
			Peas & Carrots	¼ c.	**

			Peppers, red	¼ c.	**
Miscellaneous			Pumpkin	¼ c.	**
Egg	1 medium	*	Rutabagas	¼ c.	#
Liver, beef	1 oz.	**	Spinach	¼ c.	**
Liver, chicken	1 oz.	**	Sweet Potato	½ medium	**
			Tomato or V-8 Juice	¼ c.	**
			Turnip Greens	¼ c.	**
			Winter Squash, Butternut or Hubbard	¼ c.	**

DENTAL CARE

Dental care is encouraged after each meal service. Parents shall supply toothbrushes and tooth powders or pastes for the child's individual use. Recommendations include replacing the brush every three months or when bristles are bent.

Each toothbrush and powder or paste must be:

- Labeled with the child's full name
- Stored out of children's reach when not in use
- Stored in a manner that prevents the toothbrushes from touching each other during storage

Staff is encouraged to attend trainings on dental care that includes:

- Proper tooth brushing technique as appropriate for the child's age and skills.
- Education to train parents about proper oral healthcare techniques.
- Education for staff and parents to learn the appropriate techniques to feed infants and children that minimize damage to teeth and facial development.

Children must have adult supervision during tooth brushing activities.

GARDENING AND FRESH PRODUCE

Gardening is an excellent opportunity to incorporate physical activity with nutrition education. Facilities are encouraged to have gardening projects with the children. Produce that is grown in the gardens may be washed and handled properly to allow the items to be served for a snack time or education activity.

Purchasing local produce from Mississippi farmers is one way to offer fresh items to the children. This also helps the local economy and raising families' awareness of food sources. The child care center must ensure the safety of foods served. Steps must be taken to demonstrate reasonable care has been taken to ensure the safety of foods purchased. Steps include: Investigating the local farm and production practices, communicating with the local farmer on the needs of the facility including packaging, delivery, and payment procedures, and promoting the use of local produce with families and the community. There are several resources available to use as a safety checklist, such as the Iowa State

University Checklist for Retail Purchasing of Local Produce. The checklist is on the www.Healthyms.com website under Nutrition and Farm to School and Preschool.

REFERENCES

Dietary Guidelines for Americans, 2005.
http://www.health.gov/dietaryguidelines/dga2005/document/

United States Department of Agriculture; Food and Nutrition Service; Child and Adult Care Food Program: Nutrition Guidance for Child Care Centers.
http://www.fns.usda.gov/cnd/care/ProgramBasics/Meals/Meal_Patterns.

Dietary Reference Intakes, (DRIs), Food and Nutrition board, Institute of Medicine, National Academies

USDA National Nutrient Database for Standard Reference, Release 18.

Promoting good Nutrition and Physical Activity in Child-Care Settings, A Research Brief, May 2007, Robert Wood Johnson Foundation.

Position of the American Dietetic Association: Benchmarks for Nutrition Programs in Child Care Settings, Journal of the American Dietetic Association, June 2005.

Nemours, Health and Prevention Services, Best Practices for Health Eating: A Guide to Help Children Grow Up Healthy, Version 2, 2008

The Wellness Child Care Assessment Tool: A Measure to Assess the Quality of Written Nutrition and Physical Activity Policies, The American Dietetic Associations, December 2011

Institute of Medicine, Child and Adult Care Food Programs: Aligning Dietary Guidance for All, November 4, 2011

Preventing Childhood Obesity in Early Care and Education Programs, American Academy of Pediatric, American Public Health Association, National Resource Centre for Health and Safety in Child Care and Early Education, 2010

APPENDIX E

DISHWASHING PROCEDURE

The best way to wash, rinse, and disinfect dishes and eating utensils is to use a dishwasher with a sanitizing cycle. The final sanitizing rinse of a dishwasher must reach a temperature of 180 degrees. If a dishwasher is not available or cannot be installed, a three-compartment sink will be needed to wash, rinse, and disinfect dishes. A two-compartment or one-compartment sink can be used in child care facilities (located in an occupied residence) licensed for 12 or fewer children

by adding one or two dishpans, as needed. In addition to three compartments or dishpans, you will need a dish rack with a drain board to allow dishes and utensils to air dry. To wash, rinse, and disinfect dishes by hand:

- Fill one sink compartment or dishpan with hot tap water and a dishwashing detergent.
- Fill the second compartment or dishpan with hot tap water.
- Fill the third compartment or dishpan with hot tap water and 1-1/2 tablespoons of liquid chlorine bleach for each gallon of water.
- Scrape dishes and utensils and dispose of excess food.
- Immerse scraped dish or utensil in first sink compartment or dishpan and wash thoroughly.
- Rinse dish or utensil in second dishpan of clear water.
- Immerse dish or utensil in third dishpan of chlorinated water for at least 1 minute.
- Place dish or utensil in a rack to air dry.

Note: Food preparation and dishwashing sinks should only be used for these activities and should never be used for routine hand washing or diaper changing activities.

Source: The ABCs of Safe and Healthy Child Care: A Handbook for Child Care Providers, Department of Health and Human Services, U.S. Public Health Service, Centers for Disease Control and Prevention.

APPENDIX G

PROCEDURE FOR DIAPERING A CHILD

Either of the following two procedures is acceptable in a child care facility for licensing purposes. However, some programs may be enrolled in a program that requires Procedure #2.

Procedure #1

1. Organize needed supplies within reach:
    a. fresh diaper and clean clothes (if necessary)
    b. dampened paper towels or premoistened toweletts for Cleaning child's bottom
    c. child's personal, labeled, ointment (if provided by parents)
    d. trash disposal bag

2. Place a disposable covering (such as roll paper) on the portion of the diapering table where you will place the child's bottom. Diapering surfaces should be smooth,

nonabsorbent, and easy to clean. Don't use areas that come in close contact with children during play such as couches, floor areas where children play, etc.

3. If using gloves, put them on now.

4. Using only your hands, pick up and hold the child away from your body. Don't cradle the child in your arms and risk soiling your cloths.

5. Lay the child on the paper or towel.

6. Remove soiled diaper (and soiled clothes).

7. Put disposable diapers in a plastic-lined trash receptacle.

8. Put soiled reusable diaper and /or soiled clothes WITHOUT RINSING in a plastic bag to give to parents.

9. Clean child's bottom with some premoistened disposable toweletts or a dampened, single-use, disposable towel.

10. Place the soiled toweletts or towel in a plastic-lined trash receptacle.

11. If the child needs a more thorough washing, use soap, running water, and paper towels.

12. Remove the disposable covering from beneath the child. Discard it in a plastic-lined receptacle.

13. If you are wearing gloves, remove and dispose of them now in a plastic-lined receptacle.

14. Wash your hands. NOTE: The diapering table should be next to a sink with running water so that you can wash your hands without leaving the diapered child unattended. However, if a sink is not within reach of the diapering table, don't leave the child unattended on the diapering table to go to a sink; wipe your hands with some premoistened toweletts instead. NEVER leave a child alone on the diapering table.

15. Wash the child's hands under running water.

16. Diaper and dress the child.

17. Disinfect the diapering surface immediately after you finish diapering the child.

18. Return the child to the activity area.

19. Clean and disinfect:
    a. The diapering area,
    b. all equipment or supplies that were touched, and
    c. soiled crib or cot, if needed.

20. Wash your hands under running water.

Source: The ABCs of Safe and Healthy Child Care: A Handbook for Child Care Providers, Department of Health and Human Services, U.S. Public Health Service, Centers for Disease Control and Prevention.

Procedure #2

1. Caregiver washes hands

2. Prepare for diapering by gathering wipes, diaper, plastic bag, clean clothes, gloves and other supplies needed. Bring materials to the diaper changing area but not on the changing table

3. Place child on diapering table. Remove clothing to access diaper. If soiled, place clothes into plastic bag.

4. Remove soiled diaper and place into plastic-lined, hands-free covered trash container. (To limit odor, seal in a plastic bag before placing into trash containers.)

5. Use wipes to clean child's bottom from front to back. Use a fresh wipe for each swipe.

6. If gloves were used, remove at this point.

7. Use a wipe to remove soil from adult's hands.

8. Use another wipe to remove soil from child's hands.

9. Throw soiled wipes into plastic-lined, hands-free covered trash container.

10. Put on clean diaper and redress child.

11. Place child at sink and wash hands using the proper hand washing procedure. Return child to a supervised play area without contaminating any surface

12. Spray the surface of the diapering table with soap-water solution to remove gross soil. Wipe clean using a disposable towel and throw away in a plastic-lined, hands-free covered trash container. Be sure the surface is dried completely.

13. Spray the surface of the diapering table with clear water (recommended). Wipe dry using a disposable towel and throw away in a plastic-lined, hands-free covered trash container.

14. Spray the diapering surface with disinfecting strength bleach-water solution (completely cover table; table should glisten) and wait for 2 minutes before wiping dry with a disposable towel or allow to air dry. Dispose of the towel in a plastic-lined, hands-free covered trash container.

15. Adult washes hands using the proper hand washing procedure.

Source: *Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs, 3rd Edition*, American Academy of Pediatrics, American Public Health Association, National Resource Center for Health and Safety in Child Care and Early Education, 2011.

APPENDIX H

CLEANING AND DISINFECTION PROCEDURES

Keeping the child care environment clean and orderly is very important for health, safety, and the emotional well-being of both children and providers. One of the most important steps in reducing the number of germs, and therefore the spread of disease, is the thorough cleaning of surfaces that could possibly pose a risk to children or staff. Surfaces considered most likely to be contaminated are those with which children are most likely to have close contact. These include toys that children put in their mouths, crib rails, food preparation areas, and surfaces likely to become very contaminated with germs, such as diaper-changing areas.

Routine cleaning with soap and water is the most useful method for removing germs from surfaces in the child care setting. Good mechanical cleaning (scrubbing with soap and water) physically reduces the numbers of germs from the surface, just as hand washing reduces the numbers of germs from the hands. Removing germs in the child care setting is especially important for soiled surfaces which cannot be treated with chemical disinfectants, such as some upholstery fabrics.

However, some items and surfaces should receive an additional step, **disinfection**, to kill germs after cleaning with soap and rinsing with clear water. Items that can be washed in a dishwasher or hot cycle of a washing machine do not have to be disinfected because these machines use water that is hot enough for a long enough period of time to kill most germs. The disinfection process uses chemicals that are stronger than soap and water. Disinfection also usually requires soaking or drenching the item for several minutes to give the chemical time to kill the remaining germs. Commercial products that meet the Environmental Protection Agency's (EPA's standards for "hospital grade" germicides (solutions that kill germs) may be used for this purpose. One of the most commonly used chemicals for disinfection in child care settings is a homemade solution of household bleach and water. Bleach is cheap and easy to get. The solution of bleach and water is easy to mix, is nontoxic, is safe if handled properly, and kill most infectious agents. (Be aware that some infectious agents are not killed by bleach. For example, cryptosporidia is only killed ammonia or hydrogen peroxide.)

A solution of bleach and water loses its strength very quickly and easily. It is weakened by organic material, evaporation, heat, and sunlight. Therefore, bleach solutions should be mixed fresh each day to make sure it is effective. Any leftover solution should be discarded and the end of the day. NEVER mix bleach with anything but fresh tap water! Other chemicals may react with bleach, create, and release a toxic chlorine gas.

Keep the bleach solution you mix each day in a cool place out of direct sunlight and out of the reach of children. (Although a solution of bleach and water mixed as shown in the accompanying box should not be harmful if accidentally swallowed, you should keep all chemicals away from children.)

If a child care facility uses a commercial cleaner, sanitizer, or disinfectant it must be a U.S. Environmental Protection Agency (EPA)-registered product that has an EPA registration number on the label. Such products shall only be used according to the manufacturer's instructions.

NOTE: All EPA-registered products may not be appropriate for use in a child care facility. Therefore, it is the responsibility of the facility to make sure any product use is appropriate for use in a child care facility.

Recipe for Bleach Disinfecting Solution

(For use on non-porous surfaces such as diaper change tables, counter tops, door and cabinet handles toilets, etc.)

¼ - ¾ cup bleach
1 gallon of cool water

OR

1 - 3 tablespoon bleach
1 quart of cool water

Apply as a spray or poured fresh solution, not by dipping into a container with a cloth that has been in contact with a contaminated surface.

Add the household bleach (5.25% sodium hypochlorite) to the water.

Recipe for Weaker Bleach Sanitizing Solution

For food contact surfaces sanitizing (dishes, utensils, cutting boards high chare trays), toys that children may place in their mouths, and pacifiers

1 tablespoon bleach
1 gallon cool water

Add the bleach to the water

Washing and Disinfecting Toys

- Infants and toddlers should not share toys. Toys that children (particularly infants and toddlers) put in their mouths should be washed and disinfected between uses by individual

children. Toys for infants and toddlers should be chosen with this in mind. If you cannot wash a toy, it probably is not appropriate for an infant or toddler.

- When an infant or toddler finishes playing with a toy, you should retrieve it form the play area and put it in a bin reserved for dirty toys. This bin should be out of reach of the children. Toys can be washed at a later, more convenient time, and then transferred to a bin for clean toys and safely reused by the other children.

- To wash and disinfect a hard plastic toy:
    - Scrub the toy in warm, soapy water. Use a brush to reach into the crevices.
    - Rinse the toy in clean water.
    - Immerse the toy in a mild bleach solution (see above) and allow it to soak in the solution for 10-20 minutes.
    - Remove the toy from the bleach and rinse well in cool water.
    - Air dry.

- Hard plastic toys that are washed in a dishwasher or cloth toys washed in the hot water cycle of the hot water cycle of a washing machine do not need to be additionally disinfected.

- Children in diapers should only have washable toys. Each group of children should have its own toys. Toys should not be shared with other groups.

- Stuffed toys used by only a single child should be cleaned in a washing machine every week or more frequently if heavily soiled.

- Toys and equipment used by older children and not put into their mouths should be cleaned at least weekly and when obviously soiled. A soap and water wash followed by clear water rinsing and air-drying should be adequate. No disinfection is required. (These types of toys and equipment include blocks, dolls, tricycles, trucks, and other similar toys.).

- Do not use wading pools for children in diapers.

- Water play tables can spread germs. To prevent this:
    - Disinfect the table with chlorine bleach solution before filling it with water.
    - Disinfect the all toys to be used in the table with chlorine bleach solution. Avoid using sponge toys. They can trap bacteria and are difficult to clean.
    - Have all children wash their hands before and after playing in the water table.
    - Do not allow children with open sores or wounds to play in the water table.
    - Carefully supervise the children to make sure they do not drink the water.
    - Discard water after play is over

Washing and Disinfecting Bathroom and Other Surfaces

Bathroom surfaces, such as faucet handles and toilet seats, should be washed and disinfected several times a day, if possible, but at least once a day or when soiled. The bleach and water solution or chlorine-containing scouring powers or other commercial bathroom surface

cleaner/disinfectants can be used in these areas. Surfaces that infants and young toddlers are likely to touch or mouth, such as crib rails, should be washed with soap and water and disinfected with a nontoxic disinfectant, such as bleach solution, at least once every day, more often if visibly soiled. After the surface has been drenched or soaked with the disinfectant for at least 10 minutes, surfaces likely to be mouthed should be thoroughly wiped with a fresh towel moistened with tap water. Be sure not to use a toxic cleaner on surfaces likely to be mouthed. Floors should be washed and disinfected at least once a day and whenever soiled.

Washing and Disinfecting Diaper Changing Areas

Diaper Changing Areas should:

- Only be used for changing diapers.
- Be smooth and nonporous, such as Formica (NOT wood).
- Have a raised edge or low fence around the area to prevent a child from falling off.
- Be next to a sink with hot and cold running water.
- Not be used to prepare food, mix formula, or rinse pacifiers.
- Be easily accessible to providers.
- Be out of reach of children.

Diaper changing areas should be cleaned and disinfected after each diaper changer as follows:

- Clean the surface with soap and water and rinse with clear water.
- Dry the surface with a paper towel.
- Thoroughly wet the surface with the recommended bleach solution.
- Wipe dry with a clean disposable towel or air dry. If using a commercial disinfectant/sanitizer, follow labeled manufacturer's instructions.

Washing and Disinfecting Clothing, Linen, and Furnishings

Do not wash or rinse clothing soiled with fecal material in the child care setting. You may empty solid stool into the toilet, but be careful not to splash or touch toilet water with your hands. Put the soiled clothes in a plastic bag and seal the bag to await pick up by the child's parent or guardian at the end of the day. Always wash your hands after handling soiled clothing.

Explain to parents that washing or rinsing soiled diapers and clothing increases the chances that you and the children may be exposed to germs that cause diseases. Although receiving soiled clothes is not pleasant, remind parents that this policy protects the health of all children and providers. Each item of sleep equipment, including cribs, cots, mattresses, blankets, sheets, etc., should be cleaned and sanitized before being assigned to a specific child. The bedding items should be labeled with that child's name, and should only be used by that child. Children shall not share bedding. Infantsfi linens (sheets, pillowcases, blankets) shall be cleaned and sanitized daily, and crib mattresses shall be cleaned and sanitized weekly and when soiled or wet. Linens from beds of older children shall be laundered at least weekly and whenever soiled. However, if a child inadvertently used another child's bedding, you shall change the linen and mattress cover before allowing the assigned child to use it again. All blankets shall be changed and laundered routinely at least once a week.

Cleaning up Body Fluid Spills

Spills of body fluids, including blood, feces, nasal and eyed discharges, saliva, urine, and vomit shall be cleaned up immediately. Wear gloves unless the fluid can be easily contained by the material (e.g., paper tissue or cloth) that is being used to clean it up. Be careful not to get any of the fluid you are cleaning in your eyes, nose, mouth or any open sores you may have. Clean and disinfect any surfaces, such as counter tops and floors, on which body fluids have been spilled. Discard fluid-contaminated material in a plastic bag that has been securely sealed. Mops used to clean up body fluids should be (1) cleaned, (2) rinsed with a disinfecting solution, (3) wrung as dry as possible, and (4) hung to dry completely. Be sure to wash your hands after cleaning up any spill.

Source: The ABCs of Safe and Healthy Child Care: A Handbook for Child Care Providers, Department of Health and Human Services, U.S. Public Health Service, Centers for Disease Control and Prevention (as amended by MSDH).

Title 15: Mississippi State Department of Health
Part 11: Bureau of Child Care Facilities

Subpart 55: Child Care Facilities Licensure

CHAPTER 2: REGULATIONS GOVERNING LICENSURE OF CHILD CARE FACILITIES FOR 12 OR FEWER CHILDREN IN THE OPERATOR'S HOME

Subchapter 1. GENERAL

Rule 2.1.2 Purpose

3. The maximum capacity of a child care facility is determined by the indoor square footage, kitchen square footage, outdoor playground area, and the number of toilets, urinals, and hand washing lavatories, with the lowest capacity determination being controlling. The maximum capacity of each room that is utilized by the children in a child care facility is calculated individually and may not be exceeded except when provided in these regulations.

Source: Miss. Code Ann. §43-20-8.

Rule 2.1.4 Definitions

7. **Director Designee:** Any individual designated to act as the director, having all responsibility and authority of a director, during the director's short-term absence. A director designee shall, at a minimum, be at least 21 years of age, have a high school diploma or GED, and 2 years paid experience in a licensed child care

facility. Director Designees shall not retain sole director authority in a facility for more than 24 total hours per calendar week.

Exception: A facility may have a Director Designee serve for a maximum of 14 consecutive calendar days during a licensure year. This exception may be used once during the licensure year for allowing the director personal leave, i.e., vacation, jury duty, etc.

19. **School Age Child:** A child five years of age or older and eligible to be enrolled in public school.

    Note: A child that is five (5) years old age must have turned five (5) on or before September 1 to be considered a school age child.

Source: Miss. Code Ann. §43-20-8.

Subchapter 2. LICENSURE

Rule 2.2.2 Types of Licenses

1. **Temporary License:** The licensing agency may issue a temporary license to any child care facility. This license will allow the child care facility to operate pending the issuance of a regular license. The temporary license will reflect the date of issuance of the license, the expiration date, and the number of children for which the facility is licensed. The license issue date is the actual date documentation is received and approval for initial temporary license is granted; the expiration date is the last day of the sixth month following the issue date; examples: January 01 through June 30 or January 15 through June 30.

   NOTE: Before a Temporary License is issued and the facility allowed to begin operation the following items must be submitted to and/or verified by the licensing authority, i.e., Mississippi State Department of Health:

   c. Documentation that the facility has a qualified director for the child care program that meets the standards set forth in Rule 1.5.3.

   g. Verification of passing an American National Standards Institute – Conference for Food Protection (ANSI-CFP) Accredited food manager training. Currently the following providers are authorized by the MSDH to provide the required training:

      i. National Restaurant Association, Inc., i.e., ServSafe®,

      ii. Environmental Health Testing, Inc., i.e., National Registry of Food Safety Professionals,

      iii. Prometric, Inc., or

iv. Mississippi State University Extension Service, i.e., TummySafe©.

NOTE: For information on ServSafe® or TummySafe© contact the Mississippi State University Extension Service at - http://msucares.com/health/food_safety/servsafecal.htm. In addition, the Mississippi Restaurant Association (MRA) also provides ServSafe® training. The MRA can be contacted at - www.msra.org. For information on the National Registry of Food Safety Professionals or Prometric, contact the MSDH Office of Environmental Heath at 601-576-7690.

bb. Verification that the owner/operator and director have completed mandatory training on:

i. *Regulations Governing Licensure of Child Care Facilities.*

ii. Directors Orientation.

iii. Playground Safety.

NOTE: Contact the Mississippi State Department of Health, Child Care Facilities Licensure Division at 601-364-2827 for more information on the availability and location of the above referenced training.

Information on available training classes and approved training providers is listed on the MSDH website at http://msdh.ms.gov/msdhsite/static/30,0,183.html. Training classes provided by the Child Care Licensing Division are listed under the heading "MSDH Child Care Provider Training Calendar." Other approved providers of training for child care facility operators and staff are listed under the headings "MSDH Approved Staff Development Trainers" and "Approved Child Care Staff Development Providers."

Source: Miss. Code Ann. §43-20-8.

Subchapter 4. FACILITY POLICY AND PROCEDURES

Rule 2.4.2 Smoking, Tobacco Products, and Prohibited Substances

1. Smoking or the use of tobacco products in any form is prohibited within the physical confines or the campus of a child care facility.

2, The use of alcohol, illegal use of prescription drugs, or use of illegal drugs is prohibited within the physical confines or the campus of a child care facility.

3. Smoking or the use of tobacco products in any form, use of alcohol, illegal use of prescription drugs, or use of illegal drugs by a caregiver is prohibited anytime a child is under the care of such caregiver regardless of location. A caregiver is defined as a person who provides direct care, supervision, and guidance to children in a child care

facility, regardless of title or occupation. This definition includes volunteers and parents.

Source: Miss. Code Ann. §43-20-8.

Rule 2.4.6 Posting of Information: The following items shall be posted conspicuously in the child care facility at all times:

1. Accessible to employees and parents:

   b. Daily activity schedule posted in each classroom.

2. In kitchens:

   a. Menus.

   b. Evacuation route.

Source: Miss. Code Ann. §43-20-8.

Subchapter 5: PERSONNEL REQUIREMENTS

Rule 2.5.3 Child Care Director Qualifications: A child care director shall be least 21 years of age and shall have at a minimum:

4. Two years paid experience as a caregiver in a licensed child care facility, and either (1) a current Child Development Associate (CDA) credential from the Council for Early Childhood Professional Recognition (CECPR), or (2) a Mississippi Department of Human Services (MDHS) Division of Early Childhood Care and Development (DECCD) Child Care Director's Credential or MDHS OCY Child Care Director's Credential, or (3) 24 semester hours credit with a grade of "C" or better from an accredited college or university in courses specific to early childhood.

Source: Miss. Code Ann. §43-20-8.

Rule 2.5.4 Caregivers: Caregivers shall be at least 18 years of age, and shall have at a minimum:

2. A current CECPR Child Development Associate (CDA) credential, a MDHS DECCD Child Care Director's Credential, or MDHS OCY Director's Child Care Credential.

Source: Miss. Code Ann. §43-20-8.

Rule 2.5.7 Use of Director Designee

2. A director designee shall, at a minimum have a high school diploma or GED and two years paid experience in a licensed child care facility or licensed/accredited

kindergarten program. A director designee shall not retain sole director authority in a facility for more than 24 total hours per calendar week.

Exception: Facility may have a Director Designee serve for a maximum of 14 consecutive days during a licensure year. This exception may be used once during the licensure year for allowing the director personal leave, i.e., vacation, jury duty, etc. In addition, if a Director has a medical condition (illness, recovery from surgery, accident, etc.) that requires more than 14 consecutive day's recovery time, the time a Director Designee may be utilized may be extended. The facility is responsible to notify the Child Care Division of such circumstances and provide documentation supporting the need to extend the time the Director Designee needs to be utilized. Approval of this exception is at the discretion of the Child Care Licensure Division.

Source: Miss. Code Ann. §43-20-8.

Rule 2.5.8 Staff Development

1. Owners, Directors and Director Designees. Before a new license to operate is issued, owners, directors, and director designees of the child care facility shall each complete mandatory training on courses covering Child Care Regulations, New Director Orientation, and Playground Safety. If a new director or director designee is appointed by the child care facility after the license issuance, the mandatory training courses shall be completed by such individual(s) within the first six months of appointment. In the sole discretion of the licensing agency, mandatory training may be waived upon the submission of documentation of the individual's prior completion of relevant training.

2. All child care staff, directors, director designees, and caregivers shall be required to complete 15 contact hours of staff development, accrued during the licensure year, annually. The National Association for the Education of Young Children (NAEYC), a leading organization in child care and early childhood education recommends annual training based on the needs of the program and the pre-service qualification of the staff. Training should address the following:

   a. Health and safety.

   b. Child growth and development.

   c. Nutrition.

   d. Planning learning activities.

   e. Guidance and discipline techniques.

   f. Linkages with community services.

   g. Communications and relations with families.

h. Detection of child abuse.

i. Advocacy for early childhood programs.

j. Professional issues.

3. Contact hours for staff development shall be approved by the licensing agency.

4. No more than five contact hours of approved in-service training provided by the child care facility may be counted toward the total number of hours required each year. More than five hours of in-service training may be provided by the child care facility but no more than five hours may be counted toward the required total of 15 hours.

5. All volunteers shall receive, at a minimum, one hour of orientation by the facility director. Such orientation, at a minimum, shall include a review of the child abuse law and reporting requirements, emergency exit procedures, and the facility transportation policy.

Source: Miss. Code Ann. §43-20-8.

Subchapter 7: REPORTS

Rule 1.7.1 Serious Occurrences Involving Children: The child care facility shall enter into the child's record and immediately report, orally to the child's parent and either orally or in writing, via email or fax, to the licensing agency, any serious occurrences involving children. If the child care facility is unable to contact the parent and the licensing official immediately, it shall document this fact, in writing, in the child's record. Oral reports and/or emailed/faxed reports shall be confirmed in writing and mailed within two days of the occurrence. Serious occurrences include accidents or injuries requiring extensive medical care, e.g., child is taken to the doctor or hospital or hospitalizations, alleged abuse and neglect, fire or other emergencies.

Source: Miss. Code Ann. §43-20-8.

Subchapter 8: STAFFING

Rule 2.8.1 General

4. During all hours of operation, including the arrival and departure of children, a child care facility employee shall be present who holds a valid CPR certification, at any location where the children are present. Said certificate shall be issued by an agent recognized by the licensing authority.

5. During all hours of operation, including the arrival and departure of children, a child care facility employee shall be present, at any location where the children are present, who holds a valid first aid certificate. Said certificate shall be issued by an agent recognized by the licensing authority.

Note: When initially acquiring or renewing the CPR and First Aid certifications required in items 4 and 5 above, online (internet, etc.) training is not acceptable. Training must be face-to-face and hands on.

Source: Miss. Code Ann. §43-20-8.

Subchapter 9: PROGRAM OF ACTIVITIES

Rule 2.9.4 Rest Periods

1. For preschool children, rest periods shall be scheduled for a minimum period of one hour, and shall not exceed two and one-half (2½) hours. Infant and toddler nap times shall be individualized to meet each child's needs as sleeping patterns can vary greatly. Half-day programs must provide for rest periods as is appropriate when the children/child indicates or is observed to require some rest time.

5. A safe sleep environment for infants to lower the risk of **Sudden Infant Death Syndrome** (SIDS) is required as follows:

   a. An infant shall be placed on his/her back for sleeping unless written physician orders to the contrary are in the child's record. Sleeping infants shall be within the view of the staff and visually checked regularly when sleeping. Nothing shall obstruct the view of the staff or prevent the staff from clearly seeing infants or children.

   b. Infants shall be dressed in clothing appropriate for sleeping that is designed to keep the infant warm without the possible hazard of head covering or entrapment. The room shall be kept at a draft-free seasonally appropriate temperature of 65 degrees Fahrenheit to 78 degrees Fahrenheit. If a child is already asleep and not dressed in clothing appropriate for sleeping, the caregiver does not need to awaken the infant to change his or her clothes.

   c. Facilities shall use a firm mattress covered by a fitted sheet in a safety-approved crib meeting the Federal requirements of 16 CFR 1219 or 16 CFR 1220).

   d. Items such as but not limited to pillows, blankets, sheepskins, bumpers, soft objects, stuffed toys, loose bedding, etc., shall not be in the crib.

Source: Miss. Code Ann. §43-20-8.

Rule 2.9.6 Infant, and Toddler, and Preschool Activities

1. Infants, toddlers, and preschoolers shall be free to creep, crawl, toddle, and walk as they are physically able.

   a. Cribs, car seats, and high chairs are to be used only for their primary purpose, i.e., cribs for sleeping, car seats for vehicle travel, and high chairs for eating.

b. Providers should limit the use of equipment such as strollers, swings, and bouncer seats/chairs for holding infants while they are awake.

c. Providers should implement activities for toddlers and preschoolers that limit sitting or standing to no more than 30 minutes at a time.

d. Providers should use strollers for toddlers and preschoolers only when necessary.

4. Television viewing, including video tapes and/or other electronic media, is not allowed for infants or for staff in an infant area. The playing of soothing background music in the infant and toddler areas is acceptable.

5. Television viewing, including video tapes and/or other electronic media, cell phone, or other digital media, e.g., computer, iPad®, iTouch®, etc., for toddlers preschoolers (aged two-five) is limited to one hour per day, must be of educational content and a scheduled part of the approved daily plan of activities posted in the facility. The use of CD players to play music is acceptable.

6. In half-day programs, screen time, i.e., television viewing, including video tapes and/or other electronic media, cell phone, or other digital media e.g., computer, iPad®, iTouch®, etc., for preschoolers (aged two-five) is limited to 30 minutes per day, must be of educational content and a scheduled part of the approved daily plan of activities posted in the facility. The use of CD players to play music is acceptable.

   Television viewing by staff is not permitted in areas occupied by children except for the purposes as described in item 5 and 6, above.

Source: Miss. Code Ann. §43-20-8.

Rule 2.9.7 Indoor or Outdoor Physical Activity Child care providers are to provide infants, toddlers, and preschool children with opportunities to be physically active throughout the day.

1. Toddlers and preschool children will be provided the opportunity for light physical activity for at least 15 minutes per hour when children are not involved in their scheduled rest period.

2. Toddlers should accumulate a minimum of 30 minutes of structured moderate to vigorous physical activity per day.

3. Preschoolers should accumulate a minimum of 60 minutes of structured moderate to vigorous physical activity per day.

4. Caregivers should join in and lead the structured moderate to vigorous physical activities in which the children participate.

5. Structured physical activity should involve the performance of large muscle activities.

6. Half-day programs are only required to provide for physical activity for one-half (½) the time as stated above.

NOTE: Examples of moderate physical activity are aerobic dancing, light calisthenics, getting up and down from the floor, dancing, playing on school ground equipment, singing while actively moving about, etc. Examples of vigorous physical activity are running, jumping rope, performing jumping jacks, playing soccer, skipping, etc. Regardless of the activity, it should be age appropriate and within the physical ability limits of the child. Please, understand the above requirements do not mean 30 minutes or 60 minutes vigorous activity at one time. These 30/60 minutes of vigorous physical activity can and should be spread out in short time intervals, (e.g., 5-15 minute intervals) throughout the day.

Source: Miss. Code Ann. §43-20-8.

Subchapter 10: EQUIPMENT, TOYS, AND MATERIALS

Rule 2.10.1 General

7. Television viewing by preschool children shall be limited to one hour per day and shall be educational programming only. Television viewing by staff is not permitted in areas occupied by children except for the purposes as described herein.

Source: Miss. Code Ann. §43-20-8.

Rule 2.10.7 Cribs:

1. The facility shall provide a crib or other similarly commercially purchased bed unit, approved and designated for the purpose of sleeping. Mobile infants, at a minimum of eight months, may be placed on a mat during the transition period of crawling to walking. If such mat is used, it shall be a flame retardant, minimum of two (2) inch commercially purchased sleep mat, especially designated for the purpose of sleeping. All cribs, sleep units, and mats must be maintained clean, in sanitary condition and without chips, holes, fraying, tears, or stains.

2. The use of stackable cribs is prohibited.

Source: Miss. Code Ann. §43-20-8.

Rule 2.10.9 Rest Period Equipment

1. Individual beds, cots, mattresses, pads, or other acceptable equipment shall be used for rest periods, and children shall not be placed directly on the floor for rest periods. Bed linens, such as blankets or sheets, cannot be used in place of a bed, cot, mattress, or pad. These shall be kept in a sanitary condition. Once a sheet or

blanket has been used by a child, it shall not be used by another child until it has been laundered.

6. All infants shall have a crib. The use of "Pack and Plays" for infant sleeping is not allowed. Cribs, cots, and mats are to be a minimum of 24" to 36" apart or separated by a solid barrier. A minimum of 36 inches is recommended.

7. Children are not allowed to sleep in shared places, such as infant seats, strollers, swings, cozy areas, or on tables. If a child falls asleep in such shared place, he or she should me moved immediately to a sanitary individual sleeping place.

Source: Miss. Code Ann. §43-20-8.

Subchapter 11: BUILDINGS AND GROUNDS

Rule 2.11.1 Building

7. The ceiling, floor, and/or floor covering shall be properly installed, kept clean and in good condition, and maintained in good repair. Carpeting is prohibited in kitchen areas.

8. All parts of the child care facility used by children shall be lead-safe, well lighted, ventilated, and free of hazardous or potentially hazardous conditions, such as but not limited to, open stairs and unprotected low windows.

    a. All buildings intended for use as a child care facility constructed before 1965 shall be tested for lead. It is the responsibility of the facility applicant/operator to have a lead hazard screen or lead-based paint risk assessment of the facility done by an individual or company certified as a risk assessor by the Mississippi Commission on Environmental Quality. If the facility is found not to be lead-safe, it will not be allowed to operate as a child care facility until all required corrective measures have been taken and the facility is determined to be lead-safe by a certified risk assessor.

    b. All buildings intended for use as a child care facility, constructed prior to 1978, shall utilize MDEQ Lead Safe Certified individuals or companies for all renovation, repair and maintenance activities which disturb painted surfaces unless the paint to be disturbed has been documented to be lead-free by an individual or company that is MDEQ Lead Safe Certified as a risk assessor or inspector.

    NOTE: It is recommended that child care facility operators contact the Mississippi Department of Environmental Quality at 601-961-5630 regarding any questions they may have about compliance with the laws and regulations related to lead and lead based paint.

17. All child care facilities are to be kept clean and in good repair.

Source: Miss. Code Ann. §43-20-8.

Rule 2.11.2 Indoor Square Footage

2. Rooms in which infants both play and sleep shall have a minimum of 40 square feet of usable space per child. There shall be at least 24" to 36" between each crib. A minimum of 36" is recommended. Cribs with solid ends may be placed end-to-end.

5. Rooms in which toddlers both play and sleep shall have a minimum of 45 square feet of usable space per child. There shall be at least 24" to 36" between each crib. A minimum of 36" is recommended. Cribs with solid ends may be placed end-to-end. However, if stackable cots, mats, or other storable sleeping equipment is utilized for sleeping the room shall be measured using the standard of 35 square feet per child. Should it be determined that the sleeping equipment is not properly stored when not in use the capacity of the room will be determined using 45 square feet per child.

7. Rooms where toddlers sleep but do not play shall have a minimum of 25 square feet of usable space per child. There shall be at least 24" to 36" between each crib. A minimum of 36" is recommended. Cribs with solid ends may be placed end-to-end.

Source: Miss. Code Ann. §43-20-8.

Rule 2.11.4 Kitchens

5. All kitchens and/or food/snack preparation areas in a child care facility shall be inspected as part of the child care inspection process

Source: Miss. Code Ann. §43-20-8.

Rule 2.11.5 Toilets and Hand Washing Lavatories

5. Toilets, urinals, hand washing lavatories, and sinks shall be clean and operational. Bathrooms, hand washing lavatories, and sinks shall be supplied with soap, and individual towels for drying hands. Each toilet shall be supplied with toilet paper.

Source: Miss. Code Ann. §43-20-8.

Rule 2.11.9 Outdoor Playground Area All playgrounds and playground equipment intended for use by children 2-12 years of age shall meet the standards set forth in the *Handbook for Public Playground Safety*, Publication No. 325, published by the U.S. Consumer Product Safety Commission or its successor as shown in Appendix "D."

5. The outdoor playground area shall be free of hazards and not less than 30 feet (measured horizontally parallel to the ground) from electrical transformers, high-voltage power lines, electrical substations, railroad tracks, or sources of toxic fumes or gases. Hazards, including but not limited to air conditioner units and utility mains, meters, tanks, and/or cabling shall be inaccessible to children. Fencing at

least four feet high shall be provided around the outdoor playground area. Fencing higher than four feet but not to exceed eight feet may be required if the licensing authority determines that a hazard exists. Fencing twist wires and bolts shall face away from the playground. As an alternative, exposed bolt ends may be cut to no more than two exposed threads. Then the bolt ends shall be ground/sanded smooth or capped.

Source: Miss. Code Ann. §43-20-8.

Rule 2.11.13 Pest Control All child care facilities are to use a contractor licensed by the State of Mississippi to control pests, e.g., rats, mice, insects, etc. Before a pest control contractor is used, it is the responsibility of the operator to ensure that the pest control contractor is **properly licensed. Use of agricultural chemicals for pest control is strictly prohibited**.

Source: Miss. Code Ann. §43-20-8.

Subchapter 13: NUTRITION, MEALS, FOOD SAFETY

Rule 2.13.3 Refreshments

1. Refreshments may be provided by parents only on a child's birthday or other special celebration such as Valentine's Day, Easter, Christmas, Graduation, etc. Food provided to children, including vending machines at the facility, must meet nutritional guidelines as set forth in Appendix "C."

2. It is recommended that foods for the event that are brought to the facility by parents should be "store bought" and not "home cooked."

3. Food items for the event may include cake, ice cream, fresh fruit, cheese and crackers, etc. Other items, i.e., party favors such as stickers, books, toothbrushes, and crayons, etc., are encouraged.

Source: Miss. Code Ann. §43-20-8.

Rule 2.13.5 Snacks: All snacks shall meet acceptable nutritional standards, as prescribed in Appendix "C" Minimum Standards for Nutritional Care in Child Care Facilities.

Source: Miss. Code Ann. §43-20-8.

Rule 2.12.6 **Food Safety and Food Manager**

1. All kitchens and/or food/snack preparation areas in a child care facility must be inspected as part of the child care inspection process.

2. Each child care facility must have a Certified Food Manager meeting the standards set forth in Rule 1.2.2.1.g. The only exception would be if two facilities had COMPLETELY different operating hours. If this situation exists then could one

Certified Food Manager could serve more than one facility. Should such occur documentation to that affect must be in the each facility's file.

3. A Certified Manager does NOT have to be present at all times. However, a person in charge of food preparation does have to be present at all times

Source: Miss. Code Ann. §43-20-8.

Subchapter 14: DISCIPLINE AND GUIDANCE

Rule 2.14.1 Prohibited Behavior The following behaviors are prohibited by anyone (i.e., parent, caregiver, or child) in all child care settings:

3. Abusive or profane language to include but not limited to yelling at, and/or using harsh tones toward the children or in close proximity (hearing distance) to children.

Source: Miss. Code Ann. §43-20-8.

Subchapter 15: TRANSPORTATION

Rule 2.15.3 Occupant Restraints

1. All children will be properly restrained whenever they are being transported in a motor vehicle.

   a. Every person transporting a child under the age of four (4) years in a passenger motor vehicle, and operated on a public roadway, street or highway, shall provide for the protection of the child by properly using a child passenger restraint device or system meeting applicable federal motor vehicle safety standards, e.g., child safety seat.

   b. Every person transporting a child in a passenger motor vehicle operated on a public roadway, street or highway, shall provide for the protection of the child by properly using a belt positioning booster seat system meeting applicable federal motor vehicle safety standards if the child is at least four (4) years of age, but less than seven (7) years of age and measures less than four (4) feet nine (9) inches in height or weighs less than sixty-five (65) pounds.

   c. **Any** vehicle equipped with seatbelts is subject to the requirements in items a. and b. above

6. An individual seat restraint must be used for each child. The use of an individual seat restraint for two or more children is not allowed.

Source: Miss. Code Ann. §43-20-8.

Subchapter 16: DIAPERING AND TOILETING

Rule 2.16.1 Diaper Changing Area: Each room in which diaper-wearing children play shall contain a diapering area. A diapering area shall contain a hand washing lavatory with hot and cold running water, a smooth and easily cleanable surface, a plastic-lined, covered garbage receptacle, and sanitizing solution. The hand washing lavatories located in a diapering area shall not be included in the ratio of hand washing lavatories to children for determining a child care facility's capacity nor shall they be used for any other purpose. Example: The diaper-changing sink may not be used for washing/rinsing cups, baby bottles, food, dishes, utensils, pacifiers, etc. In addition, the diaper changing area is not to be used as a storage area for anything other than those items used when changing diapers, such as but not limited to, gloves, towels, soap, etc. For proper diaper changing procedure, see Appendix G - PROCEDURE FOR DIAPERING A CHILD.

Source: Miss. Code Ann. §43-20-8.

Subchapter 18: FEEDING OF INFANTS AND TODDLERS

Rule 2.18.3 Formula Storage: Formula shall be labeled with the child's name, dated, and placed in the refrigerator upon arrival.

Source: Miss. Code Ann. §43-20-8.

Subchapter 22: HEARINGS, EMERGENCY SUSPENSIONS, LEGAL ACTIONS AND PENALTIES

Rule 2.22.9 Violations and Penalties

1. Any Class I violation of these regulations, in the discretion of the licensing agency, is punishable by a monetary penalty of five hundred dollars ($500.00) for a first occurrence and a monetary penalty of one thousand dollars ($1000.00) for each subsequent occurrence of the same violation. Each violation is considered a separate offense.

   The following are Class I violations:

   c. Allowing a child to be unattended at a licensed child care facility before or after operating hours. This also includes a child being left alone during operating hours when no staff is present at the facility. Further, a child left unattended outside of a child care facility is also considered to be a Class I violation.

      Should a facility be cited for Class I violations on two separate occasions, it may be cause for suspension or revocation of the facility license for habitual noncompliance with the *Regulations Governing Licensure of Child Care Facilities*.

2. Any Class II violation of these regulations, in the discretion of the licensing agency, is punishable by a monetary penalty of fifty dollars ($50.00) for a first occurrence and a monetary penalty of one hundred dollars ($100.00) for each subsequent

occurrence upon further inspections within the same licensure term. Each violation is considered a separate offense. Example: If a facility is five children over maximum capacity it constitutes five separate Class II violations and would be subject to a two hundred fifty dollar ($250.00) or five hundred dollar ($500.00) monetary penalty, whichever is applicable.

The following are Class II violations:

c. Failure to have a proper criminal record check in a personnel record (Rule 2.5.2 or Rule 2.6.4(1f)).

d. Failure to have a proper child abuse central registry check in a personnel record (Rule 2.5.2 or Rule 2.6.4(1f)).

k. Unauthorized individual assigned administrative and supervisory responsibility for the facility when the director is absent or violation of Rule 2.5.7 Director Designee or Rule 2.8.1(3).

p. Failure to have adequate staff on site holding a valid CPR certificate. (Rule 2.8.1(4)).

q. Failure to have adequate staff on site holding a valid First Aid certificate. (Rule 2.8.1(5))

Should a facility be cited for Class II violations on four separate inspection dates, it may be cause for suspension or revocation of the facility license for habitual noncompliance with the *Regulations Governing Licensure of Child Care Facilities*.

Source: Miss. Code Ann. §43-20-8.

APPENDIX C

Nutritional Standards

Introduction

Meals shall meet the nutritional standards as prescribed in this section. A child care facility shall provide adequate and nutritious meals prepared in a safe and sanitary manner.

Healthy diets help children grow, develop, and perform well in learning environments. Healthy diets contain the amounts of essential nutrients and calories needed to prevent nutritional deficiencies while preventing an excess amount of discretionary calories. Planned meals and snacks provide the right balance of carbohydrate, fat, and protein to reduce risks of chronic

diseases, and are part of a full and productive lifestyle. Such diets are obtained from a variety of foods.

Nutrition and feeding practices for children strongly affect the development and long-term health of the child. Proper nutritional care during the early years is essential for intellectual, social, emotional, and physical growth. It is also necessary that an environment be provided which encourages the development of good food habits.

Meals and vending services shall meet the standards from the Offices of Healthy Schools and Child Nutrition for the Mississippi State Department of Education as well as USDA Food and Nutrition Service guidelines.

THE GOALS OF A CHILD CARE FACILITY IN RELATION TO NUTRITION SHALL BE:

1. Menus shall be nutritionally adequate and consistent with the Dietary Guidelines for Americans.
2. Foods shall be provided in quantities and meal patterns that balance energy and nutrients with children's ages, appetites, activity levels, special needs, and cultural and ethnic differences in food habits.
3. Parents shall be involved in the nutrition component of their child-care facility.
4. A variety of fruits, vegetables, and whole-grain products shall be offered to children for meals and snacks. Mealtime should be used as an opportunity to teach nutrition and/or food concepts.
5. The addition of fat, sugar, and sources of sodium shall be minimal in food preparation and service.
6. Food preparation and service shall be consistent with best practices for food safety and sanitation.
7. Furniture and eating utensils shall be age-appropriate and developmentally suitable to encourage children to accept and enjoy mealtime.
8. Child-care personnel shall encourage positive experiences with food and eating.

9. Caregivers shall receive appropriate training in nutrition, food preparation, and food service.
10. Child-care facilities shall obtain assistance as needed from the Child Care Licensure Division and the supportive staff.
11. Nutrition education for children and for their parents shall be encouraged as a component of the child-care program.
12. Child-care programs must comply with local and state regulations related to wholesomeness of food, food preparation facilities, food safety, and sanitation.
13. Family style dining is encouraged.

Based upon the American Dietetic Association Benchmarks for Nutrition Programs in Child-Care Settings

FEEDING SCHEDULE FOR INFANTS AND CHILDREN ONE YEAR AND OLDER

1. Children's food needs are based on the amount of time spent in the child care facility.

2. Any child in a child care facility at the time of service of a meal or snack will be served that meal or snack

3. Child care facilities that are open 24 hours are required to serve three meals and three snacks.

IF YOU ARE OPEN	**YOU MUST SERVE**		
Nine hours or less	Two snacks and one meal	OR	One snack and two meals
Over nine hours	Two snacks and two meals	OR	Three snacks and one meal
24 hours or during all meals	Three meal and three snacks: one snack should be a late night snack only served to children who are awake.		

I. **Meal Time**

Meals and snacks shall be served at regularly scheduled times each day.

The same meal or snack shall not be served more than one time in any 24-hour (one-day) period.

No more than four and no less than a two and one-half hour period must elapse between the beginning of a meal and a snack.

If breakfast is not served, then a mid-morning snack shall be provided.

Since not all children arrive at the facility at the same time, certain parental options regarding breakfast will be allowed as follows:

1. Parent can feed the child prior to arrival at the child care facility.

2. The parent may have the meal provided by the child care facility.

Note: Either option above must be documented and included in the child's record.

Outside foods shall not be brought into the facility, with the exception of special dietary needs. Exempt facilities are facilities that operate less than six hours and as noted in the regulations, otherwise noted in other sections of the standards. Any outside foods shall meet the Office of Healthy School and MSDH Nutrition Standard guidelines.

II. **Meal Time Environment**

Age appropriate utensils, plates, bowls, cups, and dining area shall be provided.

Children shall not wait longer than fifteen minutes at the table for food to be served.

Sufficient time shall be allowed for children to wash their hands and prepare for the meal.

Mealtime shall be used for socialization, and shall be a relaxed, happy time for the children. No media, e.g., televisions, videos, or DVD's may be viewed during meal and snack times. Family style dining is encouraged with serving platters, bowls, and pitchers on the table so that all present can serve him/her self. Children are encouraged to assist with table setting and bowling up fruits for dessert. All foods served must meet the serving guidelines, and be age appropriate. "Seconds" of foods can be served as indicated at the request of the child or by hunger cues.

A caregiver shall sit and join the children while they are eating. When caregivers are allowed to eat with the children, which is encouraged, staff will eat items that meet nutrition standards. It is suggested that the staff eat the same food items that are served to the children. The staff will encourage social interaction, conversation, and use the mealtime for education purposes. Extra assistance and time shall be provided for slow eaters.

Caregivers shall not eat foods outside of the foods served in the facility in front of the children.

Food shall not be used as a reward or punishment. Children will not be encouraged to "clean your plate," but encouraging children to try two bites of each food served is acceptable.

Additional servings shall be provided for the child who requests more food at a meal or snack. It is at the discretion of the facility and knowledge of the child's eating pattern to allow seconds on food items. This time to teach children on portion control, monitoring extra intake, and better food selections is higher in nutritional value.

Meals and snacks provided by a parent must not be shared with other children, unless a parent is providing baked goods for a celebration or party being held at the operation. Foods for a party or celebration shall meet the Office of Healthy School guidelines.

Children will be permitted in meal preparation areas when under the direct supervision of a staff person, when there is no danger of injury from equipment, and for instruction/teaching purposes only.

III. **Menus**

A complete two-week cycle of menu plans shall be submitted annually to Child Care Licensure as part of the renewal process. Although a minimum complete, two-week cycle menu is required to be submitted annually, child care facilities at their discretion may submit a 4 to 8 week cycle of menu plans.

Daily menus for all meals and snacks prepared and/or served in the child care facility shall be plainly posted. Any substitution shall be of comparable food value and shall be recorded on the menu and dated.

Menus shall be written at least one week in advance. Menus can be completed on a rotating cycle for 4-12 weeks.

Menus shall be posted in the food preparation area and in a conspicuous place in the child care facility at all times.

Menus shall be planned to include food with variety in texture, color, and shape. Record of dated menus served, and any substitutions made, shall be kept on file for a minimum of one year.

New food shall be introduced to help develop good food habits. Introduce only one new food per meal or snack. Foods used for activities/teaching can be included on the written record of foods served for the day.

It is the facility's responsibility to discuss recurring eating problems with the child's parent.

IV. **Child Requiring a Special Diet**

A child requiring a special diet due to medical reasons, allergic reactions, or religious beliefs, shall be provided meals and snacks in accordance with the child's needs. If medical reasons exist for the special diet, a medical prescription from the child's physician stating that the special diet is medically necessary is required. Information required for dietary modifications include:

- Child's full name and date of instructions, updated annually;
- Any dietary restrictions based on the special needs;
- Any special feeding or eating utensils;
- Any foods to be omitted from the diet and any foods to be substituted;
- Limitations of life activities;
- Any other pertinent special needs information;
- What, if anything, needs to be done if the child is exposed to restricted foods.

Religious or ethnic requests should include the above information as needed, plus a certified statement of request based upon the religious or ethnic beliefs of the family.

The facility shall not serve nutrient concentrates and supplements such as protein powders, liquid protein, vitamins, minerals, and other nonfood substances without written instructions from the child's physician.

The child's parent shall meet with the facility staff and/or director to review the written instructions. Such instructions shall list any dietary restrictions/requirements and shall be signed and dated by the child's physician requesting the special diet.

Parents of children with severe restrictions and dietary needs will be given a copy of the facility's menu to pre-select foods to be served. The parents will be responsible for ensuring the accuracy of foods served based upon the preplanned menu.

The child care facility may request the parent to supplement food served by the child care facility. When food is supplied by the parent, the child care facility shall be responsible for assuring that it is properly stored and served to the child in accordance with the diet instructions on file at the child care facility. Any food item that must cooked, shall be prepared by the facility, such as a soy patties. Meals and snacks provided by a parent must not be shared with other children, unless a parent is providing baked goods for a celebration or party being held at the operation.

Records of food intake shall be maintained when indicated by the child's physician.

Vegetarian/Vegan Dietary Requests
Request for a vegetarian/vegan diet shall be accommodated with the same information completed as for dietary modifications. Specialty items may be supplied by the parent to meet nutritional needs. Contact with the nutritionist with MSDH is recommended.

To the extent authorized by Federal laws, the facility may determine that the special nutritional needs of a child cannot be met at the facility and the child may be excluded from admission into the facility.

V. **Food Preparation**

Recipes shall be used and a file of recipes used to prepare the food shall be maintained.

Foods shall be prepared in a form that is easy for children to handle. Bite size pieces and finger foods are suitable. Bones shall be removed from any food served to any child in the child care setting.

Foods shall be prepared as close to serving time as possible to preserve nutrients, flavor, and color.

Food should not be highly seasoned. No extra salt or fats should be added to the foods in cooking. The use of salt free, low fat products is allowed. Children need to learn the flavors of food.
Raw vegetables and foods that may cause choking in young children shall not be served to children less than two years of age.

VI. **Choking Prevention**

A caregiver shall join the children while they are eating. This is an opportunity to teach socialization skills, nutrition education, and is a safety measure to help prevent choking.

Children should be encouraged to eat slowly, take small bites, and chew well before swallowing.

FOODS THAT MAY CAUSE CHOKING

Sausage shaped meats (hot dogs)*	Pop Corn
Hard Candy*	Chips*
Nuts	Thick Pretzels Rods* Thin pretzel sticks and rounds would be allowed
Grapes	Chunks of peanut butter
Gum*	Marshmallows
Dried Fruits	

*Not allowed to be served

To Reduce Choking Hazards

Cook food until soft and cut into short strips, not round slices. Serve other foods in thin slices or small pieces. Remove bones from meat, chicken, and fish, and remove seeds and pits from fruit. With toddlers, cutting foods into "pea" size is recommended.

VII. **Feeding of Infants**

When a pregnant mother is visiting the facility to consider enrollment, breastfeeding should be encouraged.

Breast milk is the recommended feeding for infants and should be encouraged and supported by child care facility staff. The mother may choose to come to the child care facility to nurse her infant, or may choose to supply bottles of expressed breast milk for the child care facility staff to feed the infant. To help a mother be successful with breastfeeding the faculty may:

1. Encourage the mother to come to the facility to breastfeed and provide a
   - Quiet, comfortable and private place to feed;
   - Place to wash the hands;
   - Pillow to support her infant if desired;
   - A comfortable chair, stool for feet while nursing;
   - The mother may opt to nurse while in the infants room;

2. Encourage the mother to provide a back-up supply of frozen breast milk that is labeled with the infant's name and date of expression. The mother's expressed milk shall be used for her infant only. Note: *Excessive shaking of human milk may damage some components that are valuable to the infant.*

The Centers for Disease Control's (CDC) guidelines for storage of frozen expressed breast milk are as follows:

- Freezer compartment of a refrigerator at a temperature of 5° F or -15° C the expressed breast milk can be safely stored for 2 weeks
- Freezer compartment of refrigerator with separate doors 0° F or -18° C the expressed breast milk can be safely stored for 3-6 months
- Freezer compartment of refrigerator with separate doors -4° F or -20° C the expressed breast milk can be safely stored for 6-12 months

Note: Store milk toward the back of the freezer, where temperature is most constant. Milk stored for longer durations in the ranges listed is safe, but some of the lipids in the milk undergo degradation resulting in lower quality. You can go to the CDC website at http://www.cdc.gov/breastfeeding/recommendations/handling_breastmilk.htm for more information.

3. Note: for the breast fed infant, it is acceptable to introduce iron-fortified cereal earlier, at four months if desired, but preferably at 6 months.

A written schedule for feeding the infant shall be provided by the parent and posted for reference by the child care facility staff.

Feeding should be by hunger cues whenever possible. Hunger cues may include:

- Sucking on his tongue, lips, hands, or fingers while asleep
- Moving his arms and hands toward his mouth
- Restless movements while asleep
- Rapid eye movements under his eyelids
- Opening his mouth when his lips are touched
- "Rooting" or searching for your nipple
- Making small sounds

Late hunger cues include:

- Crying
- Fussiness

Signals when an infant is full and feeding should stop:

- "Falls off" your breast, releasing the nipple;
- Falls asleep; or
- Relaxes his body and opens his fists.

Breast milk or formula shall be brought to the child care facility daily, ready to be warmed and fed. Each bottle shall be labeled with the infant's name and the date. No cereal, juice or other foods may be added to the infant's breast milk/formula without a physician's written request, as done for a child with special needs.

Bottles should be warmed for five minutes in a pan of hot, not boiling water; **never** microwave. Before feeding, test the temperature by squirting a couple of drops on the back of your hand.

At the end of each feeding, discard any milk left in the bottle. Staff will send all used bottles home with the parent for proper cleaning and sanitizing.

Age-appropriate solid foods (complimentary foods) may be introduced no sooner than when the child has reached 4 months of age, but ideally at six months. The first food introduced usually is cereal mixed with breast milk or formula (not in a bottle). Adding juice to dry cereal is not allowed.

Commercially prepared ~~B~~ baby foods shall be brought in unopened jars and labeled with the infant's name. Home prepared/blended and home canned infant foods shall not be served. A facility may chose to mash and puree the foods served to older children for the infants 7 months to one year - no additional juice, sauces, or fats may be added to the pureed foods.

Iron-fortified dry infant cereal shall be brought in sealed container premeasured for each feeding and labeled with the infant's name.

Juice shall not be served to infants (children less than 12 months of age).

A small amount of water is encouraged at 8-12 months.

Infants shall be held cradled in the arms during feeding. At no time shall an infant be fed by propping a bottle.

Introduction of solid foods to an infant should be done in consultation with the parent and/or according to the schedule of the Mississippi State Department of Health Infant Feeding Guide.

Solid foods must be spoon-fed. No solid foods shall be fed by bottle or infant feeder without written direction from a physician.

Infants are fed when hungry by noting hunger cues, such as crying, being restless. Feeding is stopped when it is determined that the infant is satisfied. Signs of satiety include, refusing the nurse, turning away from the nipple, falling asleep.

Infants are encouraged to start using a cup at six to nine months, based upon motor skills. When the cup is used, the breast milk or formula may be brought into the center in a clean closed container that is clearly labeled. By the age of one, all children should be off a bottle.

Older infants are encouraged to hold and drink from cups, to use child appropriate eating and serving utensils. Self-feeding should be encouraged. All food should be served in a manner to prevent choking, such as mashing, cutting in small "pea" size portions.

Breast or formula is served to at least 12 months. Cow's milk is not served until age one, unless provided with a written exception from the infant's physician. Children ages one to two, shall be served whole cow's milk, after age two, toddlers should be served fat free/skim milk. *When there are children older than two in the classroom with younger children, all children shall be served the whole milk.*

Guidelines for Milk Storage and Use for All Infants

Storage Method and Temperature	Maximum Amount of Time For Storage
Room (25 C or 77 F)	**4 hours**
Refrigerator (4 C or 39 F)	**48 hours**
Previously thawed –	
Refrigerated milk	**24 hours**
Freezer (-20 C or 0 F)	**3 months**

From the ACOG/AAP publication: Breastfeeding Handbook for Physicians

When centers are reimbursed for meals and must supply formula for their infants, only ready to use formula may be purchased for use. The center may require the parents to supply clean bottles daily. If the center supplies the bottles, there must be provisions in place for the proper cleaning, sanitizing, and drying of all bottles and supplies outside of the infant room.

FEEDING SCHEDULE FOR INFANTS THROUGH ONE YEAR

INFANT'S FOOD NEEDS ARE BASED ON THE AMOUNT OF TIME SPENT IN THE CHILD CARE FACILITY.

ANY INFANT IN A CHILD CARE FACILITY AT THE TIME OF SERVICE OF A MEAL OR SNACK SHALL BE SERVED FOODS APPROPRIATE TO THE AGE.

MEAL/SNACK	BIRTH THROUGH 5 MONTHS	6 THROUGH 12 MONTHS
Breakfast	4-6 fl. oz. breast milk or formula	6-8 fl. oz. breast milk or formula 2-4 Tbsp. prepared infant cereal (optional) 1-4 Tbsp. fruit and/or vegetable(infant or mashed)
Lunch or Supper	4-6 fl. oz. breast	6-8 fl. oz. breast milk

	milk or formula	or formula 2-4 Tbsp. prepared infant cereal (optional) 1-4 Tbsp. fruit and/or vegetable(infant or mashed) 1-4 Tbsp. infant meat
Supplement/Snack	4-6 fl. oz. breast milk or formula	2-4 fl. oz. breast milk or formula 0-1/2 dry bread or 0-2 crackers (optional)

Infant cereal and formulas shall be iron fortified. Infant feeding is individualized after consultation with the parent and by hunger cues from the infant.

MENU PLANNING

Dietary Guidelines for Americans provide assistance in planning meals for ages two and older, which will promote health and prevent disease.

The guidelines, applied to child care feeding are:

1. Offer a variety of foods.

2. Serve meals and snacks that help maintain a healthy weight.

3. Serve fresh, frozen, canned, or dried vegetables, fruits whenever possible, and whole grain products.

4. Avoid excessive fat, saturated fat, and cholesterol. No fried foods or foods with transfats shall be served.

5. Use and serve sugar only in meal preparation and then in moderation. No concentrated sweets, such as candy, syrup, sweetened drinks sodas, or flavored milks may be served.

6. Limit sodium products and the use of salt.

7. Promote an alcohol, tobacco and drug free lifestyle for children, parents, and caregivers.

8. Promote and encourage daily physical activity.

PARTIES AND SPECIAL OCCASIONS

Parties and special party type events should not be held more that once a month. Food for parties should be prepared at the facility when possible. It is recommended that if foods for the event are brought to the facility by parents it should be "store bought" and not "home cooked."

It is suggested that a plain "store bought" cake be served. Other items may include ice cream, fresh fruit, cheese and crackers, and party favors such as stickers, books, toothbrushes, crayons, etc., are encouraged.

Meal Pattern Points to Remember

Keep in mind the following points when you plan menus to meet meal pattern requirements for each of the food groups.

- Plan your meats first. Then select fruits and vegetables, making sure that you have a Vitamin C source daily and a Vitamin A source every other day, or three times a week. Refer to the vitamin tables. Limit starchy vegetables to once/day - these include lima beans, butterbeans, white/sweet potatoes, English peas, black-eye peas, field peas, Crowder peas, cream and whole kernel corn, any dried pea/bean(unless counted for a meat substitute).

- Two vegetables or two fruits may be served at the mealtime, but it is recommended to serve a vegetable and a fruit for variety. Including brightly colored fruits and vegetables, such as tomatoes, broccoli, carrots, greens, strawberries, melon, peaches, will help to meet the vitamin requirements.

- The same meal may not be served more than once in a day (i.e. facilities who are open for lunch and supper may not serve the same meal for both meals).

- Snacks are to be served early afternoon and late afternoon, usually 30-60 minutes before closing. Water can be used as the beverage while foods are served. Snack time is an excellent time to introduce fruits and vegetables.

- Use only 100-percent-strength juice for snack no more than once a day. Give fruit for breakfast/morning snack instead of juice.

- Juice should not be served as part of the snack when milk is the only other component. It is poor menu planning to offer such a combination since it provides too much liquid for children.

- Fruit-flavored drinks, sport drinks, soft drinks, caffeinated beverages, artificially sweetened beverages shall not be served.

- Avoid serving two forms of the same fruit or vegetable in the same day. Example: an orange and orange juice or an apple and applesauce are combinations that should not be used. Serve a variety of vegetables and fruits to ensure a nutritionally well-balanced meal.

- Dry milk shall not be used as a milk beverage, but may be used for cooking purposes.

- Guidelines from USDA FNS (US Department of Agriculture Food Nutrition Supplement) program are used as the standard for menu planning and guidelines. However, when one set

of guidelines are stricter then the stricter guidelines shall be enforced (in comparing MSDH and USDA FNS). Emphasis shall be placed on serving more whole grains and fewer foods high in fat, sugar, and sodium.

- Drinking water shall be freely available to children of all ages and offered at frequent intervals. Extra water served with meals, snacks, and during and after physical activity is encouraged. Facilities may have water fountains in the classroom or dining area. This water source should be encouraged before and after all meals and snacks and takes the place of water served at the table.

- To prevent nutrient and vitamin loss from foods during preparation, cooking, or storage, try to
    - Serve fruits and vegetables raw as appropriate for the age. The risk of choking is greater for the child under the age of two.
    - Steam, boil, or simmer foods in a very small amount of water, or microwave for the shortest time possible.
    - Cook potatoes in their skins. Be sure to wash the dirt off the outside of the potato.
    - Refrigerate prepared juices and store them for no more than two to three days.
    - Store cut raw fruits and vegetables in an airtight container and refrigerate—do not soak or store in water. Nutrients may be diluted from soaking in water. Manufacturer packaged fresh fruits and vegetables are the exception due to packaging processes.

MEAL PATTERNS FOR CHILDREN IN CHILDCARE FACILITIES: BREAKFAST

BREAKFAST	**AGES 1YR-2YR**	**AGES 3 YR-5 YR**	**AGES 6 YR–12 YR**
Milk (Must be fluid, skim/fat free)	½ c.	¾ c.	1 c.
Fruit or Vegetable	¼ c.	½ c.	½ c.
Grains/Breads			
Enriched, Whole Grain Bread	½ slice	½ slice	½ slice
OR			
Enriched Dry Cereal	¼ c. OR 1/3oz.	1/3 c. OR ½ oz.	¾ c. OR 1oz.
OR	¼ c.	1/3 c.	½ c.
Enriched Hot Cereal			
OR	¼ c.	1/3 c.	½ c.
Enriched, Whole Grain Pasta, Noodles, Rice			
Water	½ c.	¾ c.	1 c.

Milk:

Milk shall be served at Breakfast. The milk shall be pasteurized fluid milk, fortified with vitamin A and D. Whole milk is served to infants and toddlers less than 2 years of age. After age two, skim/fat free milk shall be served

Soymilk may be served when indicated with dietary restrictions.

Bread and Bread Alternates:

Use enriched whole-grain breads and bread alternatives. Dry cereals need to be of high fiber and not sugar coated. Hot cereals cannot be instant. Whole grain pasta, noodles, or brown rice may be used occasionally for the breakfast meal.

Breakfast breads may include muffins, biscuit, toast, breakfast bread, no more than weekly pancake or waffle (with no syrup). Crust used as part of the main dish (i.e., for quiche) is allowed as a bread alternate. These items may not be served: doughnuts, honey buns, breakfast tarts, pastries, packaged snack cakes, and other high fat/sugar foods.

Fruits and Vegetables:

Use fresh, canned, dried, or frozen fruit for breakfast. No sugar may be used in the packaging or preparation of the fruit. Canned or frozen fruit should be packed in juice or water - not syrup or sugar packed.

Vegetables, such as tomatoes, may be used occasionally for the breakfast meal. Cultural differences may also dictate that items such as tomatoes, peppers, onions, or salsas may be served with brown rice for the vegetable and bread component at breakfast.

Water:

Water is to be made available with all meals and snacks. Tap or bottled water may used. Facilities may have water fountains in the classroom or dining area. This water source should be encouraged before and after all meals and snacks and takes the place of water served at the table.

Meat and Meat Alternates:

The Meat component is not required for the breakfast meal. IF the facility desires to serve a meat item with the breakfast, that would be allowed. Meats and meat alternates that would be acceptable include eggs, fat free yogurt, low fat cheese, fat free cottage cheese, lean ham, Canadian bacon, and peanut butter.

MEAL PATTERNS FOR CHILDREN IN CHILDCARE FACILITIES: LUNCH/SUPPER/DINNER

LUNCH/SUPPER/DINNER	**AGES 1 YR – 2 YR**	**AGES 3 YR - 5 YR**	**AGES 6 YR - 12 YR**
Meat/Meat Alternate			
Cooked Meat, No Bone	1 oz.	1 ½ oz.	2 oz.
Cooked Dry Beans/Peas	¼ c.	3/8 c.	½ c.
Low Fat Cheese	1 oz.	1 ½ oz.	2 oz.
Egg	1 small	1 medium	1 medium

Peanut Butter Fat Free Yogurt/Cottage Cheese	2 Tbsp. 4 oz/1/2 c.	3 Tbsp. 6 oz./3/4 c.	4 Tbsp. 8 oz./1 c.
Fruit or Vegetable: Must include 2 different foods- 1 vegetable/1 fruit OR 2 vegetable OR 2 fruit	¼ c. total 1/8 c. of 2 foods	½ c. total ¼ c. of 2 foods	3/4 c. total 3/8 c. of 2 foods
Grains/Breads Enriched, Whole Grain Bread OR Enriched Dry Cereal OR Enriched Hot Cereal OR Enriched, Whole Grain Pasta, Noodles, Rice	 ½ slice ¼ c. OR 1/3oz. ¼ c. ¼ c.	 ½ slice 1/3 c. OR ½ oz. 1/3 c. 1/3 c.	 ½ slice ¾ c. OR 1oz. ½ c. ½ c.
Milk (Must be fluid, skim/fat free)	½ c.	¾ c.	1 c.
Water	½ c.	¾ c.	1 c.

Meat and Meat Alternates:

It is recommended to have at least one meatless meal a week. An alternate for meat could be cooked, dried beans, or peas. Cooked dried beans and peas cannot count for a vegetable and meat alternate in the same meal. Canned beans and peas will include the canned kidney, black bean, garbanzo, etc. Note: Canned beans are much higher in sodium/salt.

Edible portion for meats and meat alternates is used. Bone and skin shall not be counted as servings. No bones may be served. Note: 1 ounce of cooked meat is equal to one medium cooked chicken leg wtih bone removed.

Processed, pre-fried meats are not allowed due to the sodium/salt and fat content. Meats not allowed include hot dogs, bologna, bacon, sausage, pancake sticks, small chicken nuggets, fish sticks, and steak fingers.

Processed cheese, such as cheese spread, canned cheese sauce, and cheese in packaged snack crackers is not allowed. Low fat or fat free cheese would be a meat alternate that is allowed.

For menu variety, use meat, and low fat cheese in combination to equal a full serving portion.

It is not recommended serving nuts and seeds due to nut/seed allergies prevalent in the youth today.

Bread and Bread Alternates:

Use enriched whole-grain breads and bread alternatives. Whole grain pasta, noodles, brown rice, wheat rolls, and cornbread are encouraged for the lunch/supper/dinner meals.

Bread alternates may include crust used as part of the main dish (i.e. pizza or quiche), Dry oatmeal used in a fruit crisp.

Pre-fried items, such as hash browns, French fries, and tater tots are not recommended due to the fat and sodium content Any pre-fried item served is limited to once a week.

Cookies, pastries, packaged snack cakes, and other high fat/sugar foods cannot be counted for any bread serving at the lunch/supper/dinner meal.

Fruits and Vegetables:

Must serve a Vitamin C source daily and must serve a Vitamin A source every other day, three times a week – refer to the guidelines. Fruits and vegetables supply these nutrients. More than once vitamin source a day is also encouraged.

Use a different combination of two or more servings for the meal service. Use fresh, canned, dried, or frozen vegetables and fruits for lunch/supper/dinner. No sugar may be used in the packaging or preparation of the fruit. Canned or frozen fruit should be packed in juice or water - not syrup or sugar packed.

Vegetables and fruits may be served as combination dishes (i.e., beef stew with meat, potatoes, carrots, English peas, OR shredded carrot salad with diced pineapple).

Avoid serving two forms of the same fruit or vegetable in the same day. Example: an orange and orange juice or an apple and applesauce are combinations that should not be used. **Serve a variety of vegetables and fruits to ensure a nutritionally well-balanced meal.**

It is highly recommended to either serve at least one raw vegetable and two raw fruits per week, for a meal or snack

Limit serving starchy vegetables to once per meal. Starchy vegetables include white/sweet potatoes, lima beans, butter beans, English peas, black-eye peas, field peas, Crowder peas, cream and whole kernel corn, any dried bean/pea (unless counted for a meat alternate).

Vegetables shall be seasoned with powders, spices, and herbs. The use of high sodium/salt and high fat seasonings should be restricted as much as possible.

Small amounts (less than 1/8 cup) of lettuce, tomatoes, onions, relish, catsup, salsa, jams, jellies, or other condiments may be added for flavor or garnish as "other foods," but do not count as a fruit or vegetable.

Milk:

Milk shall be served at Lunch/Supper/Dinner. The milk shall be pasteurized fluid milk, fortified with vitamin A and D. Whole milk is served to infants and toddlers less than 2 years of age.

After age two, skim/fat free milk shall be served. Flavored milk may be served no more than once a week, using flavoring added to whole/skim/fat free milk.

Soymilk may be served when indicated with dietary restrictions.

Provisions must be made to serve calcium in alternate forms when no milk/substitute may be served to the child due to dietary restrictions.

If a child cannot be served milk for medical reasons or upon parent's instructions, then that child is not to be served high content milk products, e.g., pudding, ice cream, etc.

All milk equivalent used as a meat alternate must be low in fat.

Water:

Water is to be made available at all meals and snacks. Tap or bottled water may used. Facilities may have water fountains in the classroom or dining area. This water source should be encouraged before and after all meals and snacks and takes the place of water served at the table.

MEAL PATTERNS FOR CHILDREN IN CHILDCARE FACILITIES: SNACK

SNACK – MUST SELECT TWO OF THE FOUR COMPONENTS, PLUS WATER	**AGES 1YR-2YR**	**AGES 3 YR-5 YR**	**AGES 6 YR–12 YR**
Meat/Meat Alternate			
Cooked Meat, No Bone	1/2 oz.	½ OZ.	1 oz.
Cooked Dry Beans/Peas	1/8 c.	1/8 c.	1/4 c.
Low Fat Cheese	1/2 oz.	1/2 oz.	1 oz.
Egg	1 small	1 medium	1 medium
Peanut Butter	1 Tbsp.	1 Tbsp.	2 Tbsp.
Fat Free Yogurt/Cottage Cheese	2 oz/1/4 c.	2 oz./1/4 c.	4 oz./1/2 c.
Fruit or Vegetable	1/2 c.	½ c.	3/4 c.
Grains/Breads			
Enriched, Whole Grain Bread	½ slice	½ slice	½ slice
OR			
Enriched Dry Cereal	¼ c. OR 1/3oz.	1/3 c. OR ½ oz.	¾ c. OR 1oz.
OR	¼ c.	1/3 c.	½ c.
Enriched Hot Cereal			
OR	¼ c.	1/3 c.	½ c.
Enriched, Whole Grain Pasta, Noodles, Rice			
Milk (Must be fluid, skim/fat free)	½ c.	1/2 c.	1 c.
Water	½ c.	1 c.	1 c.

Meat and Meat Alternates:

It is recommended to have at least one meatless meal a week. An alternate for meat could be cooked, dried beans or peas. Cooked dried beans and peas cannot count for a vegetable and meat alternate in the same meal. Canned beans and peas will include the canned kidney, black bean, garbanzo, etc. Note: Canned beans are much higher in sodium/salt.

Edible portion for meats and meat alternates is used. Bone and skin shall not be counted as servings. No bones may be served. Note: 1 ounce of cooked meat is equal to one medium cooked chicken leg with bone removed.

Processed, pre-fried meats are not allowed due to the sodium/salt and fat content. Meats not allowed include hot dogs, bologna, bacon, sausage, pancake sticks, small chicken nuggets, fish sticks, and steak fingers.

Processed cheese, such as cheese spread, canned cheese sauce, and cheese in packaged snack crackers is not allowed. Low fat or fat free cheese would be a meat alternate that is allowed.

For menu variety, use meat, and low fat cheese in combination to equal a full serving portion.

Nuts or seeds *may be used* as a meat alternate for snack time, but is not recommended due to nut/seed allergies prevalent in the youth today.

Bread and Bread Alternates:

Use enriched whole-grain breads and bread alternatives. Whole grain pasta, noodles, brown rice, wheat rolls, and cornbread are encouraged for the lunch/supper/dinner meals.

Bread alternates may include crust used as part of the main dish (i.e. pizza or quiche), dry oatmeal used in a fruit crisp.

Pre-fried items, such as hash browns, French fries, tater tots are not recommended due to the fat and sodium content Any pre-fried item served is limited to once a week. Fresh, “homemade” oven baked fries or wedges would be allowed.

Plain, low sugar type cookies may be served occasionally for a snack component. These cookies may include animal crackers, graham crackers, vanilla wafers, oatmeal, oatmeal raisin, peanut butter, and ginger snaps. Items that may not be served include chocolate chip, most packaged cookies/cakes.

Low fat granola bars, cereal bars, whole grain fruit bars, rice krispie treats may be used for a snack bread component. Packaged crackers with cheese/peanut butter filling are discouraged due to the fat/sodium content. The cheese/peanut butter filling cannot count as a meat serving.

Baked chips, chips, popcorn, hard pretzels, and other low-moisture, high sodium foods cannot meet the bread requirement for a snack. Crackers, cheese and vegetable flavored crackers are

allowed. Trail mixes made of various dry, no sugar coated cereals, dried fruits, and small marshmallows are a suggested snack item to meet a bread component.

Fruits and Vegetables:

Use fresh, canned, dried, or frozen vegetables and fruits for snack. No sugar may be used in the packaging or preparation of the fruit. Canned or frozen fruit should be packed in juice or water-not syrup or sugar packed.

Vegetables and fruits may be served as combination dishes (i.e., shredded carrot salad with diced pineapple, fat free yogurt parfait with fresh fruit).

Avoid serving two forms of the same fruit or vegetable in the same day. Example: an orange and orange juice or an apple and applesauce are combinations that should not be used. **Serve a variety of vegetables and fruits to ensure a nutritionally well-balanced meal.**

It is highly recommended to either serve at least one raw vegetable and two raw fruits per week, for a meal or snack. Younger children may have an appropriate substitution due to the choking hazard or the item may be cooked first.

Small amounts (less than 1/8 cup) of lettuce, tomatoes, onions, relish, catsup, salsa, jams, jellies, or other condiments may be added for flavor or garnish as "other foods," but do not count as a fruit or vegetable.

Juice should not be served as part of the snack when milk is the only other component. It is poor menu planning to offer such a combination since it provides too much liquid for children.

100% Fruit juice is allowed once a day. Vitamin fortified fruit juices, such as apple juice, with extra Vitamin C, will not be recognized as a good vitamin source.

The best time to serve this juice would be at the late 4:30/5:30 p.m., snack period.

Milk:

The milk shall be pasteurized fluid milk, fortified with vitamin A and D. Whole milk is served to infants and toddlers less than 2 years or age. After age two, skim/fat free milk shall be served. Flavored milk may be served no more than once a week, using flavoring added to whole/skim/fat free milk.

Soymilk may be served when indicated with dietary restrictions.

Provisions must be made to serve calcium in alternate forms when no milk/substitute may be served to the child due to dietary restrictions.

If a child cannot be served milk for medical reasons or upon parent’s instructions, then that child is not to be served high content milk products, e.g., pudding, ice cream, etc.

All milk equivalents used as a meat alternate must be low in fat.

Water:

Water is to be made available with all meals and snacks. Tap or bottled water may used. Facilities may have water fountains in the classroom or dining area. This water source should be encouraged before and after all meals and snacks and takes the place of water served at the table.

VITAMIN C SOURCES
VITAMIN C SOURCE MUST BE SERVED DAILY
**BEST CHOICE
*GOOD CHOICE
#ACCEPTABLE CHOICE (ONLY COUNT FOR A VITAMIN SOURCE ONCE PER WEEK)

Fruits			**Vegetables**		
Food	Serving Size		Food	Serving Size	
Blackberries	¼ c.	#	Asparagus	¼ c.	*
Blueberries	¼ c.	#	Artichoke	¼ medium	*
Cantaloupe	¼ c	**	Bok Choy	¼ c.	*
Grapefruit	¼ medium	**	Broccoli	¼ c.	**
Grapefruit Juice	½ c	**	Brussel Sprouts	¼ c.	**
Grapefruit-Orange Juice	½ c.	**	Cabbage	¼ c.	*
Guava	¼ c.	**	Cauliflower	¼ c.	*
Honeydew Melon	½ c.	*	Chicory	¼ c.	*
Kiwi	½ medium	**	Collard Greens	¼ c.	*
Mandarin Orange Sections	¼ c.	*	Kale	¼ c.	#
Mango	¼ medium	*	Kohlrabi	¼ c.	**
Melon balls	¼ c.	*			
Orange	½ medium	**	Mustard Greens	¼ c.	#
Orange Juice	¼ c.	**	Okra, not fried	¼ c.	#
Papaya	¼ c.	*	Peppers, green & red	¼ c.	**
Peach, frozen only	¼ c.	**	Potato, White, or Red Skinned Baked only-no instant/fries/tots	½ medium	*
Pineapple	¼ c.	#	Rutabagas	¼c.	#
Pineapple Juice	¼ c.	*	Snow Peas	¼ c.	#
Pineapple-grapefruit or orange juice	¼c.	**	Spinach	¼ c.	#
Raspberries	¼ c.	*	Sweet Potato	½ medium	*
Starfruit	¼ c.	#	Tomato	½ medium	*

Strawberries	¼ c.	**	Tomato or V-8 Juice	¼ c.	**
Tangelo	½ medium	**	Turnip Greens	¼ c.	*
Tangerine	½ medium	**	**Miscellaneous**		
Tropical fruit mix	¼ c.	*			
Watermelon	½ c.	#	Liver, beef	1 oz.	**

VITAMIN A SOURCES
VITAMIN A SOURCE MUST BE SERVED EVERY OTHER DAY, 3 TIMES PER WEEK
** BEST CHOICE
* GOOD CHOICE
#ACCEPTABLE CHOICE (ONLY COUNT FOR A VITAMIN SOURCE ONCE PER WEEK)

Fruits			**Vegetables**		
Food	Serving Size		Food	Serving Size	
Avocado	¼ medium	#	Asparagus	¼ c.	#
Apricot	2 halves	*	Artichoke	½ medium	#
Cantaloupe	¼ c.	*	Bok Choy	¼ c.	*
Cherries, red sour	¼ c.	*	Broccoli	¼ c.	*
Mandarin Orange Segments	¼ c.	*	Brussels Sprouts	¼ c.	*
Mango	¼ medium	**	Carrots	¼ c.	**
Melon Balls	¼ c.	*	Collard Greens	¼ c.	**
Nectarine	¼ medium	#			
Papaya	¼ c.	*	Kale	¼ c.	**
Peaches	¼ c.	#	Lettuce, Green, Romaine, or Red NOT Iceberg (Iceberg is not high in vitamins)	½ c.	#
Plantain	¼ c.	#	Mixed Vegetables	¼ c.	**
Prunes	¼ c.	*	Mustard Greens	¼ c.	**
Tangerine	½ medium	*	Okra, not fried	¼ c.	#
			Peas & Carrots	¼ c.	**
			Peppers, red	¼ c.	**
Miscellaneous			Pumpkin	¼ c.	**
Egg	1 medium	*	Rutabagas	¼ c.	#
Liver, beef	1 oz.	**	Spinach	¼ c.	**
Liver, chicken	1 oz.	**	Sweet Potato	½ medium	**
			Tomato or V-8 Juice	¼ c.	**
			Turnip Greens	¼ c.	**
			Winter Squash, Butternut or Hubbard	¼ c.	**

DENTAL CARE

Dental care is encouraged after each meal service. Parents shall supply toothbrushes and tooth powders or pastes for the child's individual use. Recommendations include replacing the brush every three months or when bristles are bent.

Each toothbrush and powder or paste must be:

- Labeled with the child's full name
- Stored out of children's reach when not in use
- Stored in a manner that prevents the toothbrushes from touching each other during storage

Staff is encouraged to attend trainings on dental care that includes:

- Proper tooth brushing technique as appropriate for the child's age and skills.
- Education to train parents about proper oral healthcare techniques.
- Education for staff and parents to learn the appropriate techniques to feed infants and children that minimize damage to teeth and facial development.

Children must have adult supervision during tooth brushing activities.

GARDENING AND FRESH PRODUCE

Gardening is an excellent opportunity to incorporate physical activity with nutrition education. Facilities are encouraged to have gardening projects with the children. Produce that is grown in the gardens may be washed and handled properly to allow the items to be served for a snack time or education activity.

Purchasing local produce from Mississippi farmers is one way to offer fresh items to the children. This also helps the local economy and raising families' awareness of food sources. The child care center must ensure the safety of foods served. Steps must be taken to demonstrate reasonable care has been taken to ensure the safety of foods purchased. Steps include: Investigating the local farm and production practices, communicating with the local farmer on the needs of the facility including packaging, delivery, and payment procedures, and promoting the use of local produce with families and the community. There are several resources available to use as a safety checklist, such as the Iowa State University Checklist for Retail Purchasing of Local Produce. The checklist is on the www.Healthyms.com website under Nutrition and Farm to School and Preschool.

REFERENCES

Dietary Guidelines for Americans, 2005.
http://www.health.gov/dietaryguidelines/dga2005/document/

United States Department of Agriculture; Food and Nutrition Service; Child and Adult Care Food Program: Nutrition Guidance for Child Care Centers. http://www.fns.usda.gov/cnd/care/ProgramBasics/Meals/Meal_Patterns.

Dietary Reference Intakes, (DRIs), Food and Nutrition board, Institute of Medicine, National Academies

USDA National Nutrient Database for Standard Reference, Release 18.

Promoting good Nutrition and Physical Activity in Child-Care Settings, A Research Brief, May 2007, Robert Wood Johnson Foundation.

Position of the American Dietetic Association: Benchmarks for Nutrition Programs in Child Care Settings, Journal of the American Dietetic Association, June 2005.

Nemours, Health and Prevention Services, Best Practices for Health Eating: A Guide to Help Children Grow Up Healthy, Version 2, 2008

The Wellness Child Care Assessment Tool: A Measure to Assess the Quality of Written Nutrition and Physical Activity Policies, The American Dietetic Associations, December 2011

Institute of Medicine, Child and Adult Care Food Programs: Aligning Dietary Guidance for All, November 4, 2011

Preventing Childhood Obesity in Early Care and Education Programs, American Academy of Pediatric, American Public Health Association, National Resource Centre for Health and Safety in Child Care and Early Education, 2010

APPENDIX E

DISHWASHING PROCEDURE

The best way to wash, rinse, and disinfect dishes and eating utensils is to use a dishwasher with a sanitizing cycle. The final sanitizing rinse of a dishwasher must reach a temperature of 180 degrees. If a dishwasher is not available or cannot be installed, a three-compartment sink will be needed to wash, rinse, and disinfect dishes. A two-compartment or one-compartment sink can be used in child care facilities (located in an occupied residence) licensed for 12 or fewer children by adding one or two dishpans, as needed. In addition to three compartments or dishpans, you will need a dish rack with a drain board to allow dishes and utensils to air dry. To wash, rinse, and disinfect dishes by hand:

- Fill one sink compartment or dishpan with hot tap water and a dishwashing detergent.

- Fill the second compartment or dishpan with hot tap water.
- Fill the third compartment or dishpan with hot tap water and 1-1/2 tablespoons of liquid chlorine bleach for each gallon of water.
- Scrape dishes and utensils and dispose of excess food.
- Immerse scraped dish or utensil in first sink compartment or dishpan and wash thoroughly.
- Rinse dish or utensil in second dishpan of clear water.
- Immerse dish or utensil in third dishpan of chlorinated water for at least 1 minute.
- Place dish or utensil in a rack to air dry.

Note: Food preparation and dishwashing sinks should only be used for these activities and should never be used for routine hand washing or diaper changing activities.

Source: The ABCs of Safe and Healthy Child Care: A Handbook for Child Care Providers, Department of Health and Human Services, U.S. Public Health Service, Centers for Disease Control and Prevention.

APPENDIX G

PROCEDURE FOR DIAPERING A CHILD

Either of the following two procedures is acceptable in a child care facility for licensing purposes. However, some programs may be enrolled in a program that requires Procedure #2.

Procedure #1

1. Organize needed supplies within reach:
    a. fresh diaper and clean clothes (if necessary)
    b. dampened paper towels or premoistened toweletts for Cleaning child's bottom
    c. child's personal, labeled, ointment (if provided by parents)
    d. trash disposal bag

2. Place a disposable covering (such as roll paper) on the portion of the diapering table where you will place the child's bottom. Diapering surfaces should be smooth, nonabsorbent, and easy to clean. Don't use areas that come in close contact with children during play such as couches, floor areas where children play, etc.

3. If using gloves, put them on now.

4. Using only your hands, pick up and hold the child away from your body. Don't cradle

the child in your arms and risk soiling your cloths.

5. Lay the child on the paper or towel.

6. Remove soiled diaper (and soiled clothes).

7. Put disposable diapers in a plastic-lined trash receptacle.

8. Put soiled reusable diaper and /or soiled clothes WITHOUT RINSING in a plastic bag to give to parents.

9. Clean child's bottom with some premoistened disposable toweletts or a dampened, single-use, disposable towel.

10. Place the soiled toweletts or towel in a plastic-lined trash receptacle.

11. If the child needs a more thorough washing, use soap, running water, and paper towels.

12. Remove the disposable covering from beneath the child. Discard it in a plastic-lined receptacle.

13. If you are wearing gloves, remove and dispose of them now in a plastic-lined receptacle.

14. Wash your hands. NOTE: The diapering table should be next to a sink with running water so that you can wash your hands without leaving the diapered child unattended. However, if a sink is not within reach of the diapering table, don't leave the child unattended on the diapering table to go to a sink; wipe your hands with some premoistened toweletts instead. NEVER leave a child alone on the diapering table.

15. Wash the child's hands under running water.

16. Diaper and dress the child.

17. Disinfect the diapering surface immediately after you finish diapering the child.

18. Return the child to the activity area.

19. Clean and disinfect:
    a. The diapering area,
    b. all equipment or supplies that were touched, and
    c. soiled crib or cot, if needed.

20. Wash your hands under running water.

Source: The ABCs of Safe and Healthy Child Care: A Handbook for Child Care Providers, Department of Health and Human Services, U.S. Public Health Service, Centers for Disease Control and Prevention.

Procedure #2

1. Caregiver washes hands

2. Prepare for diapering by gathering wipes, diaper, plastic bag, clean clothes, gloves and other supplies needed. Bring materials to the diaper changing area but not on the changing table

3. Place child on diapering table. Remove clothing to access diaper. If soiled, place clothes into plastic bag.

4. Remove soiled diaper and place into plastic-lined, hands-free covered trash container. (To limit odor, seal in a plastic bag before placing into trash containers.)

5. Use wipes to clean child's bottom from front to back. Use a fresh wipe for each swipe.

6. If gloves were used, remove at this point.

7. Use a wipe to remove soil from adult's hands.

8. Use another wipe to remove soil from child's hands.

9. Throw soiled wipes into plastic-lined, hands-free covered trash container.

10. Put on clean diaper and redress child.

11. Place child at sink and wash hands using the proper hand washing procedure. Return child to a supervised play area without contaminating any surface

12. Spray the surface of the diapering table with soap-water solution to remove gross soil. Wipe clean using a disposable towel and throw away in a plastic-lined, hands-free covered trash container. Be sure the surface is dried completely.

13. Spray the surface of the diapering table with clear water (recommended). Wipe dry using a disposable towel and throw away in a plastic-lined, hands-free covered trash container.

14. Spray the diapering surface with disinfecting strength bleach-water solution (completely cover table; table should glisten) and wait for 2 minutes before wiping dry with a disposable towel or allow to air dry. Dispose of the towel in a plastic-lined, hands-free covered trash container.

15. Adult washes hands using the proper hand washing procedure.

Source: *Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs, 3rd Edition*, American Academy of Pediatrics, American Public Health Association, National Resource Center for Health and Safety in Child Care and Early Education, 2011.

APPENDIX H

CLEANING AND DISINFECTION PROCEDURES

Keeping the child care environment clean and orderly is very important for health, safety, and the emotional well-being of both children and providers. One of the most important steps in reducing the number of germs, and therefore the spread of disease, is the thorough cleaning of surfaces that could possibly pose a risk to children or staff. Surfaces considered most likely to be contaminated are those with which children are most likely to have close contact. These include toys that children put in their mouths, crib rails, food preparation areas, and surfaces likely to become very contaminated with germs, such as diaper-changing areas.

Routine cleaning with soap and water is the most useful method for removing germs from surfaces in the child care setting. Good mechanical cleaning (scrubbing with soap and water) physically reduces the numbers of germs from the surface, just as hand washing reduces the numbers of germs from the hands. Removing germs in the child care setting is especially important for soiled surfaces which cannot be treated with chemical disinfectants, such as some upholstery fabrics.

However, some items and surfaces should receive an additional step, **disinfection**, to kill germs after cleaning with soap and rinsing with clear water. Items that can be washed in a dishwasher or hot cycle of a washing machine do not have to be disinfected because these machines use water that is hot enough for a long enough period of time to kill most germs. The disinfection process uses chemicals that are stronger than soap and water. Disinfection also usually requires soaking or drenching the item for several minutes to give the chemical time to kill the remaining germs. Commercial products that meet the Environmental Protection Agency's (EPA's standards for "hospital grade" germicides (solutions that kill germs) may be used for this purpose. One of the most commonly used chemicals for disinfection in child care settings is a homemade solution of household bleach and water. Bleach is cheap and easy to get. The solution of bleach and water is easy to mix, is nontoxic, is safe if handled properly, and kill most infectious agents. (Be aware that some infectious agents are not killed by bleach. For example, cryptosporidia is only killed ammonia or hydrogen peroxide.)

A solution of bleach and water loses its strength very quickly and easily. It is weakened by organic material, evaporation, heat, and sunlight. Therefore, bleach solutions should be mixed fresh each day to make sure it is effective. Any leftover solution should be discarded and the end of the day. NEVER mix bleach with anything but fresh tap water! Other chemicals may react with bleach and create and release a toxic chlorine gas.

Keep the bleach solution you mix each day in a cool place out of direct sunlight and out of the reach of children. (Although a solution of bleach and water mixed as shown in the accompanying box should not be harmful if accidentally swallowed, you should keep all chemicals away from children.)

If a child care facility uses a commercial cleaner, sanitizer, or disinfectant it must be a U.S. Environmental Protection Agency (EPA)-registered product that has an EPA registration number on the label. Such products shall only be used according to the manufacturer's instructions.

NOTE: All EPA-registered products may not be appropriate for use in a child care facility. Therefore, it is the responsibility of the facility to make sure any product use is appropriate for use in a child care facility.

Recipe for Bleach Disinfecting Solution

(For use on non-porous surfaces such as diaper change tables, counter tops, door and cabinet handles toilets, etc.)

¼ - ¾ cup bleach
1 gallon of cool water

OR

1 - 3 tablespoon bleach
1 quart of cool water

Apply as a spray or poured fresh solution, not by dipping into a container with a cloth that has been in contact with a contaminated surface.

Add the household bleach (5.25% sodium hypochlorite) to the water.

Recipe for Weaker Bleach Sanitizing Solution

For food contact surfaces sanitizing (dishes, utensils, cutting boards high chare trays), toys that children may place in their mouths, and pacifiers.

1 tablespoon bleach
1 gallon cool water

Add the bleach to the water

Washing and Disinfecting Toys

- Infants and toddlers should not share toys. Toys that children (particularly infants and toddlers) put in their mouths should be washed and disinfected between uses by individual children. Toys for infants and toddlers should be chosen with this in mind. If you cannot wash a toy, it probably is not appropriate for an infant or toddler.

- When an infant or toddler finishes playing with a toy, you should retrieve it form the play area and put it in a bin reserved for dirty toys. This bin should be out of reach of the

children. Toys can be washed at a later, more convenient time, and then transferred to a bin for clean toys and safely reused by the other children.

- To wash and disinfect a hard plastic toy:
    - Scrub the toy in warm, soapy water. Use a brush to reach into the crevices.
    - Rinse the toy in clean water.
    - Immerse the toy in a mild bleach solution (see above) and allow it to soak in the solution for 10-20 minutes.
    - Remove the toy from the bleach and rinse well in cool water.
    - Air dry.

- Hard plastic toys that are washed in a dishwasher or cloth toys washed in the hot water cycle of the hot water cycle of a washing machine do not need to be additionally disinfected.

- Children in diapers should only have washable toys. Each group of children should have its own toys. Toys should not be shared with other groups.

- Stuffed toys used by only a single child should be cleaned in a washing machine every week or more frequently if heavily soiled.

- Toys and equipment used by older children and not put into their mouths should be cleaned at least weekly and when obviously soiled. A soap and water wash followed by clear water rinsing and air drying should be adequate. No disinfection is required. (These types of toys and equipment include blocks, dolls, tricycles, trucks, and other similar toys.).

- Do not use wading pools for children in diapers.

- Water play tables can spread germs. To prevent this:
    - Disinfect the table with chlorine bleach solution before filling it with water.
    - Disinfect the all toys to be used in the table with chlorine bleach solution. Avoid using sponge toys. They can trap bacteria and are difficult to clean.
    - Have all children wash their hands before and after playing in the water table.
    - Do not allow children with open sores or wounds to play in the water table.
    - Carefully supervise the children to make sure they do not drink the water.
    - Discard water after play is over

Washing and Disinfecting Bathroom and Other Surfaces

Bathroom surfaces, such as faucet handles and toilet seats, should be washed and disinfected several times a day, if possible, but at least once a day or when soiled. The bleach and water solution or chlorine-containing scouring powers or other commercial bathroom surface cleaner/disinfectants can be used in these areas. Surfaces that infants and young toddlers are likely to touch or mouth, such as crib rails, should be washed with soap and water and disinfected with a nontoxic disinfectant, such as bleach solution, at least once every day, more often if visibly soiled. After the surface has been drenched or soaked with the disinfectant for at least 10 minutes, surfaces likely to be mouthed should be thoroughly wiped with a fresh towel

moistened with tap water. Be sure not to use a toxic cleaner on surfaces likely to be mouthed. Floors should be washed and disinfected at least once a day and whenever soiled.

Washing and Disinfecting Diaper Changing Areas

Diaper Changing Areas should:

- Only be used for changing diapers.
- Be smooth and nonporous, such as Formica (NOT wood).
- Have a raised edge or low flfence around the area to prevent a child from falling off.
- Be next to a sink with hot and cold running water.
- Not be used to prepare food, mix formula, or rinse pacifiers.
- Be easily accessible to providers.
- Be out of reach of children.

Diaper changing areas should be cleaned and disinfected after each diaper changer as follows:

- Clean the surface with soap and water and rinse with clear water.
- Dry the surface with a paper towel.
- Thoroughly wet the surface with the recommended bleach solution.
- Wipe dry with a clean disposable towel or air dry. If using a commercial disinfectant/sanitizer, follow labeled manufacturer's instructions.

Washing and Disinfecting Clothing, Linen, and Furnishings

Do not wash or rinse clothing soiled with fecal material in the child care setting. You may empty solid stool into the toilet, but be careful not to splash or touch toilet water with your hands. Put the soiled clothes in a plastic bag and seal the bag to await pick up by the child's parent or guardian at the end of the day. Always wash your hands after handling soiled clothing.

Explain to parents that washing or rinsing soiled diapers and clothing increases the chances that you and the children may be exposed to germs that cause diseases. Although receiving soiled clothes is not pleasant, remind parents that this policy protects the health of all children and providers. Each item of sleep equipment, including cribs, cots, mattresses, blankets, sheets, etc., should be cleaned and sanitized before being assigned to a specific child. The bedding items should be labeled with that child's name, and should only be used by that child. Children shall not share bedding. Infantsfi linens (sheets, pillowcases, blankets) shall be cleaned and sanitized daily, and crib mattresses shall be cleaned and sanitized weekly and when soiled or wet. Linens from beds of older children shall be laundered at least weekly and whenever soiled. However, if a child inadvertently used another child's bedding, you shall change the linen and mattress cover before allowing the assigned child to use it again. All blankets shall be changed and laundered routinely at least once a week.

Cleaning up Body Fluid Spills

Spills of body fluids, including blood, feces, nasal and eyed discharges, saliva, urine, and vomit shall be cleaned up immediately. Wear gloves unless the fluid can be easily contained by the material (e.g., paper tissue or cloth) that is being used to clean it up. Be careful not to get any of

the fluid you are cleaning in your eyes, nose, mouth or any open sores you may have. Clean and disinfect any surfaces, such as counter tops and floors, on which body fluids have been spilled. Discard fluid-contaminated material in a plastic bag that has been securely sealed. Mops used to clean up body fluids should be (1) cleaned, (2) rinsed with a disinfecting solution, (3) wrung as dry as possible, and (4) hung to dry completely. Be sure to wash your hands after cleaning up any spill.

Source: The ABCs of Safe and Healthy Child Care: A Handbook for Child Care Providers, Department of Health and Human Services, U.S. Public Health Service, Centers for Disease Control and Prevention(as amended by MSDH).

Title 15: Mississippi State Department of Health
Part 11: Bureau of Child Care Facilities

Subpart 55: Child Care Facilities Licensure

CHAPTER 1: REGULATIONS GOVERNING LICENSURE OF CHILD CARE FACILITIES

Subchapter 1: GENERAL

Rule 1.1.2 Purpose

3. The maximum capacity of a child care facility is determined by the indoor square footage, kitchen square footage, outdoor playground area, and the number of toilets, urinals, and hand washing lavatories, with the lowest capacity determination being controlling. The maximum capacity of each room that is utilized by the children in a child care facility is calculated individually and may not be exceeded except when provided in these regulations.

Source: Miss. Code Ann. §43-20-8.

Rule 1.1.4 Definitions

7. **Director Designee** Any individual designated to act as the director, having all responsibility and authority of a director, during the director's short-term absence. A director designee shall, at a minimum, be at least 21 years of age, have a high school diploma or GED, and ~~4~~ 2 years paid experience in a licensed child care facility. Director Designees shall not retain sole director authority in a facility for more than 24 total hours per calendar week.

   EXCEPTION: A facility may have a Director Designee serve for a maximum of 14 consecutive calendar days during a licensure year. This exception may be used once during the licensure year for allowing the director personal leave, i.e., vacation, jury duty, etc.

19. **School Age Child** A child 5 years of age or older and eligible to be enrolled in ~~an accredited school program~~ public school.

Note: A child that is five (5) years old age must have turned five (5) on or before September 1 to be considered a school age child.

Source: Miss. Code Ann. §43-20-8.

Subchapter 2: LICENSURE

Rule 1.2.2 Types of Licenses

1. **Temporary License** The licensing agency may issue a temporary license to any child care facility. This license will allow the child care facility to operate pending the issuance of a regular license. The temporary license will reflect the date of issuance of the license, the expiration date, and the number of children for which the facility is licensed. The license issue date is the actual date documentation is received and approval for initial temporary license is granted; the expiration date is the last day of the sixth month following the issue date; examples: January 01 through June 30 or January 15 through June 30.

NOTE: Before a Temporary License is issued and the facility allowed to begin operation the following items must be submitted to and/or verified by the licensing authority, i.e., Mississippi State Department of Health:

c. ~~A qualified director~~ Documentation that the facility has a qualified director for the child care program that meets the standards set forth in Rule 1.5.3.

g. Verification of passing an American National Standards Institute – Conference for Food Protection (ANSI-CFP) Accredited food manager training. Currently the following providers are authorized by the MSDH to provide the required training: ~~, e.g.,~~

i. National Restaurant Association, Inc., i.e., ServSafe®,

ii. Environmental Health Testing, Inc., i.e., National Registry of Food Safety Professionals,

iii. Prometric, Inc., or

iv. ~~or~~ Mississippi State University Extension Service, i.e., TummySafe©. ~~, or equivalent if applicable.~~

NOTE: For information on ServSafe® or TummySafe© contact the Mississippi State University Extension Service at - http://msucares.com/health/food_safety/servsafecal.htm. In addition, the Mississippi Restaurant Association (MRA) also provides ServSafe® training. ~~and t~~ The MRA can be contacted at - www.msra.org. For information on the

National Registry of Food Safety Professionals or Prometric, contact the MSDH Office of Environmental Heath at 601-576-7690.

dd. Verification that the owner/operator and director have completed mandatory training on:

i. *Regulations Governing Licensure of Child Care Facilities.*

ii. ~~New~~ Directors Orientation.

iii. Playground Safety.

NOTE: Contact the Mississippi State Department of Health, Child Care Facilities Licensure Division at 601-364-2827 for more information on the availability and location of the above referenced training. Information on available training classes and approved training providers is listed on the MSDH website at http://msdh.ms.gov/msdhsite/static/30,0,183.html. Training classes provided by the Child Care Licensing Division are listed under the heading "MSDH Child Care Provider Training Calendar." Other approved providers of training for child care facility operators and staff are listed under the headings "MSDH Approved Staff Development Trainers" and "Approved Child Care Staff Development Providers."

Source: Miss. Code Ann. §43-20-8.

Subchapter 4: FACILITY POLICY AND PROCEDURES

Rule 1.4.2 Smoking, Tobacco Products, and Prohibited Substances

~~1. Smoking, the use of tobacco products in any form, alcohol, or illegal drugs, is prohibited within the physical confines of a child care facility, and on all outdoor playground areas.~~

~~2. If smoking or use of tobacco products is permitted outside the physical confines of a child care facility and away from the outdoor playground areas, it shall be limited to a designated area out of the presence of children. The designated area shall be a place where children, in the course of normal daily activities, may not observe staff and volunteers smoking or using tobacco products. Designated smoking areas shall be clearly identified and posted and shall be provided with receptacles for tobacco product waste~~.

1. Smoking or the use of tobacco products in any form is prohibited within the physical confines or the campus of a child care facility.

2. The use of alcohol, illegal use of prescription drugs, or use of illegal drugs is prohibited within the physical confines or the campus of a child care facility.

3. Smoking or the use of tobacco products in any form, use of alcohol, illegal use of prescription drugs, or use of illegal drugs by a caregiver is prohibited anytime a child

is under the care of such caregiver regardless of location. A caregiver is defined as a person who provides direct care, supervision, and guidance to children in a child care facility, regardless of title or occupation. This definition includes volunteers and parents.

Source: Miss. Code Ann. §43-20-8.

Rule 1.4.6 Posting of Information The following items shall be posted conspicuously in the child care facility at all times:

1. Accessible to employees and parents:

   b. Daily activity schedule posted in each classroom.

   c. ~~Inspection form, if applicable, or~~ Menus and Food Service Permit, if applicable.

2. In kitchens:

   a. Menus.

   b. Evacuation route.

   ~~c. Food Service Permit/Inspection Form.~~

Source: Miss. Code Ann. §43-20-8.

Subchapter 5: PERSONNEL REQUIREMENTS

Rule 1.5.3 Child Care Director Qualifications A child care director shall be least 21 years of age and shall have at a minimum:

4. Two years paid experience as a caregiver in a licensed child care facility, and either (1) a current Child Development Associate (CDA) credential from the Council for Early Childhood Professional Recognition (CECPR), or (2) a Mississippi Department of Human Services (MDHS) Division of Early Childhood Care and Development (DECCD) Child Care Director's Credential or MDHS OCY Child Care Director's Credential, or (3) 24 semester hours credit with a grade of "C" or better from an accredited college or university in courses specific to early childhood.

Source: Miss. Code Ann. §43-20-8.

Rule 1.5.4 Caregivers Caregivers shall be at least 18 years of age, and shall have at a minimum:

2. A current CECPR Child Development Associate (CDA) credential, a current MDHS DECCD Child Care Director's Credential, or MDHS OCY Director's Child Care Credential.

Source: Miss. Code Ann. §43-20-8.

Rule 1.5.7 Use of Director Designee

2. A director designee shall, at a minimum have a high school diploma or GED and ~~four~~ two years paid experience in a licensed child care facility or licensed/accredited kindergarten program. A director designee shall not retain sole director authority in a facility for more than 24 total hours per calendar week.

   EXCEPTION: Facility may have a Director Designee serve for a maximum of 14 consecutive days during a licensure year. This exception may be used once during the licensure year for allowing the director personal leave, i.e., vacation, jury duty, etc. In addition, if a Director has a medical condition (illness, recovery from surgery, accident, etc.) that requires more than 14 consecutive day's recovery time, the time a Director Designee may be utilized may be extended. The facility is responsible to notify the Child Care Division of such circumstances and provide documentation supporting the need to extend the time the Director Designee needs to be utilized. Approval of this exception is at the discretion of the Child Care Licensure Division.

Source: Miss. Code Ann. §43-20-8.

Rule 1.5.8 Staff Development

1. Owners, Directors, and Director Designees - Before a new license to operate is issued, owners, directors and director designees of the child care facility shall complete mandatory training on courses covering Child Care Regulations, ~~New~~ Director Orientation, and Playground Safety. If a new director or director designee is appointed by the child care facility after the license issuance, the mandatory training courses shall be completed by such individual(s) within the first six months of appointment. In the sole discretion of the licensing agency, mandatory training may be waived upon the submission of documentation of the individual's prior completion of relevant training.

2. All child care staff, directors, director designees, and caregivers shall be required to complete 15 contact hours of staff development, accrued during the licensure year, annually. The National Association for the Education of Young Children (NAEYC), a leading organization in child care and early childhood education recommends annual training based on the needs of the program and the pre-service qualifications of the staff. Training should address the following:

   a. Health and safety.

   b. Child growth and development.

   c. Nutrition.

   d. Planning learning activities.

e. Guidance and discipline techniques.

f. Linkages with community services.

g. Communications and relations with families.

h. Detection of child abuse.

i. Advocacy for early childhood programs.

j. Professional issues.

3. Contact hours for staff development shall be approved by the licensing agency.

4. No more than five contact hours of approved in-service training provided by the child care facility may be counted toward the total number of hours required each year. More than five hours of in-service training may be provided by the child care facility but no more than five hours may be counted toward the required total of 15 hours.

5. All volunteers shall receive, at a minimum, one hour of orientation by the facility director. Such orientation at a minimum shall include a review of the child abuse law and reporting requirements, emergency exit procedures, and the facility transportation policy.

~~6. Before a temporary license may be upgraded to a regular, license the facility owner/operator and director shall complete a minimum of three hours of staff development training on the Regulations Governing Licensure of Child Care Facilities, three hours of New Director Orientation, and three hours training in playground safety as provided by the MSDH.~~

Source: Miss. Code Ann. §43-20-8.

Subchapter 7: REPORTS

Rule 1.7.1 Serious Occurrences Involving Children The child care facility shall enter into the child's record and ~~orally report~~ immediately report, orally to the child's parent and either orally or in writing, via email or fax, to the licensing agency, any serious occurrences involving children. If the child care facility is unable to contact the parent and the licensing official immediately, it shall document this fact, in writing, in the child's record. Oral reports and/or emailed/faxed reports shall be confirmed in writing and mailed within two days of the occurrence. Serious occurrences include accidents or injuries requiring extensive medical care, e.g., child is taken to the doctor or hospital or hospitalizations, alleged abuse and neglect, fire or other emergencies.

Source: Miss. Code Ann. §43-20-8.

Subchapter 8: STAFFING

Rule 1.8.1 General

4. During all hours of operation, including the arrival and departure of children, a child care facility employee shall be present who holds a valid CPR certification, at any location where the children are present. Said certificate shall be issued by an agent recognized by the licensing authority.

5. During all hours of operation, including the arrival and departure of children, a child care facility employee shall be present, at any location where the children are present, who holds a valid first aid certificate. Said certificate shall be issued by an agent recognized by the licensing authority.

   Note: When initially acquiring or renewing the CPR and First Aid certifications required in items 4. and 5. above, online (internet, etc.) training is not acceptable. Training must be face-to-face and hands on.

Source: Miss. Code Ann. §43-20-8.

Subchapter 9: PROGRAM OF ACTIVITIES

Rule 1.9.4 Rest Periods

1. For preschool children ~~under six years of age~~, rest periods shall be scheduled for a minimum period of one hour, and shall not exceed two and one-half (2½) hours. Infant and toddler nap times shall be individualized to meet each child's needs as sleeping patterns can vary greatly. Half-day programs must provide for rest periods as is appropriate when the children/child indicates or is observed to require some rest time.

5. A safe sleep environment for infants to lower the risk of **Sudden Infant Death Syndrome** (SIDS) is required as follows:

   a. An infant shall ~~not~~ be placed on his/her back ~~stomach~~ for sleeping unless written physician orders to the contrary are in the child's record. Sleeping infants shall be within the view of the staff and visually checked regularly when sleeping. Nothing shall obstruct the view of the staff or prevent the staff from clearly seeing infants or children.

   b. Infants shall be dressed in clothing appropriate for sleeping that is designed to keep the infant warm without the possible hazard of head covering or entrapment. The room shall be kept at a draft-free seasonally appropriate temperature of 65 degrees Fahrenheit to 78 degrees Fahrenheit. If a child is already asleep and not dressed in clothing appropriate for sleeping, the caregiver does not need to awaken the infant to change his or her clothes.

   c. Facilities shall use a firm mattress covered by a fitted sheet in a safety-approved crib meeting the Federal requirements of 16 CFR 1219 or 16 CFR 1220).

d. Items such as but not limited to pillows, blankets, sheepskins, bumpers, soft objects, stuffed toys, loose bedding, etc., shall not be in the crib.

Source: Miss. Code Ann. §43-20-8.

Rule 1.9.6 Infant, ~~and~~ Toddler, and Preschool Activities

1. Infants, ~~and~~ toddlers, and preschoolers shall be free to creep, crawl, toddle, and walk as they are physically able.

   a. Cribs, car seats, and high chairs are to be used only for their primary purpose, i.e., cribs for sleeping, car seats for vehicle travel, and high chairs for eating.

   b. Providers should limit the use of equipment such as strollers, swings, and bouncer seats/chairs for holding infants while they are awake.

   c. Providers should implement activities for toddlers and preschoolers that limit sitting or standing to no more than 30 minutes at a time.

   d. Providers should use strollers for toddlers and preschoolers only when necessary.

4. Television viewing, including video tapes and/or other electronic media, is not allowed for infants or for staff in an infant area. The playing of soothing background music in the infant area is acceptable.

5. Television viewing, including video tapes and/or other electronic media, cell phone, or other digital media, e.g., computer, iPad®, iTouch®, etc., for toddlers preschoolers (aged two-five) is limited to one hour per day, must be of educational content and a scheduled part of the approved daily plan of activities posted in the facility. The use of CD players to play music is acceptable.

6. In half-day programs, screen time, i.e., television viewing, including video tapes and/or other electronic media, cell phone, or other digital media e.g., computer, iPad®, iTouch®, etc., for preschoolers (aged two-five) is limited to 30 minutes per day, must be of educational content and a scheduled part of the approved daily plan of activities posted in the facility. The use of CD players to play music is acceptable.

Television viewing by staff is not permitted in areas occupied by children except for the purposes as described in item 5 and 6, above.

Source: Miss. Code Ann. §43-20-8.

Rule 1.9.7 Indoor or Outdoor Physical Activity Child care providers are to provide infants, toddlers, and preschool children with opportunities to be physically active throughout the day.

1. Toddlers and preschool children will be provided the opportunity for light physical activity for at least 15 minutes per hour when children are not involved in their scheduled rest period.

2. Toddlers should accumulate a minimum of 30 minutes of structured moderate to vigorous physical activity per day.

3. Preschoolers should accumulate a minimum of 60 minutes of structured moderate to vigorous physical activity per day.

4. Caregivers should join in and lead the structured moderate to vigorous physical activities in which the children participate.

5. Structured physical activity should involve the performance of large muscle activities.

6. Half-day programs are only required to provide for physical activity for one-half (½) the time as stated above.

NOTE: Examples of moderate physical activity are aerobic dancing, light calisthenics, getting up and down from the floor, dancing, playing on school ground equipment, singing while actively moving about, etc. Examples of vigorous physical activity are running, jumping rope, performing jumping jacks, playing soccer, skipping, etc. Regardless of the activity, it should be age appropriate and within the physical ability limits of the child. Please, understand the above requirements do not mean 30 minutes or 60 minutes vigorous activity at one time. These 30/60 minutes of vigorous physical activity can and should be spread out in short time intervals, (e.g., 5-15 minute intervals) throughout the day.

Source: Miss. Code Ann. §43-20-8.

Subchapter 10: EQUIPMENT, TOYS, AND MATERIALS

Rule 1.10.1 General

7. Television viewing by preschool children shall be limited to ~~two hours~~ one hour per day and shall be educational programming only. Television viewing by staff is not permitted in areas occupied by children except for the purposes as described herein.

Source: Miss. Code Ann. §43-20-8.

Rule 1.10.7 Cribs ~~Cribs shall be made of wood, metal, or approved plastic and have secure latching devices. They shall have slats spaced no more than two and three-eighths (2 3/8) inches apart, with a mattress fitted so that no more than two fingers can fit between the mattress and the crib side. Drop-side latches shall securely hold sides in the raised position and shall not be reachable by the child in the crib. Cribs shall not be used with the drop down side down. There shall be no corner post extensions (over 1/16 inch), or cut outs in headboards in the crib. The use of stackable cribs is prohibited.~~

1. The facility shall provide a crib or other similarly commercially purchased bed unit, approved and designated for the purpose of sleeping. Mobile infants, at a minimum of eight months, may be placed on a mat during the transition period of crawling to walking. If such mat is used, it shall be a flame retardant, minimum of two (2) inch commercially purchased sleep mat, especially designated for the purpose of sleeping. All cribs, sleep units, and mats must be maintained clean, in sanitary condition and without chips, holes, fraying, tears, or stains.

2. The use of stackable cribs is prohibited.

Source: Miss. Code Ann. §43-20-8.

Rule 1.10.9 Rest Period Equipment

1. Individual beds, cots, mattresses, pads, or other acceptable equipment shall be used for rest periods, and children shall not be placed directly on the floor for rest periods. Bed linens, such as blankets or sheets, cannot be used in place of a bed, cot, mattress, or pad. These shall be kept in a sanitary condition. Once a sheet or blanket has been used by a child, it shall not be used by another child until it has been laundered.

6. The facility shall provide a crib or other similarly commercially purchased bed unit, approved and designated for the purpose of sleeping. Mobile infants, at a minimum of eight months, may be placed on a mat during the transition period of crawling to walking. If such mat is used, it shall be a flame retardant, minimum of two (2) inch commercially purchased sleep mat, especially designated for the purpose of sleeping. All cribs, sleep units, and mats must be maintained clean, in sanitary condition and without chips, holes, fraying, tears, or stains. Cribs, cots, and mats are to be a minimum of 24" to 36" apart or separated by a solid barrier. A minimum of 36 inches is recommended.

7. Children are not allowed to sleep in shared places, such as infant seats, strollers, swings, cozy areas, or on tables. If a child falls asleep in such shared place, he or she should me moved immediately to a sanitary individual sleeping place.

Source: Miss. Code Ann. §43-20-8.

Subchapter 11 BUILDINGS AND GROUNDS

Rule 1.11.1 Building

7. The ceiling, floor, and/or floor covering shall be properly installed, kept clean and in good condition, and maintained in good repair. Carpeting is prohibited in kitchen areas.

8. All parts of the child care facility used by children shall be lead-safe, well lighted, ventilated, and free of hazardous or potentially hazardous conditions, such as but not limited to, open stairs and unprotected low windows.

a. All buildings intended for use as a child care facility constructed before 1965 shall be tested for lead. It is the responsibility of the facility applicant/operator to have a lead hazard screen or lead-based paint risk assessment of the facility done by an individual or company certified as a risk assessor by the Mississippi Commission on Environmental Quality. If the facility is found not to be lead-safe, it will not be allowed to operate as a child care facility until all required corrective measures have been taken and the facility is determined to be lead-safe by a certified risk assessor.

b. All buildings intended for use as a child care facility, constructed prior to 1978, shall utilize MDEQ Lead Safe Certified individuals or companies for all renovation, repair and maintenance activities which disturb painted surfaces unless the paint to be disturbed has been documented to be lead-free by an individual or company that is MDEQ Lead Safe Certified as a risk assessor or inspector.

NOTE: It is recommended that child care facility operators contact the Mississippi Department of Environmental Quality at 601-961-5630 regarding any questions they may have about compliance with the laws and regulations related to lead and lead based paint.

17. All child care facilities are to be kept clean and in good repair.

Source: Miss. Code Ann. §43-20-8.

Rule 1.11.2 Indoor Square Footage

2. Rooms in which infants both play and sleep shall have a minimum of 40 square feet of usable space per child. There shall be at least ~~two feet~~ 24" to 36" between each crib. A minimum of 36" is recommended. Cribs with solid ends may be placed end-to-end.

5. Rooms in which toddlers both play and sleep shall have a minimum of 45 square feet of usable space per child. There shall be at least ~~two feet~~ 24" to 36" between each crib. A minimum of 36" is recommended. Cribs with solid ends may be placed end-to-end. However, if stackable cots, mats, or other storable sleeping equipment is utilized for sleeping the room shall be measured using the standard of 35 square feet per child. Should it be determined that the sleeping equipment is not properly stored when not in use the capacity of the room will be determined using 45 square feet per child.

7. Rooms where toddlers sleep but do not play shall have a minimum of 25 square feet of usable space per child. There shall be at least ~~two feet~~ 24" to 36" between each crib. A minimum of 36" is recommended. Cribs with solid ends may be placed end-to-end.

Source: Miss. Code Ann. §43-20-8.

Rule 1.11.4 Kitchens

7. All kitchens and/or food/snack preparation areas in a child care facility shall be inspected as part of the child care inspection process.

Source: Miss. Code Ann. §43-20-8.

Rule 1.11.5 Toilets and Hand Washing Lavatories

5. Toilets, urinals, hand washing lavatories, and sinks shall be clean and operational. Bathrooms, hand washing lavatories, and sinks shall be supplied with soap, and individual towels for drying hands. Each toilet shall be supplied with toilet paper.

Source: Miss. Code Ann. §43-20-8.

Rule 1.11.9 Outdoor Playground Area All licensed child care facilities are required to have an adequate outdoor playground area. All playgrounds and playground equipment intended for use by children 2-12 years of age shall meet the standards set forth in the *Handbook for Public Playground Safety*, Publication No. 325, published by the U.S. Consumer Product Safety Commission or its successor as shown in Appendix "D."

5. The outdoor playground area shall be free of hazards and not less than 30 feet (measured horizontally parallel to the ground) from electrical transformers, high-voltage power lines, electrical substations, railroad tracks, or sources of toxic fumes or gases. Hazards, including but not limited to air conditioner units and utility mains, meters, tanks, and/or cabling shall be inaccessible to children. Fencing at least four feet high shall be provided around the outdoor playground area. Fencing higher than four feet but not to exceed eight feet may be required if the licensing authority determines that a hazard exists. Fencing twist wires and bolts shall face away from the playground. As an alternative, exposed bolt ends may be cut to no more than two exposed threads. Then the bolt ends shall be ground/sanded smooth or capped.

Source: Miss. Code Ann. §43-20-8.

Rule 1.11.14 Pest Control

All child care facilities are to use a contractor licensed by the State of Mississippi to control pests, e.g., rats, mice, insects, etc. ~~**Any** pest control contractor used by a child care facility shall be licensed by the State of Mississippi.~~ Before a pest control contractor is used, it is the responsibility of the operator to ensure that the pest control contractor is **properly licensed. Use of agricultural chemicals for pest control is strictly prohibited**.

Source: Miss. Code Ann. §43-20-8.

Subchapter 13 NUTRITION, ~~AND~~ MEALS, FOOD SAFETY

Rule 1.13.3 Refreshments

1. Refreshments may be provided by parents only on a child's birthday or other special celebration such as Valentine's Day, Easter, Christmas, Graduation, etc. Food provided to children, including vending machines at the facility, must meet nutritional guidelines as set forth in Appendix "C."

2. It is recommended that foods for the event that are brought to the facility by parents should be "store bought" and not "home cooked."

3. Food items for the event may include cake, ice cream, fresh fruit, cheese and crackers, etc. Other items, i.e., party favors such as stickers, books, toothbrushes, and crayons, etc., are encouraged.

Source: Miss. Code Ann. §43-20-8.

Rule 1.13.6 Food Safety and Food Manager

1. All kitchens and/or food/snack preparation areas in a child care facility must be inspected as part of the child care inspection process.

2. Each child care facility must have a Certified Food Manager meeting the standards set forth in Rule 1.2.2.1.g. The only exception would be if two facilities had COMPLETELY different operating hours. If this situation exists then could one Certified Food Manager could serve more than one facility. Should such occur documentation to that affect must be in the each facility's file.

3. A Certified Food Manager shall be present during meal preparation. In the absence of the Certified Food Manager, an individual trained in food service must be present.

Source: Miss. Code Ann. §43-20-8.

Subchapter 14: DISCIPLINE AND GUIDANCE

Rule 1.14.3 Prohibited Behavior The following behaviors are prohibited by anyone (i.e., parent, caregiver, or child) in all child care settings:

3. Abusive or profane language to include but not limited to yelling at, and/or using harsh tones toward the children or in close proximity (hearing distance) to children.

Source: Miss. Code Ann. §43-20-8.

Subchapter 15: TRANSPORTATION

Rule 1.15.3 Occupant Restraints

1. All children will be properly restrained whenever they are being transported in a motor vehicle.

a. Every person transporting a child under the age of four (4) years in a passenger motor vehicle, and operated on a public roadway, street or highway, shall provide for the protection of the child by properly using a child passenger restraint device or system meeting applicable federal motor vehicle safety standards, e.g., child safety seat.

b. Every person transporting a child in a passenger motor vehicle operated on a public roadway, street or highway, shall provide for the protection of the child by properly using a belt positioning booster seat system meeting applicable federal motor vehicle safety standards if the child is at least four (4) years of age, but less than seven (7) years of age and measures less than four (4) feet nine (9) inches in height or weighs less than sixty-five (65) pounds.

c. **Any** vehicle equipped with seatbelts is subject to the requirements in items a. and b. above.

6. An individual seat restraint must be used for each child. The use of an individual seat restraint for two or more children is not allowed.

Source: Miss. Code Ann. §43-20-8.

Rule 1.15.4 Staff-to-Child Ratio

2. On vehicles with at GVWR of 10,000 lbs. or more, the staff-to-child ratio shall be one caregiver to each 25 children or fraction thereof. The driver of the vehicle shall not be counted as a caregiver while transporting the children. In facilities that are dually licensed, i.e., licensed to provide care for both preschool and school age children, if the vehicle is only transporting school age children (no preschool children, infants, or toddlers are being transported), the driver may be counted as a caregiver while transporting the school age children.

Source: Miss. Code Ann. §43-20-8.

Subchapter 16: DIAPERING AND TOILETING

Rule 1.16.1 Diaper Changing Area Each room in which diaper-wearing children play shall contain a diapering area. A diapering area shall contain a hand washing lavatory with hot and cold running water, a smooth and easily cleanable surface, a plastic-lined, covered garbage receptacle, and sanitizing solution. The hand washing lavatories located in a diapering area shall not be included in the ratio of hand washing lavatories to children for determining a child care facility's capacity nor shall they be used for any other purpose. Example: The diaper-changing sink may not be used for washing/rinsing cups, baby bottles, food, dishes, utensils, pacifiers, etc. In addition, the diaper changing area is not to be used as a storage area for anything other than those items used when changing diapers, such as but not limited to, gloves, towels, soap, etc. For proper diaper changing procedure, see Appendix G - PROCEDURE FOR DIAPERING A CHILD.

Source: Miss. Code Ann. §43-20-8.

Subchapter 18: FEEDING OF INFANTS AND TODDLERS

Rule 1.18.3 Formula Storage Formula shall be labeled with the child's name, dated, and placed in the refrigerator upon arrival.

Source: Miss. Code Ann. §43-20-8.

Subchapter 22: SCHOOL AGE CARE

Rule 1.22.7 In after school programs, screen time, i.e., television viewing, including video tapes and/or other electronic media, cell phone, or digital media, e.g., iPod®, iPad®, iTouch®, etc., is limited to one hour per day. Screen or media use or other educational electronic equipment is acceptable provided such is for educational purposes.

Source: Miss. Code Ann. §43-20-8.

Subchapter 24: HOURLY CHILD CARE

Rule 1.24.3 Buildings and Grounds

8. Facilities must meet the requirements of Rule 1.2.2.1.k and Rule 1.11.1.8 of these regulations.

Source: Miss. Code Ann. §43-20-8.

Subchapter 25: HEARINGS, EMERGENCY SUSPENSIONS, LEGAL ACTIONS AND PENALTIES

Rule 1.25.9 Violations and Penalties

1. Any Class I violation of these regulations, in the discretion of the licensing agency, is punishable by a monetary penalty of five hundred dollars ($500.00) for a first occurrence and a monetary penalty of one thousand dollars ($1000.00) for each subsequent occurrence of the same violation. Each violation is considered a separate offense.

   The following are Class I violations:

   b. Allowing a child to be unattended at a licensed child care facility before or after operating hours. This also includes a child being left alone during operating hours when no staff is present at the facility. Further, a child left unattended outside of a child care facility is also considered to be a Class I violation.

2. Any Class II violation of these regulations, in the discretion of the licensing agency, is punishable by a monetary penalty of fifty dollars ($50.00) for a first occurrence and a monetary penalty of one hundred dollars ($100.00) for each subsequent occurrence upon further inspections within the same licensure term. Each violation is considered a separate offense. Example: If a facility is five children over

maximum capacity it constitutes five separate Class II violations and would be subject to a two hundred fifty dollar ($250.00) or five hundred dollar ($500.00) monetary penalty, whichever is applicable.

The following are Class II violations:

b. Exceeding licensed maximum capacity (Rule 1.1.2 (3) or Rule 1.11.2, i.e., facility or room capacity.

c. Failure to have a proper criminal record check in a personnel record ~~(Rule 1.16.3 (1f))~~ (Rule 1.5.2 or Rule 1.6.4 (1f)).

d. Failure to have a proper child abuse central registry check in a personnel record ~~(Rule 1.16.3 (1f)~~ (Rule 1.5.2 or Rule 1.6.4 (1f)).

k. Unauthorized individual assigned administrative and supervisory responsibility for the facility when the director is absent or violation of Rule 1.5.6 Use of Director Designee or Rule 1.8.1(3).

p. Failure to have adequate staff on site holding a valid CPR certificate. (Rule 1.8.1(4))

q. Failure to have adequate staff on site holding a valid First Aid certificate. (Rule 1.8.1(5))

r. The presence of any individual who has failed to satisfy the personnel requirements of Subchapter ~~105~~ 5.

u. Altering of documents supporting suitability for employment in a child care facility, i.e., Letter of Suitability for Employment or Child Abuse Central Registry Check. Refer to Subchapter ~~105~~ 5, Personnel Requirements.

Source: Miss. Code Ann. §43-20-8.

APPENDIX C

Nutritional Standards

Introduction

Meals shall meet the nutritional standards as prescribed in this section. A child care facility shall provide adequate and nutritious meals prepared in a safe and sanitary manner.

Healthy diets help children grow, develop, and perform well in learning environments. Healthy diets contain the amounts of essential nutrients and calories needed to prevent nutritional deficiencies while preventing an excess amount of discretionary calories. Planned meals and snacks provide the right balance of carbohydrate, fat, and protein to reduce risks of chronic

diseases, and are part of a full and productive lifestyle. Such diets are obtained from a variety of foods.

Nutrition and feeding practices for children strongly affect the development and long-term health of the child. Proper nutritional care during the early years is essential for intellectual, social, emotional, and physical growth. It is also necessary that an environment be provided which encourages the development of good food habits.

Meals and vending services shall meet the standards from the Offices of Healthy Schools and Child Nutrition for the Mississippi State Department of Education as well as USDA Food and Nutrition Service guidelines.

THE GOALS OF A CHILD CARE FACILITY IN RELATION TO NUTRITION SHALL BE:

1. Menus shall be nutritionally adequate and consistent with the Dietary Guidelines for Americans.
2. Foods shall be provided in quantities and meal patterns that balance energy and nutrients with children's ages, appetites, activity levels, special needs, and cultural and ethnic differences in food habits.
3. Parents shall be involved in the nutrition component of their child-care facility.
4. A variety of fruits, vegetables, and whole-grain products shall be offered to children for meals and snacks. Mealtime should be used as an opportunity to teach nutrition and/or food concepts.
5. The addition of fat, sugar, and sources of sodium shall be minimal in food preparation and service.
6. Food preparation and service shall be consistent with best practices for food safety and sanitation.
7. Furniture and eating utensils shall be age-appropriate and developmentally suitable to encourage children to accept and enjoy mealtime.
8. Child-care personnel shall encourage positive experiences with food and eating.

9. Caregivers shall receive appropriate training in nutrition, food preparation, and food service.
10. Child-care facilities shall obtain assistance as needed from the Child Care Licensure Division and the supportive staff.
11. Nutrition education for children and for their parents shall be encouraged as a component of the child-care program.
12. Child-care programs must comply with local and state regulations related to wholesomeness of food, food preparation facilities, food safety, and sanitation.
13. Family style dining is encouraged.

Based upon the American Dietetic Association Benchmarks for Nutrition Programs in Child-Care Settings

FEEDING SCHEDULE FOR INFANTS AND CHILDREN ONE YEAR AND OLDER

1. Children's food needs are based on the amount of time spent in the child care facility.

2. Any child in a child care facility at the time of service of a meal or snack will be served that meal or snack

3. Child care facilities that are open 24 hours are required to serve three meals and three snacks.

~~**If you are open:** **You must serve:**~~

~~3. Nine hours or less~~ ~~(a) Two snacks and one meal~~
~~***OR***~~
~~(b) One snack and two meals~~

~~4. Over nine hours~~ ~~(a) Two snacks and two meals~~
~~***OR***~~
~~(b) Three snacks and one meal~~

IF YOU ARE OPEN	**YOU MUST SERVE**		
Nine hours or less	Two snacks and one meal	OR	One snack and two meals
Over nine hours	Two snacks and two meals	OR	Three snacks and one meal
24 hours or during all meals	Three meal and three snacks: one snack should be a late night snack only served to children who are awake.		

II. **Meal Time**

Meals and snacks shall be served at regularly scheduled times each day.

The same meal or snack shall not be served more than one time in any 24-hour (one-day) period.

No more than four and no less than a two and one-half hour period must elapse between the beginning of a meal and a snack.

If breakfast is not served, then a mid-morning snack shall be provided.

Since not all children arrive at the facility at the same time, certain parental options regarding breakfast will be allowed as follows:

1. Parent can feed the child prior to arrival at the child care facility.

2. The parent may have the meal provided by the child care facility.

Note: Either option above must be documented and included in the child's record.

Outside foods shall not be brought into the facility, with the exception of special dietary needs. Exempt facilities are facilities that operate less than ~~four~~ six hours and as noted in

the regulations, otherwise noted in other sections of the standards. Any outside foods shall meet the Office of Healthy School and MSDH Nutrition Standard guidelines.

II. **Meal Time Environment**

Age appropriate utensils, plates, bowls, cups, and dining area shall be provided.

Children shall not wait longer than fifteen minutes at the table for food to be served.

Sufficient time shall be allowed for children to wash their hands and prepare for the meal.

Mealtime shall be used for socialization, and shall be a relaxed, happy time for the children. No media, e.g., televisions, videos, or DVD's may be viewed during meal and snack times. Family style dining is encouraged with serving platters, bowls, and pitchers on the table so that all present can serve him/her self. Children are encouraged to assist with table setting and bowling up fruits for dessert. All foods served must meet the serving guidelines, and be age appropriate. "Seconds" of foods can be served as indicated at the request of the child or by hunger cues.

A caregiver shall sit and join the children while they are eating. When caregivers are allowed to eat with the children, which is encouraged, staff will eat items that meet nutrition standards. It is suggested that the staff eat the same food items that are served to the children. The staff will encourage social interaction, conversation, and use the mealtime for education purposes. Extra assistance and time shall be provided for slow eaters.

Caregivers shall not eat foods outside of the foods served in the facility in front of the children.

Food shall not be used as a reward or punishment. Children will not be encouraged to "clean your plate," but encouraging children to try two bites of each food served is acceptable.

~~Children shall be encouraged to eat but not forced to eat.~~

Additional servings shall be provided for the child who requests more food at a meal or snack. It is at the discretion of the facility and knowledge of the child's eating pattern to allow seconds on food items. This time to teach children on portion control, monitoring extra intake, and better food selections is higher in nutritional value.

Meals and snacks provided by a parent must not be shared with other children, unless a parent is providing baked goods for a celebration or party being held at the operation. Foods for a party or celebration shall meet the Office of Healthy School guidelines.

Children will be permitted in meal preparation areas when under the direct supervision of a staff person, when there is no danger of injury from equipment, and for instruction/teaching purposes only.

III. **Menus**

A complete two-week cycle of menu plans shall be submitted annually to Child Care Licensure as part of the renewal process. Although a minimum complete, two-week cycle menu is required to be submitted annually, child care facilities at their discretion may submit a 4 to 8 week cycle of menu plans.

Daily menus for all meals and snacks prepared and/or served in the child care facility shall be plainly posted. Any substitution shall be of comparable food value and shall be recorded on the menu and dated.

Menus shall be written at least one week in advance. Menus can be completed on a rotating cycle for 4-12 weeks.

Menus shall be posted in the food preparation area and in a conspicuous place in the child care facility at all times.

Menus shall be planned to include food with variety in texture, color, and shape. Record of dated menus served, and any substitutions made, shall be kept on file for a minimum of one year.

New food shall be introduced to help develop good food habits. Introduce only one new food per meal or snack. Foods used for activities/teaching can be included on the written record of foods served for the day.

It is the facility's responsibility to discuss recurring eating problems with the child's parent.

IV. **Child Requiring a Special Diet**

A child requiring a special diet due to medical reasons, allergic reactions, or religious beliefs, shall be provided meals and snacks in accordance with the child's needs. If medical reasons exist for the special diet, a medical prescription from the child's physician stating that the special diet is medically necessary is required. Information required for dietary modifications include:

- Child's full name and date of instructions, updated annually;
- Any dietary restrictions based on the special needs;
- Any special feeding or eating utensils;
- Any foods to be omitted from the diet and any foods to be substituted;
- Limitations of life activities;
- Any other pertinent special needs information;
- What, if anything, needs to be done if the child is exposed to restricted foods.

Religious or ethnic requests should include the above information as needed, plus a certified statement of request based upon the religious or ethnic beliefs of the family.

The facility shall not serve nutrient concentrates and supplements such as protein powders, liquid protein, vitamins, minerals, and other nonfood substances without written instructions from the child's physician.

The child's parent shall meet with the facility staff and/or director to review the written instructions. Such instructions shall list any dietary restrictions/requirements and shall be signed and dated by the child's physician requesting the special diet.

Parents of children with severe restrictions and dietary needs will be given a copy of the facility's menu to pre-select foods to be served. The parents will be responsible for ensuring the accuracy of foods served based upon the preplanned menu.

The child care facility may request the parent to supplement food served by the child care facility. When food is supplied by the parent, the child care facility shall be responsible for assuring that it is properly stored and served to the child in accordance with the diet instructions on file at the child care facility. Any food item that must cooked, shall be prepared by the facility, such as a soy patties. Meals and snacks provided by a parent must not be shared with other children, unless a parent is providing baked goods for a celebration or party being held at the operation.

Records of food intake shall be maintained when indicated by the child's physician.

Vegetarian/Vegan Dietary Requests
Request for a vegetarian/vegan diet shall be accommodated with the same information completed as for dietary modifications. Specialty items may be supplied by the parent to meet nutritional needs. Contact with the nutritionist with MSDH is recommended.

To the extent authorized by Federal laws, the facility may determine that the special nutritional needs of a child cannot be met at the facility and the child may be excluded from admission into the facility.

V. **Food Preparation**

Recipes shall be used and a file of recipes used to prepare the food shall be maintained.

Foods shall be prepared in a form that is easy for children to handle. Bite size pieces and finger foods are suitable. Bones shall be removed from any food served to any child in the child care setting.

Foods shall be prepared as close to serving time as possible to preserve nutrients, flavor, and color.

Food should not be highly seasoned. No extra salt or fats should be added to the foods in cooking. The use of salt free, low fat products is allowed. Children need to learn the flavors of food.
Raw vegetables and foods that may cause choking in young children shall not be served to children less than two years of age.

VI. **Choking Prevention**

A caregiver shall join the children while they are eating. This is an opportunity to teach socialization skills, nutrition education, and is a safety measure to help prevent choking.

Children should be encouraged to eat slowly, take small bites, and chew well before swallowing.

FOODS THAT MAY CAUSE CHOKING

Sausage shaped meats (hot dogs)*	Pop Corn
Hard Candy*	Chips*
Nuts	Thick Pretzels Rods* Thin pretzel sticks and rounds would be allowed
Grapes	Chunks of peanut butter
Gum*	Marshmallows
~~Raisins~~	Dried Fruits

*Not allowed to be served

To Reduce Choking Hazards

Cook food until soft and cut ~~hot dogs~~ into ~~short strips, not round slices. Serve other foods in~~ thin slices or small pieces. Remove bones from meat, chicken, and fish, and remove seeds and pits from fruit. With toddlers, cutting foods into "pea" size is recommended.

VII. **Feeding of Infants**

When a pregnant mother is visiting the facility to consider enrollment, breastfeeding should be encouraged.

Breast milk is the recommended feeding for infants and should be encouraged and supported by child care facility staff. The mother may choose to come to the child care facility to nurse her infant, or may choose to supply bottles of expressed breast milk for the child care facility staff to feed the infant. To help a mother be successful with breastfeeding the faculty may:

4. Encourage the mother to come to the facility to breastfeed and provide a
   - Quiet, comfortable and private place to feed;

- Place to wash the hands;
- Pillow to support her infant if desired;
- A comfortable chair, stool for feet while nursing;
- The mother may opt to nurse while in the infants room;

5. Encourage the mother to provide a back-up supply of frozen breast milk that is labeled with the infant's name and date of expression. The mother's expressed milk shall be used for her infant only. Note: *Excessive shaking of human milk may damage some components that are valuable to the infant.*

The Centers for Disease Control's (CDC) guidelines for storage of frozen expressed breast milk are as follows:

- Freezer compartment of a refrigerator at a temperature of 5° F or -15° C the expressed breast milk can be safely stored for 2 weeks
- Freezer compartment of refrigerator with separate doors 0° F or -18° C the expressed breast milk can be safely stored for 3-6 months
- Freezer compartment of refrigerator with separate doors -4° F or -20° C the expressed breast milk can be safely stored for 6-12 months

Note: Store milk toward the back of the freezer, where temperature is most constant. Milk stored for longer durations in the ranges listed is safe, but some of the lipids in the milk undergo degradation resulting in lower quality. You can go to the CDC website at http://www.cdc.gov/breastfeeding/recommendations/handling_breastmilk.htm for more information.

6. Note: for the breast fed infant, it is acceptable to introduce iron-fortified cereal earlier, at four months if desired, but preferably at 6 months.

A written schedule for feeding the infant shall be provided by the parent and posted for reference by the child care facility staff.

Feeding should be by hunger cues whenever possible. Hunger cues may include:

- Sucking on his tongue, lips, hands, or fingers while asleep
- Moving his arms and hands toward his mouth
- Restless movements while asleep
- Rapid eye movements under his eyelids
- Opening his mouth when his lips are touched
- "Rooting" or searching for the nipple
- Making small sounds

Late hunger cues include:

- Crying
- Fussiness

Signals when an infant is full and feeding should stop:

- "Falls off" the breast, releasing the nipple;
- Falls asleep; or
- Relaxes his body and opens his fists.

~~Formula or breast milk~~ Breast milk or formula shall be brought to the child care facility daily, ready to be warmed and fed. Each bottle shall be labeled with the infant's name and the date. No cereal, juice or other foods may be added to the infant's breast milk/formula without a physician's written request, as done for a child with special needs.

Bottles should be warmed for five minutes in a pan of hot, not boiling water; **never** microwave. Before feeding, test the temperature by squirting a couple of drops on the back of your hand.

At the end of each feeding, discard any milk left in the bottle. Staff will send all used bottles home with the parent for proper cleaning and sanitizing.

Age-appropriate solid foods (complimentary foods) may be introduced no sooner than when the child has reached 4 months of age, but ideally at six months. The first food introduced usually is cereal mixed with breast milk or formula (not in a bottle). Adding juice to dry cereal is not allowed.

Commercially prepared ~~B~~ baby foods shall be brought in unopened jars and labeled with the infant's name. Home prepared/blended and home canned infant foods shall not be served. A facility may chose to mash and puree the foods served to older children for the infants 7 months to one year - no additional juice, sauces, or fats may be added to the pureed foods.

Iron-fortified dry infant cereal shall be brought in sealed container premeasured for each feeding and labeled with the infant's name.

Juice ~~is discouraged for~~ shall not be served to infants (children less than 12 months of age).

A small amount of water is encouraged at 8-12 months.

Infants shall be held cradled in the arms during feeding. At no time shall an infant be fed by propping a bottle.

Introduction of solid foods to an infant should be done in consultation with the parent and/or according to the schedule of the Mississippi State Department of Health Infant Feeding Guide.

Solid foods must be spoon-fed. No solid foods shall be fed by bottle or infant feeder without written direction from a physician.

Infants are fed when hungry by noting hunger cues, such as crying, being restless. Feeding is stopped when it is determined that the infant is satisfied. Signs of satiety include, refusing the nurse, turning away from the nipple, falling asleep.

Infants are encouraged to start using a cup at six to nine months, based upon motor skills. When the cup is used, the breast milk or formula may be brought into the center in a clean closed container that is clearly labeled. By the age of one, all children should be off a bottle.

Older infants are encouraged to hold and drink from cups, to use child appropriate eating and serving utensils. Self-feeding should be encouraged. All food should be served in a manner to prevent choking, such as mashing, cutting in small "pea" size portions.

Breast or formula is served to at least 12 months. Cow's milk is not served until age one, unless provided with a written exception from the infant's physician. Children ages one to two, shall be served whole cow's milk, after age two, toddlers should be served fat free/skim milk or 1% milk. *When there are children older than two in the classroom with younger children, all children shall be served the whole milk.*

Guidelines for Milk Storage and Use for All Infants

Storage Method and Temperature	Maximum Amount of Time For Storage
Room (25 C or 77 F)	**4 hours**
Refrigerator (4 C or 39 F)	**48 hours**
Previously thawed –	
Refrigerated milk	**24 hours**
Freezer (-20 C or 0 F)	**3 months**

From the ACOG/AAP publication: Breastfeeding Handbook for Physicians

When centers are reimbursed for meals and must supply formula for their infants, only ready to use formula may be purchased for use. The center may require the parents to supply clean bottles daily. If the center supplies the bottles, there must be provisions in place for the proper cleaning, sanitizing, and drying of all bottles and supplies outside of the infant room.

FEEDING SCHEDULE FOR INFANTS THROUGH ONE YEAR

INFANT'S FOOD NEEDS ARE BASED ON THE AMOUNT OF TIME SPENT IN THE CHILD CARE FACILITY.

ANY INFANT IN A CHILD CARE FACILITY AT THE TIME OF SERVICE OF A MEAL OR SNACK SHALL BE SERVED FOODS APPROPRIATE TO THE AGE.

MEAL/SNACK	BIRTH	~~4 THROUGH 7~~	6 ~~8~~ THROUGH ~~11~~ 12

	THROUGH ~~3~~ 5 MONTHS	~~MONTHS~~	MONTHS
Breakfast	4-6 fl. oz. breast milk or formula	~~4-8 fl. oz. breast milk of formula~~ ~~1-3 Tbsp. prepared infant cereal (optional)~~	6-8 fl. oz. breast milk or formula 2-4 Tbsp. prepared infant cereal (optional) 1-4 Tbsp. fruit and/or vegetable(infant or mashed)
Lunch or Supper	4-6 fl. oz. breast milk or formula	~~4-8 fl. oz. breast milk of formula~~ ~~1-3 Tbsp. prepared infant cereal (optional)~~ ~~1-4 Tbsp. fruit and/or vegetable(infant or mashed)(optional)~~	6-8 fl. oz. breast milk or formula 2-4 Tbsp. prepared infant cereal (optional) 1-4 Tbsp. fruit and/or vegetable(infant or mashed) 1-4 Tbsp. infant meat
Supplement/Snack	4-6 fl. oz. breast milk or formula	~~4-8 fl. oz. breast milk of formula~~	2-4 fl. oz. breast milk or formula 0-1/2 dry bread or 0-2 crackers (optional)

Infant cereal and formulas shall be iron fortified. Infant feeding is individualized after consultation with the parent and by hunger cues from the infant.

MENU PLANNING

Dietary Guidelines for Americans provide assistance in planning meals for ages two and older, which will promote health and prevent disease.

The guidelines, applied to child care feeding are:

1. Offer a variety of foods.

2. Serve meals and snacks that help maintain a healthy weight.

3. Serve fresh, ~~or~~ frozen, canned, or dried vegetables, fruits whenever possible, and whole grain products.

4. Avoid excessive fat, saturated fat, and cholesterol. No fried foods or foods with transfats shall be served.

5. Use and serve sugar only in meal preparation and then in moderation. No concentrated sweets, such as candy, syrup, sweetened drinks sodas, or flavored milks may be served.

6. Limit ~~Use and serve high~~ sodium products ~~only in moderation; and limit~~ and the use of salt.

7. Promote an alcohol, tobacco and drug free lifestyle for children, parents, and caregivers. ~~, and~~

8. Promote and encourage daily physical activity.

PARTIES AND SPECIAL OCCASIONS

Parties and special party type events should not be held more that once a month. Food for parties should be prepared at the facility when possible. It is recommended that if foods for the event are brought to the facility by parents it should be "store bought" and not "home cooked."

It is suggested that a plain "store bought" cake be served. Other items may include ice cream, fresh fruit, cheese and crackers, and party favors such as stickers, books, toothbrushes, crayons, etc., are encouraged.

~~MEAL PATTERNS FOR CHILDREN IN CHILD CARE FACILITIES~~

~~One, all, or any combination of breakfast, lunch, supper, and supplements between meals (snacks) may be served at child care facilities depending upon the age child and the hours of operation. A pattern for each meal is given that will show how total nutrients needs for the day can be met.~~

~~**BREAKFAST**~~	~~**Ages 1yr-2yr**~~	~~**Ages 3yr-5yr**~~	~~**Ages 6yr-12yr**~~
~~Milk *Must be fluid*~~	~~½ c.~~	~~¾ c. *Can change to low fat or skim*~~	~~1 c. *Can use low fat or skim*~~
~~Fruit or 100% Juice~~	~~¼ c.~~	~~½ c.~~	~~½ c.~~
~~Grains/Breads~~ ~~- Enriched bread~~ ~~- Enriched dry cereal~~ ~~- Enriched hot cereal~~ ~~- Enriched pasta, noodle~~	~~1 serving~~ ~~½ slice~~ ~~¼ c. OR ⅓oz.~~ ~~¼ c.~~ ~~¼ c.~~	~~1 serving~~ ~~½ slice~~ ~~⅓ c. OR ½ oz.~~ ~~⅓ c.~~ ~~¼ c.~~	~~1 serving~~ ~~1 slice~~ ~~¾ c. OR 1 oz.~~ ~~½ c.~~ ~~½ c.~~

~~**SNACK**~~ ~~(supplement)~~ ~~Select 2 out of the 4 components.~~	~~**Ages 1yr-2yr**~~	~~**Ages 3yr-5yr**~~	~~**Ages 6yr-12yr**~~
~~Milk *Must be fluid*~~	~~½ c.~~	~~½ c. *Can change to low fat or skim*~~	~~1 c. *Can use low fat or skim*~~
~~Vegetable or Fruit or 100% Juice~~	~~½ c.~~	~~½ c.~~	~~¾ c.~~
~~Meat/Meat Alternate~~ ~~- Cooked Meat, no bone~~	~~½ oz.~~	~~½ oz.~~	~~1 oz.~~

~~Cheese~~ ~~Egg~~ ~~Cooked Dry Beans/Peas~~ ~~Peanut butter~~ ~~Yogurt, plain or sweetened~~	~~½ oz~~ ~~1~~ ~~⅛ c.~~ ~~1 Tbsp.~~ ~~2 oz. OR ¼ c.~~	~~½ oz.~~ ~~1~~ ~~⅛ c.~~ ~~1 Tbsp.~~ ~~2 oz. OR ¼ c.~~	~~1 oz.~~ ~~1~~ ~~¼ c.~~ ~~2 Tbsp.~~ ~~4 oz. OR ½ c.~~
~~Grains/Breads~~ ~~Enriched bread~~ ~~Enriched dry cereal~~ ~~Enriched hot cereal~~ ~~Enriched pasta or noodles~~	~~1 serving~~ ~~½ slice~~ ~~¼ c. OR ⅓ oz.~~ ~~¼ c.~~ ~~¼ c.~~	~~1 serving~~ ~~½ slice~~ ~~⅓ c. OR ½ oz.~~ ~~⅓ c.~~ ~~¼ c.~~	~~1 serving~~ ~~1 slice~~ ~~¾ c. OR 1 oz.~~ ~~½ c.~~ ~~½ c.~~

~~IF milk is used as a component, then juice cannot be served as another component for snack times.~~
~~Meat is cooked and lean without bone.~~
~~Milk includes whole, low fat, skim, buttermilk, or flavored milk. After age two, low fat or skim milk is recommended.~~
~~Nuts or seeds may be used as a meat alternate for snack time, but is not recommended.~~
~~Use whole grain breads, pasta, and rice whenever possible.~~

~~**LUNCH or SUPPER**~~ ~~Select items from each of the 4 components.~~	~~**Ages 1yr-2yr**~~	~~**Ages 3yr-5yr**~~	~~**Ages 6yr-12yr**~~
~~Milk *Must be fluid*~~	~~½ c.~~	~~¾ c. *Can change to low fat or skim*~~	~~1 c. *Can use low fat or skim*~~
~~Vegetable or Fruit or 100% Juice~~ ~~**Must include 2 different foods – 1 fruit & 1 vegetable to total the serving amount**~~	~~¼ c. total~~ ~~⅛ c. vegetable~~ ~~and~~ ~~⅛ c. fruit~~	~~½ c. total~~ ~~¼ c. vegetable~~ ~~and~~ ~~¼ c. fruit~~	~~¾ c. total~~ ~~⅜ c.vegetable~~ ~~and~~ ~~⅜ c. fruit~~
~~Meat/Meat Alternate~~ ~~Cooked Meat, no bone~~ ~~Cheese~~ ~~Egg~~ ~~Cooked Dry Beans/Peas~~ ~~Peanut butter~~ ~~Yogurt, plain or sweetened~~	 ~~1 oz.~~ ~~1 oz~~ ~~1~~ ~~¼ c.~~ ~~2 Tbsp.~~ ~~4 oz. OR ½ c.~~	 ~~1½ oz.~~ ~~1½ oz.~~ ~~1~~ ~~⅜ c.~~ ~~3 Tbsp.~~ ~~6 oz. OR ¾ c.~~	 ~~2 oz.~~ ~~2 oz.~~ ~~1~~ ~~½ c.~~ ~~4 Tbsp.~~ ~~8 oz. OR 1 c.~~
~~Grains/Breads~~ ~~Enriched bread~~ ~~Enriched dry cereal~~ ~~Enriched hot cereal~~ ~~Enriched pasta or noodles~~	~~1 serving~~ ~~½ slice~~ ~~¼ c. OR ⅓ oz.~~ ~~¼ c.~~ ~~¼ c.~~	~~1 serving~~ ~~½ slice~~ ~~⅓ c. OR ½ oz.~~ ~~⅓ c.~~ ~~¼ c.~~	~~1 serving~~ ~~1 slice~~ ~~¾ c. OR 1 oz.~~ ~~½ c.~~ ~~½ c.~~

~~Must serve a Vitamin C source daily – refer to the guidelines.~~
~~Must serve a Vitamin A source every other day, three times a week – refer to the guidelines.~~

~~Two vegetables or two fruits may be served at the mealtime, but it is recommended to serve a vegetable and a fruit for variety.~~

Meal Pattern Points to Remember

Keep in mind the following points when you plan menus to meet meal pattern requirements for each of the food groups.

- Plan your meats first. Then select fruits and vegetables, making sure that you have a Vitamin C source daily and a Vitamin A source every other day, or three times a week. Refer to the vitamin tables. Limit starchy vegetables to once/day - these include lima beans, butterbeans, white/sweet potatoes, English peas, black-eye peas, field peas, Crowder peas, cream and whole kernel corn, any dried pea/bean(unless counted for a meat substitute).

- Two vegetables or two fruits may be served at the mealtime, but it is recommended to serve a vegetable and a fruit for variety. Including brightly colored fruits and vegetables, such as tomatoes, broccoli, carrots, greens, strawberries, melon, peaches, will help to meet the vitamin requirements.

- The same meal may not be served more than once in a day (i.e. facilities who are open for lunch and supper may not serve the same meal for both meals).

- Snacks are to be served ~~mid-morning (if required) and mid~~ early afternoon and late afternoon, usually 30-60 minutes before closing. Water can be used as the beverage while foods are served. Snack time is an excellent time to introduce fruits and vegetables.

- Use only 100-percent-strength juice for snack no more than once a day. Give fruit for breakfast/morning snack instead of juice.

- Juice should not be served as part of the snack when milk is the only other component. It is poor menu planning to offer such a combination since it provides too much liquid for children.

- Fruit-flavored drinks, sport drinks, soft drinks, caffeinated beverages, artificially sweetened beverages shall not be served.

- Avoid serving two forms of the same fruit or vegetable in the same day. Example: an orange and orange juice or an apple and applesauce are combinations that should not be used. Serve a variety of vegetables and fruits to ensure a nutritionally well-balanced meal.

- Dry milk shall not be used as a milk beverage, but may be used for cooking purposes.

- Guidelines from USDA FNS (US Department of Agriculture Food Nutrition Supplement) program are used as the standard for menu planning and guidelines. However, when one set of guidelines are stricter then the stricter guidelines shall be enforced (in comparing MSDH and USDA FNS). Emphasis shall be placed on serving more whole grains and fewer foods high in fat, sugar, and sodium.

- Drinking water shall be freely available to children of all ages and offered at frequent intervals. Extra water served with meals, snacks, and during and after physical activity ~~playtime~~ is encouraged. Facilities may have water fountains in the classroom or dining area. This water source should be encouraged before and after all meals and snacks and takes the place of water served at the table.

- To prevent nutrient and vitamin loss from foods during preparation, cooking, or storage, try to
  - Serve fruits and vegetables raw as appropriate for the age. The risk of choking is greater for the child under the age of two.
  - Steam, boil, or simmer foods in a very small amount of water, or microwave for the shortest time possible.
  - Cook potatoes in their skins. Be sure to wash the dirt off the outside of the potato.
  - Refrigerate prepared juices and store them for no more than two to three days.
  - Store cut raw fruits and vegetables in an airtight container and refrigerate - do not soak or store in water. Nutrients may be diluted from soaking in water. Manufacturer packaged fresh fruits and vegetables are the exception due to packaging processes.

MEAL PATTERNS FOR CHILDREN IN CHILDCARE FACILITIES: BREAKFAST

BREAKFAST	**AGES 1YR-2YR**	**AGES 3 YR-5 YR**	**AGES 6 YR–12 YR**
Milk (Must be fluid, skim/fat free), or 1% milk)	½ c. (whole milk)	¾ c.	1 c.
Fruit or Vegetable	¼ c.	½ c.	½ c.
Grains/Breads Enriched, Whole Grain Bread OR Enriched Dry Cereal OR Enriched Hot Cereal OR Enriched, Whole Grain Pasta, Noodles, Rice	 ½ slice ¼ c. OR 1/3oz. ¼ c. ¼ c.	 ½ slice 1/3 c. OR ½ oz. 1/3 c. 1/3 c.	 ½ slice ¾ c. OR 1oz. ½ c. ½ c.
Water	½ c.	¾ c.	1 c.

Milk:

Milk shall be served at Breakfast. The milk shall be pasteurized fluid milk, fortified with vitamin A and D. Whole milk is served to infants and toddlers less than 2 years of age. After age two, skim/fat free or 1% milk shall be served

Soymilk may be served when indicated with dietary restrictions.

Bread and Bread Alternates:

Use enriched whole-grain breads and bread alternatives. Dry cereals need to be of high fiber and not sugar coated. Hot cereals cannot be instant. Whole grain pasta, noodles, or brown rice may be used occasionally for the breakfast meal.

Breakfast breads may include muffins, biscuit, toast, breakfast bread, no more than weekly pancake or waffle (with no syrup). Crust used as part of the main dish (i.e., for quiche) is allowed as a bread alternate. These items may not be served: doughnuts, honey buns, breakfast tarts, pastries, packaged snack cakes, and other high fat/sugar foods.

Fruits and Vegetables:

Use fresh, canned, dried, or frozen fruit for breakfast. No sugar may be used in the packaging or preparation of the fruit. Canned or frozen fruit should be packed in juice or water - not syrup or sugar packed.

Vegetables, such as tomatoes, may be used occasionally for the breakfast meal. Cultural differences may also dictate that items such as tomatoes, peppers, onions, or salsas may be served with brown rice for the vegetable and bread component at breakfast.

Water:

Water is to be made available with all meals and snacks. Tap or bottled water may used. Facilities may have water fountains in the classroom or dining area. This water source should be encouraged before and after all meals and snacks and takes the place of water served at the table.

Meat and Meat Alternates:

The Meat component is not required for the breakfast meal. IF the facility desires to serve a meat item with the breakfast, that would be allowed. Meats and meat alternates that would be acceptable include eggs, fat free yogurt, low fat cheese, fat free cottage cheese, lean ham, Canadian bacon, and peanut butter. Bacon is not considered a meat and shall not be served due to the high fat and high sodium content.

MEAL PATTERNS FOR CHILDREN IN CHILDCARE FACILITIES: LUNCH/SUPPER/DINNER

LUNCH/SUPPER/DINNER	AGES 1YR-2YR	AGES 3 YR-5 YR	AGES 6 YR–12 YR
Meat/Meat Alternate			
Cooked Meat, No Bone	1 oz.	1 ½ oz.	2 oz.
Cooked Dry Beans/Peas	¼ c.	3/8 c.	½ c.
Low Fat Cheese	1 oz.	1 ½ oz.	2 oz.
Egg	1 small	1 medium	1 medium
Peanut Butter	2 Tbsp.	3 Tbsp.	4 Tbsp.

Fat Free Yogurt/Cottage Cheese	4 oz/1/2 c.	6 oz./3/4 c.	8 oz./1 c.
Fruit or Vegetable: Must include 2 different foods- 1 vegetable/1 fruit OR 2 vegetable OR 2 fruit	¼ c. total 1/8 c. of 2 foods	½ c. total ¼ c. of 2 foods	3/4 c. total 3/8 c. of 2 foods
Grains/Breads Enriched, Whole Grain Bread OR Enriched Dry Cereal OR Enriched Hot Cereal OR Enriched, Whole Grain Pasta, Noodles, Rice	 ½ slice ¼ c. OR 1/3oz. ¼ c. ¼ c.	 ½ slice 1/3 c. OR ½ oz. 1/3 c. 1/3 c.	 ½ slice ¾ c. OR 1oz. ½ c. ½ c.
Milk (Must be fluid, skim/fat free), or 1% milk)	½ c. (whole milk)	¾ c.	1 c.
Water	½ c.	¾ c.	1 c.

Meat and Meat Alternates:

It is recommended to have at least one meatless meal a week. An alternate for meat could be cooked, dried beans, or peas. Cooked dried beans and peas cannot count for a vegetable and meat alternate in the same meal. Canned beans and peas will include the canned kidney, black bean, garbanzo, etc. Note: Canned beans are much higher in sodium/salt.

Edible portion for meats and meat alternates is used. Bone and skin shall not be counted as servings. No bones may be served. Note: 1 ounce of cooked meat is equal to one medium cooked chicken leg with bone removed.

Processed, pre-fried meats are not allowed due to the sodium/salt and fat content. Meats not allowed include hot dogs, corndogs, bologna, bacon, sausage, pancake sticks, small chicken nuggets, fish sticks, and steak fingers.

Processed cheese, such as cheese spread, canned cheese sauce, and cheese in packaged snack crackers is not allowed. Low fat or fat free cheese would be a meat alternate that is allowed.

For menu variety, use meat, and low fat cheese in combination to equal a full serving portion.

It is not recommended serving nuts and seeds due to nut/seed allergies prevalent in the youth today.

Bread and Bread Alternates:

Use enriched whole-grain breads and bread alternatives. Whole grain pasta, noodles, brown rice, wheat rolls, and cornbread are encouraged for the lunch/supper/dinner meals.

Bread alternates may include crust used as part of the main dish (i.e. pizza or quiche), Dry oatmeal used in a fruit crisp.

Pre-fried items, such as hash browns, French fries, and tater tots are not recommended due to the fat and sodium content Any pre-fried item served is limited to once a week.

Cookies, pastries, packaged snack cakes, and other high fat/sugar foods cannot be counted for any bread serving at the lunch/supper/dinner meal.

Fruits and Vegetables:

Must serve a Vitamin C source daily and must serve a Vitamin A source every other day, three times a week – refer to the guidelines. Fruits and vegetables supply these nutrients. More than once vitamin source a day is also encouraged.

Use a different combination of two or more servings for the meal service. Use fresh, canned, dried, or frozen vegetables and fruits for lunch/supper/dinner. No sugar may be used in the packaging or preparation of the fruit. Canned or frozen fruit should be packed in juice or water - not syrup or sugar packed.

Vegetables and fruits may be served as combination dishes (i.e., beef stew with meat, potatoes, carrots, English peas, OR shredded carrot salad with diced pineapple).

Avoid serving two forms of the same fruit or vegetable in the same day. Example: an orange and orange juice or an apple and applesauce are combinations that should not be used. **Serve a variety of vegetables and fruits to ensure a nutritionally well-balanced meal.**

It is highly recommended to either serve at least one raw vegetable and two raw fruits per week, for a meal or snack

Limit serving starchy vegetables to once per meal. Starchy vegetables include white/sweet potatoes, lima beans, butter beans, English peas, black-eye peas, field peas, Crowder peas, cream and whole kernel corn, any dried bean/pea (unless counted for a meat alternate).

Vegetables shall be seasoned with powders, spices, and herbs. The use of high sodium/salt and high fat seasonings should be restricted as much as possible.

Small amounts (less than 1/8 cup) of lettuce, tomatoes, onions, relish, catsup, salsa, jams, jellies, or other condiments may be added for flavor or garnish as "other foods," but do not count as a fruit or vegetable.

Milk:

Milk shall be served at Lunch/Supper/Dinner. The milk shall be pasteurized fluid milk, fortified with vitamin A and D. Whole milk is served to infants and toddlers less than 2 years of age.

After age two, skim/fat free milk or 1% milk shall be served. Flavored milk may be served no more than once a week, using flavoring added to whole/skim/fat free milk or 1% milk.

Soymilk may be served when indicated with dietary restrictions.

Provisions must be made to serve calcium in alternate forms when no milk/substitute may be served to the child due to dietary restrictions.

If a child cannot be served milk for medical reasons or upon parent's instructions, then that child is not to be served high content milk products, e.g., pudding, ice cream, cheese, etc.

All milk equivalent used as a meat alternate must be low in fat.

Water:

Water is to be made available at all meals and snacks. Tap or bottled water may used. Facilities may have water fountains in the classroom or dining area. This water source should be encouraged before and after all meals and snacks and takes the place of water served at the table.

MEAL PATTERNS FOR CHILDREN IN CHILDCARE FACILITIES: SNACK

SNACK – MUST SELECT TWO OF THE FOUR COMPONENTS, PLUS WATER	**AGES 1YR-2YR**	**AGES 3 YR-5 YR**	**AGES 6 YR–12 YR**
Meat/Meat Alternate			
Cooked Meat, No Bone	1/2 oz.	½ OZ.	1 oz.
Cooked Dry Beans/Peas	1/8 c.	1/8 c.	1/4 c.
Low Fat Cheese	1/2 oz.	1/2 oz.	1 oz.
Egg	1 small	1 medium	1 medium
Peanut Butter	1 Tbsp.	1 Tbsp.	2 Tbsp.
Fat Free Yogurt/Cottage Cheese	2 oz/1/4 c.	2 oz./1/4 c.	4 oz./1/2 c.
Fruit or Vegetable	1/2 c.	½ c.	3/4 c.
Grains/Breads			
Enriched, Whole Grain Bread	½ slice	½ slice	½ slice
OR			
Enriched Dry Cereal	¼ c. OR 1/3 oz.	1/3 c. OR ½ oz.	¾ c. OR 1 oz.
OR	¼ c.	1/3 c.	½ c.
Enriched Hot Cereal			
OR	¼ c.	1/3 c.	½ c.
Enriched, Whole Grain Pasta, Noodles, Rice			
Milk (Must be fluid, skim/fat free), or 1% milk)	½ c. (whole milk)	1/2 c.	1 c.
Water	½ c.	1 c.	1 c.

Meat and Meat Alternates:

It is recommended to have at least one meatless meal a week. An alternate for meat could be cooked, dried beans or peas. Cooked dried beans and peas cannot count for a vegetable and meat alternate in the same meal. Canned beans and peas will include the canned kidney, black bean, garbanzo, etc. Note: Canned beans are much higher in sodium/salt.

Edible portion for meats and meat alternates is used. Bone and skin shall not be counted as servings. No bones may be served. Note: 1 ounce of cooked meat is equal to one medium cooked chicken leg with bone removed.

Processed, pre-fried meats are not allowed due to the sodium/salt and fat content. Meats not allowed include hot dogs, corndogs, bologna, bacon, sausage, pancake sticks, small chicken nuggets, fish sticks, and steak fingers.

Processed cheese, such as cheese spread, canned cheese sauce, and cheese in packaged snack crackers is not allowed. Low fat or fat free cheese would be a meat alternate that is allowed.

For menu variety, use meat, and low fat cheese in combination to equal a full serving portion.

Nuts or seeds *may be used* as a meat alternate for snack time, but is not recommended due to nut/seed allergies prevalent in the youth today.

Bread and Bread Alternates:

Use enriched whole-grain breads and bread alternatives. Whole grain pasta, noodles, brown rice, wheat rolls, and cornbread are encouraged for the lunch/supper/dinner meals.

Bread alternates may include crust used as part of the main dish (i.e. pizza or quiche), dry oatmeal used in a fruit crisp.

Pre-fried items, such as hash browns, French fries, tater tots are not recommended due to the fat and sodium content Any pre-fried item served is limited to once a week. Fresh, “homemade” oven baked fries or wedges would be allowed.

Plain, low sugar type cookies may be served occasionally for a snack component. These cookies may include animal crackers, graham crackers, vanilla wafers, oatmeal, oatmeal raisin, peanut butter, and ginger snaps. Items that may not be served include chocolate chip, most packaged cookies/cakes.

Low fat granola bars, cereal bars, whole grain fruit bars, rice krispie treats may be used for a snack bread component. Packaged crackers with cheese/peanut butter filling are discouraged due to the fat/sodium content. The cheese/peanut butter filling cannot count as a meat serving.

Baked chips, chips, popcorn, hard pretzels, and other low-moisture, high sodium foods cannot meet the bread requirement for a snack. Crackers, cheese and vegetable flavored crackers are allowed. Trail mixes made of various dry, no sugar coated cereals, dried fruits, and small marshmallows are a suggested snack item to meet a bread component.

Fruits and Vegetables:

Use fresh, canned, dried, or frozen vegetables and fruits for snack. No sugar may be used in the packaging or preparation of the fruit. Canned or frozen fruit should be packed in juice or water-not syrup or sugar packed.

Vegetables and fruits may be served as combination dishes (i.e., shredded carrot salad with diced pineapple, fat free yogurt parfait with fresh fruit).

Avoid serving two forms of the same fruit or vegetable in the same day. Example: an orange and orange juice or an apple and applesauce are combinations that should not be used. **Serve a variety of vegetables and fruits to ensure a nutritionally well-balanced meal.**

It is highly recommended to either serve at least one raw vegetable and two raw fruits per week, for a meal or snack. Younger children may have an appropriate substitution due to the choking hazard or the item may be cooked first.

Small amounts (less than 1/8 cup) of lettuce, tomatoes, onions, relish, catsup, salsa, jams, jellies, or other condiments may be added for flavor or garnish as "other foods," but do not count as a fruit or vegetable.

Juice should not be served as part of the snack when milk is the only other component. It is poor menu planning to offer such a combination since it provides too much liquid for children.

100% Fruit juice is allowed once a day. Vitamin fortified fruit juices, such as apple juice, with extra Vitamin C, will not be recognized as a good vitamin source.

The best time to serve this juice would be at the late 4:30/5:30 p.m., snack period.

Milk:

The milk shall be pasteurized fluid milk, fortified with vitamin A and D. Whole milk is served to infants and toddlers less than 2 years or age. After age two, skim/fat free milk, or 1% milk shall be served. Flavored milk may be served no more than once a week, using flavoring added to whole/skim/fat free milk, or 1% milk.

Soymilk may be served when indicated with dietary restrictions.

Provisions must be made to serve calcium in alternate forms when no milk/substitute may be served to the child due to dietary restrictions.

If a child cannot be served milk for medical reasons or upon parent's instructions, then that child is not to be served high content milk products, e.g., pudding, ice cream, cheese, etc.

All milk equivalents used as a meat alternate must be low in fat.

Water:

Water is to be made available with all meals and snacks. Tap or bottled water may used. Facilities may have water fountains in the classroom or dining area. This water source should be encouraged before and after all meals and snacks and takes the place of water served at the table.

~~**Meat and Meat Alternates**~~

- ~~For menu variety, use meat and cheese in combination (1 ounce of meat and ½ ounce of cheese).~~

- ~~Dried beans or peas (Remember: does not count for both vegetable and meat alternate in the same meal).~~

- ~~When serving nuts and seeds, they may fulfill:~~
  - ~~full requirement for the snack but;~~
  - ~~no more than one-half of the requirements for lunch or supper.~~

- ~~Edible portion for meats and meat alternates is used. Bone and skin shall not be counted as servings.~~

- ~~Children, ages 1-2 years, need 1 oz. of meat or cheese, which is equal to a chicken leg,~~ ~~**OR** 1 egg,~~ ~~**OR** ¼ cup cooked dry beans/peas,~~ ~~**OR** 2 tablespoons of peanut butter,~~ ~~**OR** 4 oz. yogurt.~~

- ~~Children 2-5 years need 1 ½ oz. meat,~~ ~~**OR** 1 egg,~~ ~~**OR** 3/8 c. cooked beans/peas (that's just under ½ cup),~~ ~~**OR** 3 tablespoons peanut butter, or 6 oz yogurt.~~

~~**Fruits and Vegetables**~~

- ~~Use only 100-percent-strength juice for breakfast. Juice drinks with at least 50-percent-strength juice may be used for snack and lunch. (Caution: children must be served double the volume of these drinks to meet the requirement).~~

- ~~Fruit-flavored drinks, Ades, or punches contain less than 50-percent-strength juice. These types of beverages may be served but are not credited toward meeting the requirement. These type beverages are discouraged, instead of serving high sugar, nutrient low fluids, serve water.~~

- ~~Juice should not be served as part of the snack when milk is the only other component. It is poor menu planning to offer such a combination since it provides too much liquid for~~

~~children.~~

- ~~Juice or syrup from canned fruit does not count as fruit juice. Canned or frozen fruit should be packed in juice or water-not syrup or sugar packed.~~

- ~~Use a different combination of two or more servings for lunch. Include various forms such as raw or cooked, fresh, frozen, canned in juices, or dried.~~

- ~~Avoid serving two forms of the same fruit or vegetable in the same meal. Example: an orange and orange juice or an apple and applesauce are combinations that should not be used.~~ ~~**Serve a variety of vegetables and fruits to ensure a nutritionally well-balanced meal.**~~

- ~~Small amounts (less than ⅙ cup) of onions, relish, catsup, salsa, jams, jellies, or other condiments may be added for flavor or garnish as "other foods," but do not count as a fruit or vegetable.~~

~~**Bread and Bread Alternates**~~

- ~~Use whole-grain or enriched breads and bread alternatives, or whole-grain, enriched, or fortified cereals. Read labels on commercial products to ensure the use of enriched and fortified products.~~

- ~~Foods such as cake and pie crust, and items usually served as desserts, cannot be used as bread alternates. Crust used as part of the main dish (i.e., for pizza or quiche) is allowed as a bread alternate.~~

- ~~The bread requirement cannot be met with snack foods such as popcorn, hard pretzels, chips, or other low-moisture items made from grain.~~

- ~~Cookies cannot be used for the bread requirement at breakfast, lunch, or supper. Cookies, such as animal crackers, graham crackers, and vanilla wafers may be used occasionally for a snack component.~~

- ~~Doughnuts, honey buns, breakfast tarts, pastries, packaged snack cakes, and other high fat/sugar foods cannot be counted for any bread serving.~~

~~**Milk**~~

- ~~Milk shall be served at Breakfast, Lunch, and Supper. Milk may also be served as part of a snack. The milk shall be pasteurized fluid milk, fortified with vitamin A and D. Low fat should not be served to children less than two years of age. After age two, it is encouraged to change to low fat or skim milk for health benefits.~~

- ~~Dry milk shall not be used as a milk beverage, but may be used for cooking purposes.~~

VITAMIN C SOURCES
VITAMIN C SOURCE MUST BE SERVED DAILY
**BEST CHOICE
*GOOD CHOICE
#ACCEPTABLE CHOICE (ONLY COUNT FOR A VITAMIN SOURCE ONCE PER WEEK)

Fruits			**Vegetables**		
Food	Serving Size		Food	Serving Size	
Blackberries	¼ c.	#	Asparagus	¼ c.	*
Blueberries	¼ c.	#	Artichoke	¼ medium	*
Cantaloupe	¼ c	**	Bok Choy	¼ c.	*
Grapefruit	¼ medium	**	Broccoli	¼ c.	**
Grapefruit Juice	½ c	**	Brussel Sprouts	¼ c.	**
Grapefruit-Orange Juice	½ c.	**	Cabbage	¼ c.	*
Guava	¼ c.	**	Cauliflower	¼ c.	*
Honeydew Melon	½ c.	*	Chicory	¼ c.	*
Kiwi	½ medium	**	Collard Greens	¼ c.	*
Mandarin Orange Sections	¼ c.	*	Kale	¼ c.	#
Mango	¼ medium	*	Kohlrabi	¼ c.	**
Melon balls	¼ c.	*			
Orange	½ medium	**	Mustard Greens	¼ c.	#
Orange Juice	¼ c.	**	Okra, not fried	¼ c.	#
Papaya	¼ c.	*	Peppers, green & red	¼ c.	**
Peach, frozen only	¼ c.	**	Potato, White, or Red Skinned Baked only-no instant/fries/tots	½ medium	*
Pineapple	¼ c.	#	Rutabagas	¼ c.	#
Pineapple Juice	¼ c.	*	Snow Peas	¼ c.	#
Pineapple-grapefruit or orange juice	¼ c.	**	Spinach	¼ c.	#
Raspberries	¼ c.	*	Sweet Potato	½ medium	*
Star fruit	¼ c.	#	Tomato	½ medium	*
Strawberries	¼ c.	**	Tomato or V-8 Juice	¼ c.	**
Tangelo	½ medium	**	Turnip Greens	¼ c.	*
Tangerine	½ medium	**	**Miscellaneous**		
Tropical fruit mix	¼ c.	*			
Watermelon	½ c.	#	Liver, beef	1 oz.	**

VITAMIN A SOURCES VITAMIN A SOURCE MUST BE SERVED EVERY OTHER DAY, 3 TIMES PER WEEK ** BEST CHOICE * GOOD CHOICE #ACCEPTABLE CHOICE (ONLY COUNT FOR A VITAMIN SOURCE ONCE PER WEEK)					
Fruits			**Vegetables**		
Food	Serving Size		Food	Serving Size	
Avocado	¼ medium	#	Asparagus	¼ c.	#
Apricot	2 halves	*	Artichoke	½ medium	#
Cantaloupe	¼ c.	*	Bok Choy	¼ c.	*
Cherries, red sour	¼ c.	*	Broccoli	¼ c.	*
Mandarin Orange Segments	¼ c.	*	Brussels Sprouts	¼ c.	*
Mango	¼ medium	**	Carrots	¼ c.	**
Melon Balls	¼ c.	*	Collard Greens	¼ c.	**
Nectarine	¼ medium	#			
Papaya	¼ c.	*	Kale	¼ c.	**
Peaches	¼ c.	#	Lettuce, Green, Romaine, or Red NOT Iceberg (Iceberg is not high in vitamins)	½ c.	#
Plantain	¼ c.	#	Mixed Vegetables	¼ c.	**
Prunes	¼ c.	*	Mustard Greens	¼ c.	**
Tangerine	½ medium	*	Okra, not fried	¼ c.	#
			Peas & Carrots	¼ c.	**
			Peppers, red	¼ c.	**
Miscellaneous			Pumpkin	¼ c.	**
Egg	1 medium	*	Rutabagas	¼ c.	#
Liver, beef	1 oz.	**	Spinach	¼ c.	**
Liver, chicken	1 oz.	**	Sweet Potato	½ medium	**
			Tomato or V-8 Juice	¼ c.	**
			Turnip Greens	¼ c.	**
			Winter Squash, Butternut or Hubbard	¼ c.	**

DENTAL CARE

Dental care is encouraged after each meal service. Parents shall supply toothbrushes and tooth powders or pastes for the child's individual use. Recommendations include replacing the brush every three months or when bristles are bent.

Each toothbrush and powder or paste must be:

- Labeled with the child's full name
- Stored out of children's reach when not in use
- Stored in a manner that prevents the toothbrushes from touching each other during storage

Staff is encouraged to attend trainings on dental care that includes:

- Proper tooth brushing technique as appropriate for the child's age and skills.
- Education to train parents about proper oral healthcare techniques.
- Education for staff and parents to learn the appropriate techniques to feed infants and children that minimize damage to teeth and facial development.

Children must have adult supervision during tooth brushing activities.

GARDENING AND FRESH PRODUCE

Gardening is an excellent opportunity to incorporate physical activity with nutrition education. Facilities are encouraged to have gardening projects with the children. Produce that is grown in the gardens may be washed and handled properly to allow the items to be served for a snack time or education activity.

Purchasing local produce from Mississippi farmers is one way to offer fresh items to the children. This also helps the local economy and raising families' awareness of food sources. The child care center must ensure the safety of foods served. Steps must be taken to demonstrate reasonable care has been taken to ensure the safety of foods purchased. Steps include: Investigating the local farm and production practices, communicating with the local farmer on the needs of the facility including packaging, delivery, and payment procedures, and promoting the use of local produce with families and the community. There are several resources available to use as a safety checklist, such as the Iowa State University Checklist for Retail Purchasing of Local Produce. The checklist is on the www.Healthyms.com website under Nutrition and Farm to School and Preschool.

REFERENCES

Dietary Guidelines for Americans, 2005.
http://www.health.gov/dietaryguidelines/dga2005/document/

United States Department of Agriculture; Food and Nutrition Service; Child and Adult Care Food Program: Nutrition Guidance for Child Care Centers.
http://www.fns.usda.gov/cnd/care/ProgramBasics/Meals/Meal_Patterns.

Dietary Reference Intakes, (DRIs), Food and Nutrition board, Institute of Medicine, National Academies

USDA National Nutrient Database for Standard Reference, Release 18.

Promoting good Nutrition and Physical Activity in Child-Care Settings, A Research Brief, May 2007, Robert Wood Johnson Foundation.

Position of the American Dietetic Association: Benchmarks for Nutrition Programs in Child Care Settings, Journal of the American Dietetic Association, June 2005.

Nemours, Health and Prevention Services, Best Practices for Health Eating: A Guide to Help Children Grow Up Healthy, Version 2, 2008

The Wellness Child Care Assessment Tool: A Measure to Assess the Quality of Written Nutrition and Physical Activity Policies, The American Dietetic Associations, December 2011

Institute of Medicine, Child and Adult Care Food Programs: Aligning Dietary Guidance for All, November 4, 2011

Preventing Childhood Obesity in Early Care and Education Programs, American Academy of Pediatric, American Public Health Association, National Resource Centre for Health and Safety in Child Care and Early Education, 2010

APPENDIX E

DISHWASHING PROCEDURE

The best way to wash, rinse, and disinfect dishes and eating utensils is to use a dishwasher with a sanitizing cycle. The final sanitizing rinse of a dishwasher must reach a temperature of 180 degrees. If a dishwasher is not available or cannot be installed, a three-compartment sink will be needed to wash, rinse, and disinfect dishes. A two-compartment or one-compartment sink can be used in child care facilities (located in an occupied residence) licensed for 12 or fewer children by adding one or two dishpans, as needed. In addition to three compartments or dishpans, you will need a dish rack with a drain board to allow dishes and utensils to air dry. To wash, rinse, and disinfect dishes by hand:

- Fill one sink compartment or dishpan with hot tap water and a dishwashing detergent.
- Fill the second compartment or dishpan with hot tap water.
- Fill the third compartment or dishpan with hot tap water and 1-1/2 tablespoons of liquid chlorine bleach for each gallon of water.
- Scrape dishes and utensils and dispose of excess food.
- Immerse scraped dish or utensil in first sink compartment or dishpan and wash thoroughly.
- Rinse dish or utensil in second dishpan of clear water.

- Immerse dish or utensil in third dishpan of chlorinated water for at least 1 minute.

- Place dish or utensil in a rack to air dry.

Note: Food preparation and dishwashing sinks should only be used for these activities and should never be used for routine hand washing or diaper changing activities.

Source: The ABCs of Safe and Healthy Child Care: A Handbook for Child Care Providers, Department of Health and Human Services, U.S. Public Health Service, Centers for Disease Control and Prevention.

APPENDIX G

PROCEDURE FOR DIAPERING A CHILD

Either of the following two procedures is acceptable in a child care facility for licensing purposes. However, some programs may be enrolled in a program that requires Procedure #2.

Procedure #1

1. Organize needed supplies within reach:
   a. fresh diaper and clean clothes (if necessary)
   b. dampened paper towels or premoistened toweletts for Cleaning child's bottom
   c. child's personal, labeled, ointment (if provided by parents)
   d. trash disposal bag

2. Place a disposable covering (such as roll paper) on the portion of the diapering table where you will place the child's bottom. Diapering surfaces should be smooth, nonabsorbent, and easy to clean. Don't use areas that come in close contact with children during play such as couches, floor areas where children play, etc.

3. If using gloves, put them on now.

4. Using only your hands, pick up and hold the child away from your body. Don't cradle the child in your arms and risk soiling your cloths.

5. Lay the child on the paper or towel.

6. Remove soiled diaper (and soiled clothes).

7. Put disposable diapers in a plastic-lined trash receptacle.

8. Put soiled reusable diaper and /or soiled clothes WITHOUT RINSING in a plastic bag to give to parents.

9. Clean child's bottom with some premoistened disposable toweletts or a dampened,

single-use, disposable towel.

10. Place the soiled toweletts or towel in a plastic-lined trash receptacle.

11. If the child needs a more thorough washing, use soap, running water, and paper towels.

12. Remove the disposable covering from beneath the child. Discard it in a plastic-lined receptacle.

13. If you are wearing gloves, remove and dispose of them now in a plastic-lined receptacle.

14. Wash your hands. NOTE: The diapering table should be next to a sink with running water so that you can wash your hands without leaving the diapered child unattended. However, if a sink is not within reach of the diapering table, don't leave the child unattended on the diapering table to go to a sink; wipe your hands with some premoistened toweletts instead. NEVER leave a child alone on the diapering table.

15. Wash the child's hands under running water.

16. Diaper and dress the child.

17. Disinfect the diapering surface immediately after you finish diapering the child.

18. Return the child to the activity area.

19. Clean and disinfect:
    a. The diapering area,
    b. all equipment or supplies that were touched, and
    c. soiled crib or cot, if needed.

20. Wash your hands under running water.

Source: The ABCs of Safe and Healthy Child Care: A Handbook for Child Care Providers, Department of Health and Human Services, U.S. Public Health Service, Centers for Disease Control and Prevention.

Procedure #2

1. Caregiver washes hands

2. Prepare for diapering by gathering wipes, diaper, plastic bag, clean clothes, gloves and other supplies needed. Bring materials to the diaper changing area but not on the changing table

3. Place child on diapering table. Remove clothing to access diaper. If soiled, place clothes into plastic bag.

4. Remove soiled diaper and place into plastic-lined, hands-free covered trash container. (To limit odor, seal in a plastic bag before placing into trash containers.)

5. Use wipes to clean child's bottom from front to back. Use a fresh wipe for each swipe.

6. If gloves were used, remove at this point.

7. Use a wipe to remove soil from adult's hands.

8. Use another wipe to remove soil from child's hands.

9. Throw soiled wipes into plastic-lined, hands-free covered trash container.

10. Put on clean diaper and redress child.

11. Place child at sink and wash hands using the proper hand washing procedure. Return child to a supervised play area without contaminating any surface

12. Spray the surface of the diapering table with soap-water solution to remove gross soil. Wipe clean using a disposable towel and throw away in a plastic-lined, hands-free covered trash container. Be sure the surface is dried completely.

13. Spray the surface of the diapering table with clear water (recommended). Wipe dry using a disposable towel and throw away in a plastic-lined, hands-free covered trash container.

14. Spray the diapering surface with disinfecting strength bleach-water solution (completely cover table; table should glisten) and wait for 2 minutes before wiping dry with a disposable towel or allow to air dry. Dispose of the towel in a plastic-lined, hands-free covered trash container.

15. Adult washes hands using the proper hand washing procedure.

Source: *Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs, 3rd Edition,* American Academy of Pediatrics, American Public Health Association, National Resource Center for Health and Safety in Child Care and Early Education, 2011.

APPENDIX H

CLEANING AND DISINFECTION PROCEDURES

Keeping the child care environment clean and orderly is very important for health, safety, and the emotional well-being of both children and providers. One of the most important steps in reducing the number of germs, and therefore the spread of disease, is the thorough cleaning of surfaces that could possibly pose a risk to children or staff. Surfaces considered most likely to be

contaminated are those with which children are most likely to have close contact. These include toys that children put in their mouths, crib rails, food preparation areas, and surfaces likely to become very contaminated with germs, such as diaper-changing areas.

Routine cleaning with soap and water is the most useful method for removing germs from surfaces in the child care setting. Good mechanical cleaning (scrubbing with soap and water) physically reduces the numbers of germs from the surface, just as hand washing reduces the numbers of germs from the hands. Removing germs in the child care setting is especially important for soiled surfaces which cannot be treated with chemical disinfectants, such as some upholstery fabrics.

However, some items and surfaces should receive an additional step, **disinfection**, to kill germs after cleaning with soap and rinsing with clear water. Items that can be washed in a dishwasher or hot cycle of a washing machine do not have to be disinfected because these machines use water that is hot enough for a long enough period of time to kill most germs. The disinfection process uses chemicals that are stronger than soap and water. Disinfection also usually requires soaking or drenching the item for several minutes to give the chemical time to kill the remaining germs. Commercial products that meet the Environmental Protection Agency's (EPA's standards for "hospital grade" germicides (solutions that kill germs) may be used for this purpose. One of the most commonly used chemicals for disinfection in child care settings is a homemade solution of household bleach and water. Bleach is cheap and easy to get. The solution of bleach and water is easy to mix, is nontoxic, is safe if handled properly, and kill most infectious agents. (Be aware that some infectious agents are not killed by bleach. For example, cryptosporidia is only killed ammonia or hydrogen peroxide.)

A solution of bleach and water loses its strength very quickly and easily. It is weakened by organic material, evaporation, heat, and sunlight. Therefore, bleach solutions should be mixed fresh each day to make sure it is effective. Any leftover solution should be discarded and the end of the day. NEVER mix bleach with anything but fresh tap water! Other chemicals may react with bleach and create and release a toxic chlorine gas.

Keep the bleach solution you mix each day in a cool place out of direct sunlight and out of the reach of children. (Although a solution of bleach and water mixed as shown in the accompanying box should not be harmful if accidentally swallowed, you should keep all chemicals away from children.)

<u>If a child care facility uses a commercial cleaner, sanitizer, or disinfectant it must be a U.S. Environmental Protection Agency (EPA)-registered product that has an EPA registration number on the label. Such products shall only be used according to the manufacturer's instructions.</u>

<u>**NOTE:** All EPA-registered products may not be appropriate for use in a child care facility. Therefore, it is the responsibility of the facility to make sure any product use is appropriate for use in a child care facility.</u>

~~If you use a commercial (brand-name) disinfectant, read the label and always follow the manufacturer's instructions exactly.~~

Recipe for Bleach Disinfecting Solution

(For use on non-porous surfaces such as diaper change tables, counter tops, door and cabinet handles toilets, etc.) ~~**(For use in bathroom, diapering areas, etc.)**~~

~~1/4~~ ¼ - ¾ cup bleach
1 gallon of cool water

OR

1 - 3 tablespoon bleach
1 quart of cool water

Apply as a spray or poured fresh solution, not by dipping into a container with a cloth that has been in contact with a contaminated surface.

Add the household bleach (5.25% sodium hypochlorite) to the water.

Recipe for Weaker Bleach ~~Disinfecting~~ Sanitizing Solution

For food contact surfaces sanitizing (dishes, utensils, cutting boards high chare trays), toys that children may place in their mouths, and pacifiers.
~~**(For use on toys, eating utensils, etc.)**~~

1 tablespoon bleach
1 gallon cool water

Add the bleach to the water

Washing and Disinfecting Toys

- Infants and toddlers should not share toys. Toys that children (particularly infants and toddlers) put in their mouths should be washed and disinfected between uses by individual children. Toys for infants and toddlers should be chosen with this in mind. If you cannot wash a toy, it probably is not appropriate for an infant or toddler.

- When an infant or toddler finishes playing with a toy, you should retrieve it form the play area and put it in a bin reserved for dirty toys. This bin should be out of reach of the children. Toys can be washed at a later, more convenient time, and then transferred to a bin for clean toys and safely reused by the other children.

- To wash and disinfect a hard plastic toy:
    - Scrub the toy in warm, soapy water. Use a brush to reach into the crevices.
    - Rinse the toy in clean water.

    - Immerse the toy in a mild bleach solution (see above) and allow it to soak in the solution for 10-20 minutes.
    - Remove the toy from the bleach and rinse well in cool water.
    - Air dry.

- Hard plastic toys that are washed in a dishwasher or cloth toys washed in the hot water cycle of the hot water cycle of a washing machine do not need to be additionally disinfected.

- Children in diapers should only have washable toys. Each group of children should have its own toys. Toys should not be shared with other groups.

- Stuffed toys used by only a single child should be cleaned in a washing machine every week or more frequently if heavily soiled.

- Toys and equipment used by older children and not put into their mouths should be cleaned at least weekly and when obviously soiled. A soap and water wash followed by clear water rinsing and air drying should be adequate. No disinfection is required. (These types of toys and equipment include blocks, dolls, tricycles, trucks, and other similar toys.).

- Do not use wading pools for children in diapers.

- Water play tables can spread germs. To prevent this:
    - Disinfect the table with chlorine bleach solution before filling it with water.
    - Disinfect the all toys to be used in the table with chlorine bleach solution. Avoid using sponge toys. They can trap bacteria and are difficult to clean.
    - Have all children wash their hands before and after playing in the water table.
    - Do not allow children with open sores or wounds to play in the water table.
    - Carefully supervise the children to make sure they do not drink the water.
    - Discard water after play is over

Washing and Disinfecting Bathroom and Other Surfaces

Bathroom surfaces, such as faucet handles and toilet seats, should be washed and disinfected several times a day, if possible, but at least once a day or when soiled. The bleach and water solution or chlorine-containing scouring powers or other commercial bathroom surface cleaner/disinfectants can be used in these areas. Surfaces that infants and young toddlers are likely to touch or mouth, such as crib rails, should be washed with soap and water and disinfected with a nontoxic disinfectant, such as bleach solution, at least once every day, more often if visibly soiled. After the surface has been drenched or soaked with the disinfectant for at least 10 minutes, surfaces likely to be mouthed should be thoroughly wiped with a fresh towel moistened with tap water. Be sure not to use a toxic cleaner on surfaces likely to be mouthed. Floors should be washed and disinfected at least once a day and whenever soiled.

Washing and Disinfecting Diaper Changing Areas

Diaper Changing Areas should:

- Only be used for changing diapers.
- Be smooth and nonporous, such as Formica (NOT wood).
- Have a raised edge or low fl fence around the area to prevent a child from falling off.
- Be next to a sink with hot and cold running water.
- Not be used to prepare food, mix formula, or rinse pacifiers.
- Be easily accessible to providers.
- Be out of reach of children.

Diaper changing areas should be cleaned and disinfected after each diaper changer as follows:

- Clean the surface with soap and water and rinse with clear water.
- Dry the surface with a paper towel.
- Thoroughly wet the surface with the recommended bleach solution.
- Wipe dry with a clean disposable towel or air dry. If using a commercial disinfectant/sanitizer, follow labeled manufacturer's instructions.

Washing and Disinfecting Clothing, Linen, and Furnishings

Do not wash or rinse clothing soiled with fecal material in the child care setting. You may empty solid stool into the toilet, but be careful not to splash or touch toilet water with your hands. Put the soiled clothes in a plastic bag and seal the bag to await pick up by the child's parent or guardian at the end of the day. Always wash your hands after handling soiled clothing.

Explain to parents that washing or rinsing soiled diapers and clothing increases the chances that you and the children may be exposed to germs that cause diseases. Although receiving soiled clothes is not pleasant, remind parents that this policy protects the health of all children and providers. Each item of sleep equipment, including cribs, cots, mattresses, blankets, sheets, etc., should be cleaned and sanitized before being assigned to a specific child. The bedding items should be labeled with that child's name, and should only be used by that child. Children shall not share bedding. Infantsfi linens (sheets, pillowcases, blankets) shall be cleaned and sanitized daily, and crib mattresses shall be cleaned and sanitized weekly and when soiled or wet. Linens from beds of older children shall be laundered at least weekly and whenever soiled. However, if a child inadvertently used another child's bedding, you shall change the linen and mattress cover before allowing the assigned child to use it again. All blankets shall be changed and laundered routinely at least once a week.

Cleaning up Body Fluid Spills

Spills of body fluids, including blood, feces, nasal and eyed discharges, saliva, urine, and vomit shall be cleaned up immediately. Wear gloves unless the fluid can be easily contained by the material (e.g., paper tissue or cloth) that is being used to clean it up. Be careful not to get any of the fluid you are cleaning in your eyes, nose, mouth or any open sores you may have. Clean and disinfect any surfaces, such as counter tops and floors, on which body fluids have been spilled. Discard fluid-contaminated material in a plastic bag that has been securely sealed. Mops used to clean up body fluids should be (1) cleaned, (2) rinsed with a disinfecting solution, (3) wrung as

dry as possible, and (4) hung to dry completely. Be sure to wash your hands after cleaning up any spill.

Source: The ABCs of Safe and Healthy Child Care: A Handbook for Child Care Providers, Department of Health and Human Services, U.S. Public Health Service, Centers for Disease Control and Prevention (as amended by MSDH).

Title 15: Mississippi State Department of Health
Part 11: Bureau of Child Care Facilities

Subpart 55: Child Care Facilities Licensure

CHAPTER 2: REGULATIONS GOVERNING LICENSURE OF CHILD CARE FACILITIES FOR 12 OR FEWER CHILDREN IN THE OPERATOR'S HOME

Subchapter 1. GENERAL

Rule 2.1.2 Purpose

3. The maximum capacity of a child care facility is determined by the indoor square footage, kitchen square footage, outdoor playground area, and the number of toilets, urinals, and hand washing lavatories, with the lowest capacity determination being controlling. The maximum capacity of each room that is utilized by the children in a child care facility is calculated individually and may not be exceeded except when provided in these regulations.

Source: Miss. Code Ann. §43-20-8.

Rule 2.1.4 Definitions

7. **Director Designee:** Any individual designated to act as the director, having all responsibility and authority of a director, during the director's short-term absence. A director designee shall, at a minimum, be at least 21 years of age, have a high school diploma or GED, and ~~4~~ 2 years paid experience in a licensed child care facility. Director Designees shall not retain sole director authority in a facility for more than 24 total hours per calendar week.

   Exception: A facility may have a Director Designee serve for a maximum of 14 consecutive calendar days during a licensure year. This exception may be used once during the licensure year for allowing the director personal leave, i.e., vacation, jury duty, etc.

19. **School Age Child:** A child five years of age or older and eligible to be enrolled in ~~an accredited school program~~ public school.

Note: A child that is five (5) years old age must have turned five (5) on or before September 1 to be considered a school age child.

Source: Miss. Code Ann. §43-20-8.

Subchapter 2. LICENSURE

Rule 2.2.2 Types of Licenses

1. **Temporary License:** The licensing agency may issue a temporary license to any child care facility. This license will allow the child care facility to operate pending the issuance of a regular license. The temporary license will reflect the date of issuance of the license, the expiration date, and the number of children for which the facility is licensed. The license issue date is the actual date documentation is received and approval for initial temporary license is granted; the expiration date is the last day of the sixth month following the issue date; examples: January 01 through June 30 or January 15 through June 30.

   NOTE: Before a Temporary License is issued and the facility allowed to begin operation the following items must be submitted to and/or verified by the licensing authority, i.e., Mississippi State Department of Health:

   c. ~~A qualified director~~ Documentation that the facility has a qualified director for the child care program that meets the standards set forth in Rule 1.5.3.

   g. Verification of passing an American National Standards Institute – Conference for Food Protection (ANSI-CFP) Accredited food manager training. Currently the following providers are authorized by the MSDH to provide the required training: ~~, e.g.,~~

      i. National Restaurant Association, Inc., i.e., ServSafe®,

      ii. Environmental Health Testing, Inc., i.e., National Registry of Food Safety Professionals,

      iii. Prometric, Inc., or

      iv. ~~or~~ Mississippi State University Extension Service, i.e., TummySafe©. ~~, or equivalent if applicable.~~

      NOTE: For information on ServSafe® or TummySafe© contact the Mississippi State University Extension Service at - http://msucares.com/health/food_safety/servsafecal.htm. In addition, the Mississippi Restaurant Association (MRA) also provides ServSafe® training. ~~and t~~ The MRA can be contacted at - www.msra.org. For information on the National Registry of Food Safety Professionals or Prometric, contact the MSDH Office of Environmental Heath at 601-576-7690.

bb. Verification that the owner/operator and director have completed mandatory training on:

i. *Regulations Governing Licensure of Child Care Facilities.*

ii. ~~New~~ Directors Orientation.

iii. Playground Safety.

NOTE: Contact the Mississippi State Department of Health, Child Care Facilities Licensure Division at 601-364-2827 for more information on the availability and location of the above referenced training. Information on available training classes and approved training providers is listed on the MSDH website at http://msdh.ms.gov/msdhsite/static/30,0,183.html. Training classes provided by the Child Care Licensing Division are listed under the heading "MSDH Child Care Provider Training Calendar." Other approved providers of training for child care facility operators and staff are listed under the headings "MSDH Approved Staff Development Trainers" and "Approved Child Care Staff Development Providers."

Source: Miss. Code Ann. §43-20-8.

Subchapter 4. FACILITY POLICY AND PROCEDURES

Rule 2.4.2 Smoking, Tobacco Products, and Prohibited Substances

1. ~~Smoking, the use of tobacco products in any form, alcohol, or illegal drugs, is prohibited within the physical confines of a child care facility, and on all outdoor playground areas.~~

2. ~~If smoking or use of tobacco products is permitted outside the physical confines of a child care facility and away from the outdoor playground areas, it shall be limited to a designated area out of the presence of children. The designated area shall be a place where children, in the course of normal daily activities, may not observe staff and volunteers smoking or using tobacco products.~~

3. ~~Designated smoking areas shall be clearly identified and posted and shall be provided with receptacles for tobacco product waste.~~

1. Smoking or the use of tobacco products in any form is prohibited within the physical confines or the campus of a child care facility.

2, The use of alcohol, illegal use of prescription drugs, or use of illegal drugs is prohibited within the physical confines or the campus of a child care facility.

3. Smoking or the use of tobacco products in any form, use of alcohol, illegal use of prescription drugs, or use of illegal drugs by a caregiver is prohibited anytime a child is under the care of such caregiver regardless of location. A caregiver is defined as a

person who provides direct care, supervision, and guidance to children in a child care facility, regardless of title or occupation. This definition includes volunteers and parents.

Source: Miss. Code Ann. §43-20-8.

Rule 2.4.6 Posting of Information: The following items shall be posted conspicuously in the child care facility at all times:

1. Accessible to employees and parents:

   c. Daily activity schedule posted in each classroom.

3. In kitchens:

   a. Menus.

   b. Evacuation route.

   c. ~~Food Service Permit/Inspection Form.~~

Source: Miss. Code Ann. §43-20-8.

Subchapter 5: PERSONNEL REQUIREMENTS

Rule 2.5.3 Child Care Director Qualifications: A child care director shall be least 21 years of age and shall have at a minimum:

4. Two years paid experience as a caregiver in a licensed child care facility, and either (1) a current Child Development Associate (CDA) credential from the Council for Early Childhood Professional Recognition (CECPR), or (2) a Mississippi Department of Human Services (MDHS) Division of Early Childhood Care and Development (DECCD) Child Care Director's Credential or MDHS OCY Child Care Director's Credential, or (3) 24 semester hours credit with a grade of "C" or better from an accredited college or university in courses specific to early childhood.

Source: Miss. Code Ann. §43-20-8.

Rule 2.5.4 Caregivers: Caregivers shall be at least 18 years of age, and shall have at a minimum:

2. A current CECPR Child Development Associate (CDA) credential ~~or an MDHS OCY Director's Child Care Credential~~ a MDHS DECCD Child Care Director's Credential, or MDHS OCY Director's Child Care Credential.

Source: Miss. Code Ann. §43-20-8.

Rule 2.5.8 Use of Director Designee

2. A director designee shall, at a minimum have a high school diploma or GED and ~~four~~ two years paid experience in a licensed child care facility or licensed/accredited kindergarten program. A director designee shall not retain sole director authority in a facility for more than 24 total hours per calendar week.

   Exception: Facility may have a Director Designee serve for a maximum of 14 consecutive days during a licensure year. This exception may be used once during the licensure year for allowing the director personal leave, i.e., vacation, jury duty, etc. In addition, if a Director has a medical condition (illness, recovery from surgery, accident, etc.) that requires more than 14 consecutive day's recovery time, the time a Director Designee may be utilized may be extended. The facility is responsible to notify the Child Care Division of such circumstances and provide documentation supporting the need to extend the time the Director Designee needs to be utilized. Approval of this exception is at the discretion of the Child Care Licensure Division.

Source: Miss. Code Ann. §43-20-8.

Rule 2.5.9 Staff Development

1. Owners, Directors and Director Designees. Before a new license to operate is issued, owners, directors, and director designees of the child care facility shall each complete mandatory training on courses covering Child Care Regulations, New Director Orientation, and Playground Safety. If a new director or director designee is appointed by the child care facility after the license issuance, the mandatory training courses shall be completed by such individual(s) within the first six months of appointment. In the sole discretion of the licensing agency, mandatory training may be waived upon the submission of documentation of the individual's prior completion of relevant training.

2. All child care staff, directors, director designees, and caregivers shall be required to complete 15 contact hours of staff development, accrued during the licensure year, annually. The National Association for the Education of Young Children (NAEYC), a leading organization in child care and early childhood education recommends annual training based on the needs of the program and the pre-service qualification of the staff. Training should address the following:

   a. Health and safety.

   b. Child growth and development.

   c. Nutrition.

   d. Planning learning activities.

   e. Guidance and discipline techniques.

   f. Linkages with community services.

g. Communications and relations with families.

h. Detection of child abuse.

i. Advocacy for early childhood programs.

j. Professional issues.

3. Contact hours for staff development shall be approved by the licensing agency.

4. No more than five contact hours of approved in-service training provided by the child care facility may be counted toward the total number of hours required each year. More than five hours of in-service training may be provided by the child care facility but no more than five hours may be counted toward the required total of 15 hours.

5. All volunteers shall receive, at a minimum, one hour of orientation by the facility director. Such orientation, at a minimum, shall include a review of the child abuse law and reporting requirements, emergency exit procedures, and the facility transportation policy.

~~6. Before a temporary license may be upgraded to a regular, license the facility owner/operator and director shall complete a minimum of three hours of staff development training on the *Regulations Governing Licensure of Child Care Facilities*, three hours of New Director Orientation, and three hours training in playground safety as provided by the MSDH.~~

Source: Miss. Code Ann. §43-20-8.

Subchapter 7: REPORTS

Rule 2.7.1 Serious Occurrences Involving Children: The child care facility shall enter into the child's record and ~~orally report~~ immediately report, orally to the child's parent and either orally or in writing, via email or fax, to the licensing agency, any serious occurrences involving children. If the child care facility is unable to contact the parent and the licensing official immediately, it shall document this fact, in writing, in the child's record. Oral reports and/or emailed/faxed reports shall be confirmed in writing and mailed within two days of the occurrence. Serious occurrences include accidents or injuries requiring extensive medical care, e.g., child is taken to the doctor or hospital or hospitalizations, alleged abuse and neglect, fire or other emergencies.

Source: Miss. Code Ann. §43-20-8.

Subchapter 8: STAFFING

Rule 2.8.1 General

4. During all hours of operation, including the arrival and departure of children, a child care facility employee shall be present who holds a valid CPR certification, at any location where the children are present. Said certificate shall be issued by an agent recognized by the licensing authority.

5. During all hours of operation, including the arrival and departure of children, a child care facility employee shall be present, at any location where the children are present, who holds a valid first aid certificate. Said certificate shall be issued by an agent recognized by the licensing authority.

   Note: When initially acquiring or renewing the CPR and First Aid certifications required in items 4. and 5. above, online (internet, etc.) training is not acceptable. Training must be face-to-face and hands on.

Source: Miss. Code Ann. §43-20-8.

Subchapter 9: PROGRAM OF ACTIVITIES

Rule 2.9.4 Rest Periods

1. For preschool children ~~under six years of age~~, rest periods shall be scheduled for a minimum period of one hour, and shall not exceed two and one-half (2½) hours. Infant and toddler nap times shall be individualized to meet each child's needs as sleeping patterns can vary greatly. Half-day programs must provide for rest periods as is appropriate when the children/child indicates or is observed to require some rest time.

5. ~~An infant shall not be placed on his stomach for sleeping unless written physician orders are in the child's record.~~

   A safe sleep environment for infants to lower the risk of **Sudden Infant Death Syndrome** (SIDS) is required as follows:

   a. An infant shall be placed on his/her back for sleeping unless written physician orders to the contrary are in the child's record. Sleeping infants shall be within the view of the staff and visually checked regularly when sleeping. Nothing shall obstruct the view of the staff or prevent the staff from clearly seeing infants or children.

   b. Infants shall be dressed in clothing appropriate for sleeping that is designed to keep the infant warm without the possible hazard of head covering or entrapment. The room shall be kept at a draft-free seasonally appropriate temperature of 65 degrees Fahrenheit to 78 degrees Fahrenheit. If a child is already asleep and not dressed in clothing appropriate for sleeping, the caregiver does not need to awaken the infant to change his or her clothes.

c. Facilities shall use a firm mattress covered by a fitted sheet in a safety-approved crib meeting the Federal requirements of 16 CFR 1219 or 16 CFR 1220).

d. Items such as but not limited to pillows, blankets, sheepskins, bumpers, soft objects, stuffed toys, loose bedding, etc., shall not be in the crib.

Source: Miss. Code Ann. §43-20-8.

Rule 2.9.6 Infant, and Toddler, and Preschool Activities

1. Infants, ~~and~~ toddlers, and preschoolers shall be free to creep, crawl, toddle, and walk as they are physically able.

   a. Cribs, car seats, and high chairs are to be used only for their primary purpose, i.e., cribs for sleeping, car seats for vehicle travel, and high chairs for eating.

   b. Providers should limit the use of equipment such as strollers, swings, and bouncer seats/chairs for holding infants while they are awake.

   c. Providers should implement activities for toddlers and preschoolers that limit sitting or standing to no more than 30 minutes at a time.

   d. Providers should use strollers for toddlers and preschoolers only when necessary.

4. Television viewing, including video tapes and/or other electronic media, is not allowed for infants or for staff in an infant area. The playing of soothing background music in the infant area is acceptable.

5. Television viewing, including video tapes and/or other electronic media, cell phone, or other digital media, e.g., computer, iPad®, iTouch®, etc., for toddlers preschoolers (aged two-five) is limited to one hour per day, must be of educational content and a scheduled part of the approved daily plan of activities posted in the facility. The use of CD players to play music is acceptable.

6. In half-day programs, screen time, i.e., television viewing, including video tapes and/or other electronic media, cell phone, or other digital media e.g., computer, iPad®, iTouch®, etc., for preschoolers (aged two-five) is limited to 30 minutes per day, must be of educational content and a scheduled part of the approved daily plan of activities posted in the facility. The use of CD players to play music is acceptable.

   Television viewing by staff is not permitted in areas occupied by children except for the purposes as described in item 5 and 6, above.

Source: Miss. Code Ann. §43-20-8.

Rule 2.9.7 Indoor or Outdoor Physical Activity Child care providers are to provide infants, toddlers, and preschool children with opportunities to be physically active throughout the day.

1. Toddlers and preschool children will be provided the opportunity for light physical activity for at least 15 minutes per hour when children are not involved in their scheduled rest period.

2. Toddlers should accumulate a minimum of 30 minutes of structured moderate to vigorous physical activity per day.

3. Preschoolers should accumulate a minimum of 60 minutes of structured moderate to vigorous physical activity per day.

4. Caregivers should join in and lead the structured moderate to vigorous physical activities in which the children participate.

5. Structured physical activity should involve the performance of large muscle activities.

6. Half-day programs are only required to provide for physical activity for one-half (½) the time as stated above.

NOTE: Examples of moderate physical activity are aerobic dancing, light calisthenics, getting up and down from the floor, dancing, playing on school ground equipment, singing while actively moving about, etc. Examples of vigorous physical activity are running, jumping rope, performing jumping jacks, playing soccer, skipping, etc. Regardless of the activity, it should be age appropriate and within the physical ability limits of the child. Please, understand the above requirements do not mean 30 minutes or 60 minutes vigorous activity at one time. These 30/60 minutes of vigorous physical activity can and should be spread out in short time intervals, (e.g., 5-15 minute intervals) throughout the day.

Source: Miss. Code Ann. §43-20-8.

Subchapter 10: EQUIPMENT, TOYS, AND MATERIALS

Rule 2.10.1 General

7. Television viewing by preschool children shall be limited to ~~two hours~~ one hour per day and shall be educational programming only. Television viewing by staff is not permitted in areas occupied by children except for the purposes as described herein.

Source: Miss. Code Ann. §43-20-8.

Rule 2.10.7 Cribs: ~~Cribs shall be made of wood, metal, or approved plastic and have secure latching devices. They shall have slats spaced no more than two and three-eighths (2 3/8) inches apart, with a mattress fitted so that no more than two fingers can~~

~~fit between the mattress and the crib side. Drop-side latches shall securely hold sides in the raised position and shall not be reachable by the child in the crib. Cribs shall not be used with the drop down side down. There shall be no corner post extensions (over 1/16 inch), or cut outs in headboards in the crib. The use of stackable cribs is prohibited.~~

1. The facility shall provide a crib or other similarly commercially purchased bed unit, approved and designated for the purpose of sleeping. Mobile infants, at a minimum of eight months, may be placed on a mat during the transition period of crawling to walking. If such mat is used, it shall be a flame retardant, minimum of two (2) inch commercially purchased sleep mat, especially designated for the purpose of sleeping. All cribs, sleep units, and mats must be maintained clean, in sanitary condition and without chips, holes, fraying, tears, or stains.

2. The use of stackable cribs is prohibited.

Source: Miss. Code Ann. §43-20-8.

Rule 2.10.9 Rest Period Equipment

1. Individual beds, cots, mattresses, pads, or other acceptable equipment shall be used for rest periods, and children shall not be placed directly on the floor for rest periods. Bed linens, such as blankets or sheets, cannot be used in place of a bed, cot, mattress, or pad. These shall be kept in a sanitary condition. Once a sheet or blanket has been used by a child, it shall not be used by another child until it has been laundered.

6. The facility shall provide a crib or other similarly commercially purchased bed unit, approved and designated for the purpose of sleeping. Mobile infants, at a minimum of eight months, may be placed on a mat during the transition period of crawling to walking. If such mat is used, it shall be a flame retardant, minimum of two (2) inch commercially purchased sleep mat, especially designated for the purpose of sleeping. All cribs, sleep units, and mats must be maintained clean, in sanitary condition and without chips, holes, fraying, tears, or stains. Cribs, cots, and mats are to be a minimum of 24" to 36" apart or separated by a solid barrier. A minimum of 36 inches is recommended.

7. Children are not allowed to sleep in shared places, such as infant seats, strollers, swings, cozy areas, or on tables. If a child falls asleep in such shared place, he or she should me moved immediately to a sanitary individual sleeping place.

Source: Miss. Code Ann. §43-20-8.

Subchapter 11: BUILDINGS AND GROUNDS

Rule 2.11.1 Building

7. The ceiling, floor, and/or floor covering shall be properly installed, kept clean and in good condition, and maintained in good repair. Carpeting is prohibited in kitchen areas.

8. All parts of the child care facility used by children shall be lead-safe, well lighted, ventilated, and free of hazardous or potentially hazardous conditions, such as but not limited to, open stairs and unprotected low windows.

   a. All buildings intended for use as a child care facility constructed before 1965 shall be tested for lead. It is the responsibility of the facility applicant/operator to have a lead hazard screen or lead-based paint risk assessment of the facility done by an individual or company certified as a risk assessor by the Mississippi Commission on Environmental Quality. If the facility is found not to be lead-safe, it will not be allowed to operate as a child care facility until all required corrective measures have been taken and the facility is determined to be lead-safe by a certified risk assessor.

   b. All buildings intended for use as a child care facility, constructed prior to 1978, shall utilize MDEQ Lead Safe Certified individuals or companies for all renovation, repair and maintenance activities which disturb painted surfaces unless the paint to be disturbed has been documented to be lead-free by an individual or company that is MDEQ Lead Safe Certified as a risk assessor or inspector.

NOTE: It is recommended that child care facility operators contact the Mississippi Department of Environmental Quality at 601-961-5630 regarding any questions they may have about compliance with the laws and regulations related to lead and lead based paint.

17. All child care facilities are to be kept clean and in good repair.

Source: Miss. Code Ann. §43-20-8.

Rule 2.11.2 Indoor Square Footage

2. Rooms in which infants both play and sleep shall have a minimum of 40 square feet of usable space per child. There shall be at least ~~two feet~~ 24” to 36” between each crib. A minimum of 36” is recommended. Cribs with solid ends may be placed end-to-end.

5. Rooms in which toddlers both play and sleep shall have a minimum of 45 square feet of usable space per child. There shall be at least ~~two feet~~ 24” to 36” between each crib. A minimum of 36” is recommended. Cribs with solid ends may be placed end-to-end. However, if stackable cots, mats, or other storable sleeping equipment is utilized for sleeping the room shall be measured using the standard of 35 square feet per child. Should it be determined that the sleeping equipment is not

properly stored when not in use the capacity of the room will be determined using 45 square feet per child.

7. Rooms where toddlers sleep but do not play shall have a minimum of 25 square feet of usable space per child. There shall be at least ~~two feet~~ 24" to 36" between each crib. A minimum of 36" is recommended. Cribs with solid ends may be placed end-to-end.

Source: Miss. Code Ann. §43-20-8.

Rule 2.11.4 Kitchens

5. All kitchens and/or food/snack preparation areas in a child care facility shall be inspected as part of the child care inspection process

Source: Miss. Code Ann. §43-20-8.

Rule 2.11.5 Toilets and Hand Washing Lavatories

5. Toilets, urinals, hand washing lavatories, and sinks shall be clean and operational. Bathrooms, hand washing lavatories, and sinks shall be supplied with soap, and individual towels for drying hands. Each toilet shall be supplied with toilet paper.

Source: Miss. Code Ann. §43-20-8.

Rule 2.11.9 Outdoor Playground Area All playgrounds and playground equipment intended for use by children 2-12 years of age shall meet the standards set forth in the *Handbook for Public Playground Safety*, Publication No. 325, published by the U.S. Consumer Product Safety Commission or its successor as shown in Appendix "D."

5. The outdoor playground area shall be free of hazards and not less than 30 feet (measured horizontally parallel to the ground) from electrical transformers, high-voltage power lines, electrical substations, railroad tracks, or sources of toxic fumes or gases. Hazards, including but not limited to air conditioner units and utility mains, meters, tanks, and/or cabling shall be inaccessible to children. Fencing at least four feet high shall be provided around the outdoor playground area. Fencing higher than four feet but not to exceed eight feet may be required if the licensing authority determines that a hazard exists. Fencing twist wires and bolts shall face away from the playground. As an alternative, exposed bolt ends may be cut to no more than two exposed threads. Then the bolt ends shall be ground/sanded smooth or capped.

Source: Miss. Code Ann. §43-20-8.

Rule 2.11.13 Pest Control All child care facilities are to use a contractor licensed by the State of Mississippi to control pests, e.g., rats, mice, insects, etc. ~~**Any** pest control contractor used by a child care facility shall be licensed by the State of Mississippi.~~ Before a pest control contractor is used, it is the responsibility of the operator to ensure

that the pest control contractor is **properly licensed. Use of agricultural chemicals for pest control is strictly prohibited**.

Source: Miss. Code Ann. §43-20-8.

Subchapter 13: NUTRITION, ~~AND~~ MEALS, FOOD SAFETY

Rule 2.13.3 Refreshments

1. Refreshments may be provided by parents only on a child's birthday or other special celebration such as Valentine's Day, Easter, Christmas, Graduation, etc. Food provided to children, including vending machines at the facility, must meet nutritional guidelines as set forth in Appendix "C."

2. It is recommended that foods for the event that are brought to the facility by parents should be "store bought" and not "home cooked."

3. Food items for the event may include cake, ice cream, fresh fruit, cheese and crackers, etc. Other items, i.e., party favors such as stickers, books, toothbrushes, and crayons, etc., are encouraged.

Source: Miss. Code Ann. §43-20-8.

Rule 2.13.6 Food Safety and Food Manager

1. All kitchens and/or food/snack preparation areas in a child care facility must be inspected as part of the child care inspection process.

2. Each child care facility must have a Certified Food Manager meeting the standards set forth in Rule 1.2.2.1.g. The only exception would be if two facilities had COMPLETELY different operating hours. If this situation exists then could one Certified Food Manager could serve more than one facility. Should such occur documentation to that affect must be in the each facility's file.

3. A Certified Food Manager shall be present during meal preparation. In the absence of the Certified Food Manager, an individual trained in food service must be present.

Source: Miss. Code Ann. §43-20-8.

Subchapter 14: DISCIPLINE AND GUIDANCE

Rule 2.14.1 Prohibited Behavior The following behaviors are prohibited by anyone (i.e., parent, caregiver, or child) in all child care settings:

3. Abusive or profane language to include but not limited to yelling at, and/or using harsh tones toward the children or in close proximity (hearing distance) to children.

Source: Miss. Code Ann. §43-20-8.

Subchapter 15: TRANSPORTATION

Rule 2.15.3 Occupant Restraints

1. All children will be properly restrained whenever they are being transported in a motor vehicle.

   a. Every person transporting a child under the age of four (4) years in a passenger motor vehicle, and operated on a public roadway, street or highway, shall provide for the protection of the child by properly using a child passenger restraint device or system meeting applicable federal motor vehicle safety standards, e.g., child safety seat.

   b. Every person transporting a child in a passenger motor vehicle operated on a public roadway, street or highway, shall provide for the protection of the child by properly using a belt positioning booster seat system meeting applicable federal motor vehicle safety standards if the child is at least four (4) years of age, but less than seven (7) years of age and measures less than four (4) feet nine (9) inches in height or weighs less than sixty-five (65) pounds.

   c. **Any** vehicle equipped with seatbelts is subject to the requirements in items a. and b. above

6. An individual seat restraint must be used for each child. The use of an individual seat restraint for two or more children is not allowed.

Source: Miss. Code Ann. §43-20-8.

Subchapter 16: DIAPERING AND TOILETING

Rule 2.16.1 Diaper Changing Area: Each room in which diaper-wearing children play shall contain a diapering area. A diapering area shall contain a hand washing lavatory with hot and cold running water, a smooth and easily cleanable surface, a plastic-lined, covered garbage receptacle, and sanitizing solution. The hand washing lavatories located in a diapering area shall not be included in the ratio of hand washing lavatories to children for determining a child care facility's capacity nor shall they be used for any other purpose. Example: The diaper-changing sink may not be used for washing/rinsing cups, baby bottles, food, dishes, utensils, pacifiers, etc. In addition, the diaper changing area is not to be used as a storage area for anything other than those items used when changing diapers, such as but not limited to, gloves, towels, soap, etc. For proper diaper changing procedure, see Appendix G - PROCEDURE FOR DIAPERING A CHILD.

Source: Miss. Code Ann. §43-20-8.

Subchapter 18: FEEDING OF INFANTS AND TODDLERS

Rule 2.18.3 Formula Storage: Formula shall be labeled with the child's name, dated, and placed in the refrigerator upon arrival.

Source: Miss. Code Ann. §43-20-8.

Subchapter 22: HEARINGS, EMERGENCY SUSPENSIONS, LEGAL ACTIONS AND PENALTIES

Rule 2.22.9 Violations and Penalties

1. Any Class I violation of these regulations, in the discretion of the licensing agency, is punishable by a monetary penalty of five hundred dollars ($500.00) for a first occurrence and a monetary penalty of one thousand dollars ($1000.00) for each subsequent occurrence of the same violation. Each violation is considered a separate offense.

   The following are Class I violations:

   c. Allowing a child to be unattended at a licensed child care facility before or after operating hours. This also includes a child being left alone during operating hours when no staff is present at the facility. Further, a child left unattended outside of a child care facility is also considered to be a Class I violation.

2. Any Class II violation of these regulations, in the discretion of the licensing agency, is punishable by a monetary penalty of fifty dollars ($50.00) for a first occurrence and a monetary penalty of one hundred dollars ($100.00) for each subsequent occurrence upon further inspections within the same licensure term. Each violation is considered a separate offense. Example: If a facility is five children over maximum capacity it constitutes five separate Class II violations and would be subject to a two hundred fifty dollar ($250.00) or five hundred dollar ($500.00) monetary penalty, whichever is applicable.

   The following are Class II violations:

   c. Failure to have a proper criminal record check in a personnel record (Rule 2.5.2 or Rule 2.6.4(1f)).

   d. Failure to have a proper child abuse central registry check in a personnel record (Rule 2.5.2 or Rule 2.6.4(1f)).

   k. Unauthorized individual assigned administrative and supervisory responsibility for the facility when the director is absent or violation of Rule 2.5.7 Director Designee or Rule 2.8.1(3).

   p. Failure to have adequate staff on site holding a valid CPR certificate. (Rule 2.8.1(4)).

q. Failure to have adequate staff on site holding a valid First Aid certificate. (Rule 2.8.1(5))

Source: Miss. Code Ann. §43-20-8.

APPENDIX C

Nutritional Standards

Introduction

Meals shall meet the nutritional standards as prescribed in this section. A child care facility shall provide adequate and nutritious meals prepared in a safe and sanitary manner.

Healthy diets help children grow, develop, and perform well in learning environments. Healthy diets contain the amounts of essential nutrients and calories needed to prevent nutritional deficiencies while preventing an excess amount of discretionary calories. Planned meals and snacks provide the right balance of carbohydrate, fat, and protein to reduce risks of chronic diseases, and are part of a full and productive lifestyle. Such diets are obtained from a variety of foods.

Nutrition and feeding practices for children strongly affect the development and long-term health of the child. Proper nutritional care during the early years is essential for intellectual, social, emotional, and physical growth. It is also necessary that an environment be provided which encourages the development of good food habits.

Meals and vending services shall meet the standards from the Offices of Healthy Schools and Child Nutrition for the Mississippi State Department of Education as well as USDA Food and Nutrition Service guidelines.

THE GOALS OF A CHILD CARE FACILITY IN RELATION TO NUTRITION SHALL BE:

1. Menus shall be nutritionally adequate and consistent with the Dietary Guidelines for Americans.
2. Foods shall be provided in quantities and meal patterns that balance energy and nutrients with children's ages, appetites, activity levels, special needs, and cultural and ethnic differences in food habits.
3. Parents shall be involved in the nutrition component of their child-care facility.
4. A variety of fruits, vegetables, and whole-grain products shall be offered to children for meals and snacks. Mealtime should be used as an opportunity to teach nutrition and/or food concepts.
5. The addition of fat, sugar, and sources of sodium shall be minimal in food preparation and service.
6. Food preparation and service shall be consistent with best practices for food safety and

sanitation.

7. Furniture and eating utensils shall be age-appropriate and developmentally suitable to encourage children to accept and enjoy mealtime.
8. Child-care personnel shall encourage positive experiences with food and eating.

9. Caregivers shall receive appropriate training in nutrition, food preparation, and food service.
10. Child-care facilities shall obtain assistance as needed from the Child Care Licensure Division and the supportive staff.
11. Nutrition education for children and for their parents shall be encouraged as a component of the child-care program.
12. Child-care programs must comply with local and state regulations related to wholesomeness of food, food preparation facilities, food safety, and sanitation.
13. Family style dining is encouraged.

Based upon the American Dietetic Association Benchmarks for Nutrition Programs in Child-Care Settings

FEEDING SCHEDULE FOR INFANTS AND CHILDREN ONE YEAR AND OLDER

1. Children's food needs are based on the amount of time spent in the child care facility.

2. Any child in a child care facility at the time of service of a meal or snack will be served that meal or snack

3. Child care facilities that are open 24 hours are required to serve three meals and three snacks.

~~**If you are open:** **You must serve:**~~

~~1. Nine hours or less~~ ~~(a) Two snacks and one meal~~
~~***OR***~~
~~(b) One snack and two meals~~

~~2. Over nine hours~~ ~~(a) Two snacks and two meals~~
~~***OR***~~
~~(b) Three snacks and one meal~~

IF YOU ARE OPEN	**YOU MUST SERVE**		
Nine hours or less	Two snacks and one meal	OR	One snack and two meals
Over nine hours	Two snacks and two meals	OR	Three snacks and one meal
24 hours or during all meals	Three meal and three snacks: one snack should be a late night snack only served to children who are awake.		

I. **Meal Time**

Meals and snacks shall be served at regularly scheduled times each day.

The same meal or snack shall not be served more than one time in any 24-hour (one-day) period.

No more than four and no less than a two and one-half hour period must elapse between the beginning of a meal and a snack.

If breakfast is not served, then a mid-morning snack shall be provided.

Since not all children arrive at the facility at the same time, certain parental options regarding breakfast will be allowed as follows:

1. Parent can feed the child prior to arrival at the child care facility.

2. The parent may have the meal provided by the child care facility.

Note: Either option above must be documented and included in the child's record.

Outside foods shall not be brought into the facility, with the exception of special dietary needs. Exempt facilities are facilities that operate less than ~~four~~ six hours and as noted in the regulations, otherwise noted in other sections of the standards. Any outside foods shall meet the Office of Healthy School and MSDH Nutrition Standard guidelines.

II. **Meal Time Environment**

Age appropriate utensils, plates, bowls, cups, and dining area shall be provided.

Children shall not wait longer than fifteen minutes at the table for food to be served.

Sufficient time shall be allowed for children to wash their hands and prepare for the meal.

Mealtime shall be used for socialization, and shall be a relaxed, happy time for the children. No media, e.g., televisions, videos, or DVD's may be viewed during meal and snack times. Family style dining is encouraged with serving platters, bowls, and pitchers on the table so that all present can serve him/her self. Children are encouraged to assist with table setting and bowling up fruits for dessert. All foods served must meet the serving guidelines, and be age appropriate. "Seconds" of foods can be served as indicated at the request of the child or by hunger cues.

A caregiver shall sit and join the children while they are eating. When caregivers are allowed to eat with the children, which is encouraged, staff will eat items that meet nutrition standards. It is suggested that the staff eat the same food items that are served to the children. The staff will encourage social interaction, conversation, and use the mealtime for education purposes. Extra assistance and time shall be provided for slow eaters.

Caregivers shall not eat foods outside of the foods served in the facility in front of the children.

Food shall not be used as a reward or punishment. Children will not be encouraged to "clean your plate," but encouraging children to try two bites of each food served is acceptable.

~~Children shall be encouraged to eat but not forced to eat.~~

Additional servings shall be provided for the child who requests more food at a meal or snack. It is at the discretion of the facility and knowledge of the child's eating pattern to allow seconds on food items. This time to teach children on portion control, monitoring extra intake, and better food selections is higher in nutritional value.

Meals and snacks provided by a parent must not be shared with other children, unless a parent is providing baked goods for a celebration or party being held at the operation. Foods for a party or celebration shall meet the Office of Healthy School guidelines.

Children will be permitted in meal preparation areas when under the direct supervision of a staff person, when there is no danger of injury from equipment, and for instruction/teaching purposes only.

III. **Menus**

A complete two-week cycle of menu plans shall be submitted annually to Child Care Licensure as part of the renewal process. Although a minimum complete, two-week cycle menu is required to be submitted annually, child care facilities at their discretion may submit a 4 to 8 week cycle of menu plans.

Daily menus for all meals and snacks prepared and/or served in the child care facility shall be plainly posted. Any substitution shall be of comparable food value and shall be recorded on the menu and dated.

Menus shall be written at least one week in advance. Menus can be completed on a rotating cycle for 4-12 weeks.

Menus shall be posted in the food preparation area and in a conspicuous place in the child care facility at all times.

Menus shall be planned to include food with variety in texture, color, and shape. Record of dated menus served, and any substitutions made, shall be kept on file for a minimum of one year.

New food shall be introduced to help develop good food habits. Introduce only one new food per meal or snack. Foods used for activities/teaching can be included on the written record of foods served for the day.

It is the facility's responsibility to discuss recurring eating problems with the child's parent.

IV. **Child Requiring a Special Diet**

A child requiring a special diet due to medical reasons, allergic reactions, or religious beliefs, shall be provided meals and snacks in accordance with the child's needs. If medical reasons exist for the special diet, a medical prescription from the child's physician stating that the special diet is medically necessary is required. Information required for dietary modifications include:

- Child's full name and date of instructions, updated annually;
- Any dietary restrictions based on the special needs;
- Any special feeding or eating utensils;
- Any foods to be omitted from the diet and any foods to be substituted;
- Limitations of life activities;
- Any other pertinent special needs information;
- What, if anything, needs to be done if the child is exposed to restricted foods.

Religious or ethnic requests should include the above information as needed, plus a certified statement of request based upon the religious or ethnic beliefs of the family.

The facility shall not serve nutrient concentrates and supplements such as protein powders, liquid protein, vitamins, minerals, and other nonfood substances without written instructions from the child's physician.

The child's parent shall meet with the facility staff and/or director to review the written instructions. Such instructions shall list any dietary restrictions/requirements and shall be signed and dated by the child's physician requesting the special diet.

Parents of children with severe restrictions and dietary needs will be given a copy of the facility's menu to pre-select foods to be served. The parents will be responsible for ensuring the accuracy of foods served based upon the preplanned menu.

The child care facility may request the parent to supplement food served by the child care facility. When food is supplied by the parent, the child care facility shall be responsible for assuring that it is properly stored and served to the child in accordance with the diet instructions on file at the child care facility. Any food item that must cooked, shall be prepared by the facility, such as a soy patties. Meals and snacks provided by a parent must not be shared with other children, unless a parent is providing baked goods for a celebration or party being held at the operation.

Records of food intake shall be maintained when indicated by the child's physician.

Vegetarian/Vegan Dietary Requests

Request for a vegetarian/vegan diet shall be accommodated with the same information completed as for dietary modifications. Specialty items may be supplied by the parent to meet nutritional needs. Contact with the nutritionist with MSDH is recommended.

To the extent authorized by Federal laws, the facility may determine that the special nutritional needs of a child cannot be met at the facility and the child may be excluded from admission into the facility.

V. **Food Preparation**

Recipes shall be used and a file of recipes used to prepare the food shall be maintained.

Foods shall be prepared in a form that is easy for children to handle. Bite size pieces and finger foods are suitable. Bones shall be removed from any food served to any child in the child care setting.

Foods shall be prepared as close to serving time as possible to preserve nutrients, flavor, and color.

Food should not be highly seasoned. No extra salt or fats should be added to the foods in cooking. The use of salt free, low fat products is allowed. Children need to learn the flavors of food.
Raw vegetables and foods that may cause choking in young children shall not be served to children less than two years of age.

VI. **Choking Prevention**

A caregiver shall join the children while they are eating. This is an opportunity to teach socialization skills, nutrition education, and is a safety measure to help prevent choking.

Children should be encouraged to eat slowly, take small bites, and chew well before swallowing.

FOODS THAT MAY CAUSE CHOKING

Sausage shaped meats (hot dogs)*	Pop Corn
Hard Candy*	Chips*
Nuts	Thick Pretzels Rods* Thin pretzel sticks and rounds would be allowed
Grapes	Chunks of peanut butter
Gum*	Marshmallows
~~Raisins~~	Dried Fruits

*Not allowed to be served

To Reduce Choking Hazards

Cook food until soft and cut ~~hot dogs~~ into ~~short strips, not round slices. Serve other foods in~~ thin slices or small pieces. Remove bones from meat, chicken, and fish, and remove seeds and pits from fruit. With toddlers, cutting foods into "pea" size is recommended.

VII. **Feeding of Infants**

When a pregnant mother is visiting the facility to consider enrollment, breastfeeding should be encouraged.

Breast milk is the recommended feeding for infants and should be encouraged and supported by child care facility staff. The mother may choose to come to the child care facility to nurse her infant, or may choose to supply bottles of expressed breast milk for the child care facility staff to feed the infant. To help a mother be successful with breastfeeding the faculty may:

1. Encourage the mother to come to the facility to breastfeed and provide a
   - Quiet, comfortable and private place to feed;
   - Place to wash the hands;
   - Pillow to support her infant if desired;
   - A comfortable chair, stool for feet while nursing;
   - The mother may opt to nurse while in the infants room;

2. Encourage the mother to provide a back-up supply of frozen breast milk that is labeled with the infant's name and date of expression. The mother's expressed milk shall be used for her infant only. Note: *Excessive shaking of human milk may damage some components that are valuable to the infant.*

The Centers for Disease Control's (CDC) guidelines for storage of frozen expressed breast milk are as follows:

- Freezer compartment of a refrigerator at a temperature of 5° F or -15° C the expressed breast milk can be safely stored for 2 weeks
- Freezer compartment of refrigerator with separate doors 0° F or -18° C the expressed breast milk can be safely stored for 3-6 months
- Freezer compartment of refrigerator with separate doors -4° F or -20° C the expressed breast milk can be safely stored for 6-12 months

Note: Store milk toward the back of the freezer, where temperature is most constant. Milk stored for longer durations in the ranges listed is safe, but some of the lipids in the milk undergo degradation resulting in lower quality. You can go to the CDC website at http://www.cdc.gov/breastfeeding/recommendations/handling_breastmilk.htm for more information.

3. Note: for the breast fed infant, it is acceptable to introduce iron-fortified cereal earlier, at four months if desired, but preferably at 6 months.

A written schedule for feeding the infant shall be provided by the parent and posted for reference by the child care facility staff.

Feeding should be by hunger cues whenever possible. Hunger cues may include:

- Sucking on his tongue, lips, hands, or fingers while asleep
- Moving his arms and hands toward his mouth
- Restless movements while asleep
- Rapid eye movements under his eyelids
- Opening his mouth when his lips are touched
- "Rooting" or searching for the nipple
- Making small sounds

Late hunger cues include:

- Crying
- Fussiness

Signals when an infant is full and feeding should stop:

- "Falls off" the breast, releasing the nipple;
- Falls asleep; or
- Relaxes his body and opens his fists.

~~Formula or breast milk~~ Breast milk or formula shall be brought to the child care facility daily, ready to be warmed and fed. Each bottle shall be labeled with the infant's name and the date. No cereal, juice or other foods may be added to the infant's breast milk/formula without a physician's written request, as done for a child with special needs.

Bottles should be warmed for five minutes in a pan of hot, not boiling water; **never** microwave. Before feeding, test the temperature by squirting a couple of drops on the back of your hand.

At the end of each feeding, discard any milk left in the bottle. Staff will send all used bottles home with the parent for proper cleaning and sanitizing.

Age-appropriate solid foods (complimentary foods) may be introduced no sooner than when the child has reached 4 months of age, but ideally at six months. The first food introduced usually is cereal mixed with breast milk or formula (not in a bottle). Adding juice to dry cereal is not allowed.

Commercially prepared ~~B~~ baby foods shall be brought in unopened jars and labeled with the infant's name. Home prepared/blended and home canned infant foods shall not be served. A facility may chose to mash and puree the foods served to older children for the

infants 7 months to one year - no additional juice, sauces, or fats may be added to the pureed foods.

Iron-fortified dry infant cereal shall be brought in sealed container premeasured for each feeding and labeled with the infant's name.

Juice ~~is discouraged for~~ shall not be served to infants (children less than 12 months of age).

A small amount of water is encouraged at 8-12 months.

Infants shall be held cradled in the arms during feeding. At no time shall an infant be fed by propping a bottle.

Introduction of solid foods to an infant should be done in consultation with the parent and/or according to the schedule of the Mississippi State Department of Health Infant Feeding Guide.

Solid foods must be spoon-fed. No solid foods shall be fed by bottle or infant feeder without written direction from a physician.

Infants are fed when hungry by noting hunger cues, such as crying, being restless. Feeding is stopped when it is determined that the infant is satisfied. Signs of satiety include, refusing the nurse, turning away from the nipple, falling asleep.

Infants are encouraged to start using a cup at six to nine months, based upon motor skills. When the cup is used, the breast milk or formula may be brought into the center in a clean closed container that is clearly labeled. By the age of one, all children should be off a bottle.

Older infants are encouraged to hold and drink from cups, to use child appropriate eating and serving utensils. Self-feeding should be encouraged. All food should be served in a manner to prevent choking, such as mashing, cutting in small "pea" size portions.

Breast or formula is served to at least 12 months. Cow's milk is not served until age one, unless provided with a written exception from the infant's physician. Children ages one to two, shall be served whole cow's milk, after age two, toddlers should be served fat free/skim milk or 1% milk. *When there are children older than two in the classroom with younger children, all children shall be served the whole milk.*

Guidelines for Milk Storage and Use for All Infants

Storage Method and Temperature	Maximum Amount of Time For Storage
Room (25 C or 77 F)	**4 hours**
Refrigerator (4 C or 39 F)	**48 hours**
Previously thawed –	
Refrigerated milk	**24 hours**

Freezer (-20 C or 0 F)	**3 months**

From the ACOG/AAP publication: Breastfeeding Handbook for Physicians

When centers are reimbursed for meals and must supply formula for their infants, only ready to use formula may be purchased for use. The center may require the parents to supply clean bottles daily. If the center supplies the bottles, there must be provisions in place for the proper cleaning, sanitizing, and drying of all bottles and supplies outside of the infant room.

FEEDING SCHEDULE FOR INFANTS THROUGH ONE YEAR

INFANT'S FOOD NEEDS ARE BASED ON THE AMOUNT OF TIME SPENT IN THE CHILD CARE FACILITY.

ANY INFANT IN A CHILD CARE FACILITY AT THE TIME OF SERVICE OF A MEAL OR SNACK SHALL BE SERVED FOODS APPROPRIATE TO THE AGE.

MEAL/SNACK	**BIRTH THROUGH ~~3~~ 5 MONTHS**	**~~4 THROUGH 7 MONTHS~~**	**6 ~~8~~ THROUGH ~~11~~ 12 MONTHS**
Breakfast	4-6 fl. oz. breast milk or formula	~~4-8 fl. oz. breast milk of formula~~ ~~1-3 Tbsp. prepared infant cereal (optional)~~	6-8 fl. oz. breast milk or formula 2-4 Tbsp. prepared infant cereal (optional) 1-4 Tbsp. fruit and/or vegetable(infant or mashed)
Lunch or Supper	4-6 fl. oz. breast milk or formula	~~4-8 fl. oz. breast milk of formula~~ ~~1-3 Tbsp. prepared infant cereal (optional)~~ ~~1-4 Tbsp. fruit and/or vegetable(infant or mashed)(optional)~~	6-8 fl. oz. breast milk or formula 2-4 Tbsp. prepared infant cereal (optional) 1-4 Tbsp. fruit and/or vegetable(infant or mashed) 1-4 Tbsp. infant meat
Supplement/Snack	4-6 fl. oz. breast milk or formula	~~4-8 fl. oz. breast milk of formula~~	2-4 fl. oz. breast milk or formula 0-1/2 dry bread or 0-2 crackers (optional)

Infant cereal and formulas shall be iron fortified. Infant feeding is individualized after consultation with the parent and by hunger cues from the infant.

MENU PLANNING

Dietary Guidelines for Americans provide assistance in planning meals for ages two and older, which will promote health and prevent disease.

The guidelines, applied to child care feeding are:

1. Offer a variety of foods.

2. Serve meals and snacks that help maintain a healthy weight.

3. Serve fresh, ~~or~~ frozen, canned, or dried vegetables, fruits whenever possible, and whole grain products.

4. Avoid excessive fat, saturated fat, and cholesterol. No fried foods or foods with transfats shall be served.

5. Use and serve sugar only in meal preparation and then in moderation. No concentrated sweets, such as candy, syrup, sweetened drinks sodas, or flavored milks may be served.

6. Limit ~~Use and serve high~~ sodium products ~~only in moderation; and limit~~ and the use of salt.

7. Promote an alcohol, tobacco and drug free lifestyle for children, parents, and caregivers. ~~, and~~

8. Promote and encourage daily physical activity.

PARTIES AND SPECIAL OCCASIONS

Parties and special party type events should not be held more that once a month. Food for parties should be prepared at the facility when possible. It is recommended that if foods for the event are brought to the facility by parents it should be "store bought" and not "home cooked."

It is suggested that a plain "store bought" cake be served. Other items may include ice cream, fresh fruit, cheese and crackers, and party favors such as stickers, books, toothbrushes, crayons, etc., are encouraged.

~~MEAL PATTERNS FOR CHILDREN IN CHILD CARE FACILITIES~~

~~One, all, or any combination of breakfast, lunch, supper, and supplements between meals (snacks) may be served at child care facilities depending upon the age child and the hours of operation. A pattern for each meal is given that will show how total nutrients needs for the day can be met.~~

~~BREAKFAST~~	~~Ages 1yr-2yr~~	~~Ages 3yr-5yr~~	~~Ages 6yr-12yr~~

~~Milk *Must be fluid*~~	~~½ c.~~	~~¾ c. *Can change to low fat or skim*~~	~~1 c. *Can use low fat or skim*~~
~~Fruit or 100% Juice~~	~~¼ c.~~	~~½ c.~~	~~½ c.~~
~~Grains/Breads~~ ~~Enriched bread~~ ~~Enriched dry cereal~~ ~~Enriched hot cereal~~ ~~Enriched pasta, noodle~~	~~1 serving~~ ~~½ slice~~ ~~¼ c. OR ⅓oz.~~ ~~¼ c.~~ ~~¼ c.~~	~~1 serving~~ ~~½ slice~~ ~~⅓ c. OR ½ oz.~~ ~~⅓ c.~~ ~~¼ c.~~	~~1 serving~~ ~~1 slice~~ ~~¾ c. OR 1 oz.~~ ~~½ c.~~ ~~½ c.~~

~~**SNACK**~~ ~~(supplement)~~ ~~Select 2 out of the 4 components.~~	~~**Ages 1yr-2yr**~~	~~**Ages 3yr-5yr**~~	~~**Ages 6yr-12yr**~~
~~Milk *Must be fluid*~~	~~½ c.~~	~~½ c. *Can change to low fat or skim*~~	~~1 c. *Can use low fat or skim*~~
~~Vegetable or Fruit or 100% Juice~~	~~½ c.~~	~~½ c.~~	~~¾ c.~~
~~Meat/Meat Alternate~~ ~~Cooked Meat, no bone~~ ~~Cheese~~ ~~Egg~~ ~~Cooked Dry Beans/Peas~~ ~~Peanut butter~~ ~~Yogurt, plain or sweetened~~	 ~~½ oz.~~ ~~½ oz~~ ~~1~~ ~~⅛ c.~~ ~~1 Tbsp.~~ ~~2 oz. OR ¼ c.~~	 ~~½ oz.~~ ~~½ oz.~~ ~~1~~ ~~⅛ c.~~ ~~1 Tbsp.~~ ~~2 oz. OR ¼ c.~~	 ~~1 oz.~~ ~~1 oz.~~ ~~1~~ ~~¼ c.~~ ~~2 Tbsp.~~ ~~4 oz. OR ½ c.~~
~~Grains/Breads~~ ~~Enriched bread~~ ~~Enriched dry cereal~~ ~~Enriched hot cereal~~ ~~Enriched pasta or noodles~~	~~1 serving~~ ~~½ slice~~ ~~¼ c. OR ⅓ oz.~~ ~~¼ c.~~ ~~¼ c.~~	~~1 serving~~ ~~½ slice~~ ~~⅓ c. OR ½ oz.~~ ~~⅓ c.~~ ~~¼ c.~~	~~1 serving~~ ~~1 slice~~ ~~¾ c. OR 1 oz.~~ ~~½ c.~~ ~~½ c.~~

~~IF milk is used as a component, then juice cannot be served as another component for snack times.~~
~~Meat is cooked and lean without bone.~~
~~Milk includes whole, low fat, skim, buttermilk, or flavored milk. After age two, low fat or skim milk is recommended.~~
~~Nuts or seeds may be used as a meat alternate for snack time, but is not recommended.~~
~~Use whole grain breads, pasta, and rice whenever possible.~~

~~**LUNCH or SUPPER**~~ ~~Select items from each of the 4 components.~~	~~**Ages 1yr-2yr**~~	~~**Ages 3yr-5yr**~~	~~**Ages 6yr-12yr**~~
~~Milk *Must be fluid*~~	~~½ c.~~	~~¾ c. *Can change to low fat or skim*~~	~~1 c. *Can use low fat or skim*~~

~~Vegetable or Fruit or 100% Juice~~ ~~**Must include 2 different foods - 1 fruit & 1 vegetable to total the serving amount**~~	~~¼ c. total~~ ~~⅛ c. vegetable~~ ~~and~~ ~~⅛ c. fruit~~	~~½ c. total~~ ~~¼ c. vegetable~~ ~~and~~ ~~¼ c. fruit~~	~~¾ c. total~~ ~~⅜ c.vegetable~~ ~~and~~ ~~⅜ c. fruit~~
~~Meat/Meat Alternate~~ ~~- Cooked Meat, no bone~~ ~~- Cheese~~ ~~- Egg~~ ~~- Cooked Dry Beans/Peas~~ ~~- Peanut butter~~ ~~- Yogurt, plain or sweetened~~	 ~~1 oz.~~ ~~1 oz~~ ~~1~~ ~~¼ c.~~ ~~2 Tbsp.~~ ~~4 oz. OR ½ c.~~	 ~~1½ oz.~~ ~~1½ oz.~~ ~~1~~ ~~⅜ c.~~ ~~3 Tbsp.~~ ~~6 oz. OR ¾ c.~~	 ~~2 oz.~~ ~~2 oz.~~ ~~1~~ ~~½ c.~~ ~~4 Tbsp.~~ ~~8 oz. OR 1 c.~~
~~Grains/Breads~~ ~~- Enriched bread~~ ~~- Enriched dry cereal~~ ~~- Enriched hot cereal~~ ~~- Enriched pasta or noodles~~	~~1 serving~~ ~~½ slice~~ ~~¼ c. OR ⅓ oz.~~ ~~¼ c.~~ ~~¼ c.~~	~~1 serving~~ ~~½ slice~~ ~~⅓ c. OR ½ oz.~~ ~~⅓ c.~~ ~~¼ c.~~	~~1 serving~~ ~~1 slice~~ ~~¾ c. OR 1 oz.~~ ~~½ c.~~ ~~½ c.~~

~~Must serve a Vitamin C source daily – refer to the guidelines.~~
~~Must serve a Vitamin A source every other day, three times a week – refer to the guidelines.~~
~~Two vegetables or two fruits may be served at the mealtime, but it is recommended to serve a vegetable and a fruit for variety.~~

Meal Pattern Points to Remember

Keep in mind the following points when you plan menus to meet meal pattern requirements for each of the food groups.

- Plan your meats first. Then select fruits and vegetables, making sure that you have a Vitamin C source daily and a Vitamin A source every other day, or three times a week. Refer to the vitamin tables. Limit starchy vegetables to once/day - these include lima beans, butterbeans, white/sweet potatoes, English peas, black-eye peas, field peas, Crowder peas, cream and whole kernel corn, any dried pea/bean(unless counted for a meat substitute).

- Two vegetables or two fruits may be served at the mealtime, but it is recommended to serve a vegetable and a fruit for variety. Including brightly colored fruits and vegetables, such as tomatoes, broccoli, carrots, greens, strawberries, melon, peaches, will help to meet the vitamin requirements.

- The same meal may not be served more than once in a day (i.e. facilities who are open for lunch and supper may not serve the same meal for both meals).

- Snacks are to be served ~~mid-morning (if required) and mid~~ early afternoon and late afternoon, usually 30-60 minutes before closing. Water can be used as the beverage while foods are served. Snack time is an excellent time to introduce fruits and vegetables.

- Use only 100-percent-strength juice for snack no more than once a day. Give fruit for

breakfast/morning snack instead of juice.

- Juice should not be served as part of the snack when milk is the only other component. It is poor menu planning to offer such a combination since it provides too much liquid for children.

- Fruit-flavored drinks, sport drinks, soft drinks, caffeinated beverages, artificially sweetened beverages shall not be served.

- Avoid serving two forms of the same fruit or vegetable in the same day. Example: an orange and orange juice or an apple and applesauce are combinations that should not be used. Serve a variety of vegetables and fruits to ensure a nutritionally well-balanced meal.

- Dry milk shall not be used as a milk beverage, but may be used for cooking purposes.

- Guidelines from USDA FNS (US Department of Agriculture Food Nutrition Supplement) program are used as the standard for menu planning and guidelines. However, when one set of guidelines are stricter then the stricter guidelines shall be enforced (in comparing MSDH and USDA FNS). Emphasis shall be placed on serving more whole grains and fewer foods high in fat, sugar, and sodium.

- Drinking water shall be freely available to children of all ages and offered at frequent intervals. Extra water served with meals, snacks, and during and after physical activity ~~playtime~~ is encouraged. Facilities may have water fountains in the classroom or dining area. This water source should be encouraged before and after all meals and snacks and takes the place of water served at the table.

- To prevent nutrient and vitamin loss from foods during preparation, cooking, or storage, try to
    - Serve fruits and vegetables raw as appropriate for the age. The risk of choking is greater for the child under the age of two.
    - Steam, boil, or simmer foods in a very small amount of water, or microwave for the shortest time possible.
    - Cook potatoes in their skins. Be sure to wash the dirt off the outside of the potato.
    - Refrigerate prepared juices and store them for no more than two to three days.
    - Store cut raw fruits and vegetables in an airtight container and refrigerate—do not soak or store in water. Nutrients may be diluted from soaking in water. Manufacturer packaged fresh fruits and vegetables are the exception due to packaging processes.

MEAL PATTERNS FOR CHILDREN IN CHILDCARE FACILITIES: BREAKFAST

BREAKFAST	**AGES 1YR-2YR**	**AGES 3 YR-5 YR**	**AGES 6 YR–12 YR**
Milk (Must be fluid, skim/fat free), or 1% milk)	½ c. (whole milk)	¾ c.	1 c.
Fruit or Vegetable	¼ c.	½ c.	½ c.
Grains/Breads			

Enriched, Whole Grain Bread OR Enriched Dry Cereal OR Enriched Hot Cereal OR Enriched, Whole Grain Pasta, Noodles, Rice	½ slice ¼ c. OR 1/3oz. ¼ c. ¼ c.	½ slice 1/3 c. OR ½ oz. 1/3 c. 1/3 c.	½ slice ¾ c. OR 1oz. ½ c. ½ c.
Water	½ c.	¾ c.	1 c.

Milk:

Milk shall be served at Breakfast. The milk shall be pasteurized fluid milk, fortified with vitamin A and D. Whole milk is served to infants and toddlers less than 2 years of age. After age two, skim/fat free milk or 1% milk shall be served

Soymilk may be served when indicated with dietary restrictions.

Bread and Bread Alternates:

Use enriched whole-grain breads and bread alternatives. Dry cereals need to be of high fiber and not sugar coated. Hot cereals cannot be instant. Whole grain pasta, noodles, or brown rice may be used occasionally for the breakfast meal.

Breakfast breads may include muffins, biscuit, toast, breakfast bread, no more than weekly pancake or waffle (with no syrup). Crust used as part of the main dish (i.e., for quiche) is allowed as a bread alternate. These items may not be served: doughnuts, honey buns, breakfast tarts, pastries, packaged snack cakes, and other high fat/sugar foods.

Fruits and Vegetables:

Use fresh, canned, dried, or frozen fruit for breakfast. No sugar may be used in the packaging or preparation of the fruit. Canned or frozen fruit should be packed in juice or water - not syrup or sugar packed.

Vegetables, such as tomatoes, may be used occasionally for the breakfast meal. Cultural differences may also dictate that items such as tomatoes, peppers, onions, or salsas may be served with brown rice for the vegetable and bread component at breakfast.

Water:

Water is to be made available with all meals and snacks. Tap or bottled water may used. Facilities may have water fountains in the classroom or dining area. This water source should be encouraged before and after all meals and snacks and takes the place of water served at the table.

Meat and Meat Alternates:

The Meat component is not required for the breakfast meal. IF the facility desires to serve a meat item with the breakfast, that would be allowed. Meats and meat alternates that would be acceptable include eggs, fat free yogurt, low fat cheese, fat free cottage cheese, lean ham, Canadian bacon, and peanut butter. Bacon is not considered a meat and shall not be served due to the high fat and high sodium content.

MEAL PATTERNS FOR CHILDREN IN CHILDCARE FACILITIES: LUNCH/SUPPER/DINNER

LUNCH/SUPPER/DINNER	AGES 1YR-2YR	AGES 3 YR-5 YR	AGES 6 YR–12 YR
Meat/Meat Alternate			
Cooked Meat, No Bone	1 oz.	1 ½ oz.	2 oz.
Cooked Dry Beans/Peas	¼ c.	3/8 c.	½ c.
Low Fat Cheese	1 oz.	1 ½ oz.	2 oz.
Egg	1 small	1 medium	1 medium
Peanut Butter	2 Tbsp.	3 Tbsp.	4 Tbsp.
Fat Free Yogurt/Cottage Cheese	4 oz/1/2 c.	6 oz./3/4 c.	8 oz./1 c.
Fruit or Vegetable: Must include 2 different foods- 1 vegetable/1 fruit OR 2 vegetable OR 2 fruit	¼ c. total 1/8 c. of 2 foods	½ c. total ¼ c. of 2 foods	3/4 c. total 3/8 c. of 2 foods
Grains/Breads			
Enriched, Whole Grain Bread	½ slice	½ slice	½ slice
OR			
Enriched Dry Cereal	¼ c. OR 1/3oz.	1/3 c. OR ½ oz.	¾ c. OR 1oz.
OR	¼ c.	1/3 c.	½ c.
Enriched Hot Cereal			
OR	¼ c.	1/3 c.	½ c.
Enriched, Whole Grain Pasta, Noodles, Rice			
Milk (Must be fluid, skim/fat free)), or 1% milk)	½ c. (whole milk)	¾ c.	1 c.
Water	½ c.	¾ c.	1 c.

Meat and Meat Alternates:

It is recommended to have at least one meatless meal a week. An alternate for meat could be cooked, dried beans, or peas. Cooked dried beans and peas cannot count for a vegetable and meat alternate in the same meal. Canned beans and peas will include the canned kidney, black bean, garbanzo, etc. Note: Canned beans are much higher in sodium/salt.

Edible portion for meats and meat alternates is used. Bone and skin shall not be counted as servings. No bones may be served. Note: 1 ounce of cooked meat is equal to one medium cooked chicken leg wtih bone removed.

Processed, pre-fried meats are not allowed due to the sodium/salt and fat content. Meats not allowed include hot dogs, corndogs, bologna, bacon, sausage, pancake sticks, small chicken nuggets, fish sticks, and steak fingers.

Processed cheese, such as cheese spread, canned cheese sauce, and cheese in packaged snack crackers is not allowed. Low fat or fat free cheese would be a meat alternate that is allowed.

For menu variety, use meat, and low fat cheese in combination to equal a full serving portion.

It is not recommended serving nuts and seeds due to nut/seed allergies prevalent in the youth today.

Bread and Bread Alternates:

Use enriched whole-grain breads and bread alternatives. Whole grain pasta, noodles, brown rice, wheat rolls, and cornbread are encouraged for the lunch/supper/dinner meals.

Bread alternates may include crust used as part of the main dish (i.e. pizza or quiche), Dry oatmeal used in a fruit crisp.

Pre-fried items, such as hash browns, French fries, and tater tots are not recommended due to the fat and sodium content Any pre-fried item served is limited to once a week.

Cookies, pastries, packaged snack cakes, and other high fat/sugar foods cannot be counted for any bread serving at the lunch/supper/dinner meal.

Fruits and Vegetables:

Must serve a Vitamin C source daily and must serve a Vitamin A source every other day, three times a week – refer to the guidelines. Fruits and vegetables supply these nutrients. More than once vitamin source a day is also encouraged.

Use a different combination of two or more servings for the meal service. Use fresh, canned, dried, or frozen vegetables and fruits for lunch/supper/dinner. No sugar may be used in the packaging or preparation of the fruit. Canned or frozen fruit should be packed in juice or water - not syrup or sugar packed.

Vegetables and fruits may be served as combination dishes (i.e., beef stew with meat, potatoes, carrots, English peas, OR shredded carrot salad with diced pineapple).

Avoid serving two forms of the same fruit or vegetable in the same day. Example: an orange and orange juice or an apple and applesauce are combinations that should not be used. **Serve a variety of vegetables and fruits to ensure a nutritionally well-balanced meal.**

It is highly recommended to either serve at least one raw vegetable and two raw fruits per week, for a meal or snack

Limit serving starchy vegetables to once per meal. Starchy vegetables include white/sweet potatoes, lima beans, butter beans, English peas, black-eye peas, field peas, Crowder peas, cream and whole kernel corn, any dried bean/pea (unless counted for a meat alternate).

Vegetables shall be seasoned with powders, spices, and herbs. The use of high sodium/salt and high fat seasonings should be restricted as much as possible.

Small amounts (less than 1/8 cup) of lettuce, tomatoes, onions, relish, catsup, salsa, jams, jellies, or other condiments may be added for flavor or garnish as "other foods," but do not count as a fruit or vegetable.

Milk:

Milk shall be served at Lunch/Supper/Dinner. The milk shall be pasteurized fluid milk, fortified with vitamin A and D. Whole milk is served to infants and toddlers less than 2 years of age. After age two, skim/fat free milk or 1% milk shall be served. Flavored milk may be served no more than once a week, using flavoring added to whole/skim/fat free milk or 1% milk.

Soymilk may be served when indicated with dietary restrictions.

Provisions must be made to serve calcium in alternate forms when no milk/substitute may be served to the child due to dietary restrictions.

If a child cannot be served milk for medical reasons or upon parent's instructions, then that child is not to be served high content milk products, e.g., pudding, ice cream, cheese, etc.

All milk equivalent used as a meat alternate must be low in fat.

Water:

Water is to be made available at all meals and snacks. Tap or bottled water may used. Facilities may have water fountains in the classroom or dining area. This water source should be encouraged before and after all meals and snacks and takes the place of water served at the table.

MEAL PATTERNS FOR CHILDREN IN CHILDCARE FACILITIES: SNACK

SNACK – MUST SELECT TWO OF THE FOUR COMPONENTS, PLUS WATER	AGES 1YR-2YR	AGES 3 YR-5 YR	AGES 6 YR–12 YR

Meat/Meat Alternate Cooked Meat, No Bone Cooked Dry Beans/Peas Low Fat Cheese Egg Peanut Butter Fat Free Yogurt/Cottage Cheese	 1/2 oz. 1/8 c. 1/2 oz. 1 small 1 Tbsp. 2 oz/1/4 c.	 ½ OZ. 1/8 c. 1/2 oz. 1 medium 1 Tbsp. 2 oz./1/4 c.	 1 oz. 1/4 c. 1 oz. 1 medium 2 Tbsp. 4 oz./1/2 c.
Fruit or Vegetable	1/2 c.	½ c.	3/4 c.
Grains/Breads Enriched, Whole Grain Bread OR Enriched Dry Cereal OR Enriched Hot Cereal OR Enriched, Whole Grain Pasta, Noodles, Rice	 ½ slice ¼ c. OR 1/3oz. ¼ c. ¼ c.	 ½ slice 1/3 c. OR ½ oz. 1/3 c. 1/3 c.	 ½ slice ¾ c. OR 1oz. ½ c. ½ c.
Milk (Must be fluid, skim/fat free, or 1% milk)	½ c. (whole milk)	1/2 c.	1 c.
Water	½ c.	1 c.	1 c.

Meat and Meat Alternates:

It is recommended to have at least one meatless meal a week. An alternate for meat could be cooked, dried beans or peas. Cooked dried beans and peas cannot count for a vegetable and meat alternate in the same meal. Canned beans and peas will include the canned kidney, black bean, garbanzo, etc. Note: Canned beans are much higher in sodium/salt.

Edible portion for meats and meat alternates is used. Bone and skin shall not be counted as servings. No bones may be served. Note: 1 once of cooked meat is equal to one medium cooked chicken leg with bone removed.

Processed, pre-fried meats are not allowed due to the sodium/salt and fat content. Meats not allowed include hot dogs, corndogs, bologna, bacon, sausage, pancake sticks, small chicken nuggets, fish sticks, and steak fingers.

Processed cheese, such as cheese spread, canned cheese sauce, and cheese in packaged snack crackers is not allowed. Low fat or fat free cheese would be a meat alternate that is allowed.

For menu variety, use meat, and low fat cheese in combination to equal a full serving portion.

Nuts or seeds *may be used* as a meat alternate for snack time, but is not recommended due to nut/seed allergies prevalent in the youth today.

Bread and Bread Alternates:

Use enriched whole-grain breads and bread alternatives. Whole grain pasta, noodles, brown rice, wheat rolls, and cornbread are encouraged for the lunch/supper/dinner meals.

Bread alternates may include crust used as part of the main dish (i.e. pizza or quiche), dry oatmeal used in a fruit crisp.

Pre-fried items, such as hash browns, French fries, tater tots are not recommended due to the fat and sodium content Any pre-fried item served is limited to once a week. Fresh, "homemade" oven baked fries or wedges would be allowed.

Plain, low sugar type cookies may be served occasionally for a snack component. These cookies may include animal crackers, graham crackers, vanilla wafers, oatmeal, oatmeal raisin, peanut butter, and ginger snaps. Items that may not be served include chocolate chip, most packaged cookies/cakes.

Low fat granola bars, cereal bars, whole grain fruit bars, rice krispie treats may be used for a snack bread component. Packaged crackers with cheese/peanut butter filling are discouraged due to the fat/sodium content. The cheese/peanut butter filling cannot count as a meat serving.

Baked chips, chips, popcorn, hard pretzels, and other low-moisture, high sodium foods cannot meet the bread requirement for a snack. Crackers, cheese and vegetable flavored crackers are allowed. Trail mixes made of various dry, no sugar coated cereals, dried fruits, and small marshmallows are a suggested snack item to meet a bread component.

Fruits and Vegetables:

Use fresh, canned, dried, or frozen vegetables and fruits for snack. No sugar may be used in the packaging or preparation of the fruit. Canned or frozen fruit should be packed in juice or water-not syrup or sugar packed.

Vegetables and fruits may be served as combination dishes (i.e., shredded carrot salad with diced pineapple, fat free yogurt parfait with fresh fruit).

Avoid serving two forms of the same fruit or vegetable in the same day. Example: an orange and orange juice or an apple and applesauce are combinations that should not be used. **Serve a variety of vegetables and fruits to ensure a nutritionally well-balanced meal.**

It is highly recommended to either serve at least one raw vegetable and two raw fruits per week, for a meal or snack. Younger children may have an appropriate substitution due to the choking hazard or the item may be cooked first.

Small amounts (less than 1/8 cup) of lettuce, tomatoes, onions, relish, catsup, salsa, jams, jellies, or other condiments may be added for flavor or garnish as "other foods," but do not count as a fruit or vegetable.

Juice should not be served as part of the snack when milk is the only other component. It is poor menu planning to offer such a combination since it provides too much liquid for children.

100% Fruit juice is allowed once a day. Vitamin fortified fruit juices, such as apple juice, with extra Vitamin C, will not be recognized as a good vitamin source.

The best time to serve this juice would be at the late 4:30/5:30 p.m., snack period.

Milk:

The milk shall be pasteurized fluid milk, fortified with vitamin A and D. Whole milk is served to infants and toddlers less than 2 years or age. After age two, skim/fat free milk, or 1% milk shall be served. Flavored milk may be served no more than once a week, using flavoring added to whole/skim/fat free milk, or 1% milk.

Soymilk may be served when indicated with dietary restrictions.

Provisions must be made to serve calcium in alternate forms when no milk/substitute may be served to the child due to dietary restrictions.

If a child cannot be served milk for medical reasons or upon parent's instructions, then that child is not to be served high content milk products, e.g., pudding, ice cream, cheese, etc.

All milk equivalents used as a meat alternate must be low in fat.

Water:

Water is to be made available with all meals and snacks. Tap or bottled water may used. Facilities may have water fountains in the classroom or dining area. This water source should be encouraged before and after all meals and snacks and takes the place of water served at the table.

~~**Meat and Meat Alternates**~~

- ~~For menu variety, use meat and cheese in combination (1 ounce of meat and ½ ounce of cheese).~~

- ~~Dried beans or peas (Remember: does not count for both vegetable and meat alternate in the same meal).~~

- ~~When serving nuts and seeds, they may fulfill:~~
  - ~~full requirement for the snack but;~~
  - ~~no more than one-half of the requirements for lunch or supper.~~

- ~~Edible portion for meats and meat alternates is used. Bone and skin shall not be counted~~

~~as servings.~~

- ~~Children, ages 1-2 years, need 1 oz. of meat or cheese, which is equal to a chicken leg,~~ ~~**OR** 1 egg,~~ ~~**OR** ¼ cup cooked dry beans/peas,~~ ~~**OR** 2 tablespoons of peanut butter,~~ ~~**OR** 4 oz. yogurt.~~

- ~~Children 2-5 years need 1 ½ oz. meat,~~ ~~**OR** 1 egg,~~ ~~**OR** 3/8 c. cooked beans/peas (that's just under ½ cup),~~ ~~**OR** 3 tablespoons peanut butter, or 6 oz yogurt.~~

~~**Fruits and Vegetables**~~

- ~~Use only 100-percent-strength juice for breakfast. Juice drinks with at least 50-percent-strength juice may be used for snack and lunch. (Caution: children must be served double the volume of these drinks to meet the requirement).~~

- ~~Fruit-flavored drinks, Ades, or punches contain less than 50-percent-strength juice. These types of beverages may be served but are not credited toward meeting the requirement. These type beverages are discouraged, instead of serving high sugar, nutrient low fluids, serve water.~~

- ~~Juice should not be served as part of the snack when milk is the only other component. It is poor menu planning to offer such a combination since it provides too much liquid for children.~~

- ~~Juice or syrup from canned fruit does not count as fruit juice. Canned or frozen fruit should be packed in juice or water-not syrup or sugar packed.~~

- ~~Use a different combination of two or more servings for lunch. Include various forms such as raw or cooked, fresh, frozen, canned in juices, or dried.~~

- ~~Avoid serving two forms of the same fruit or vegetable in the same meal. Example: an orange and orange juice or an apple and applesauce are combinations that should not be used.~~ ~~**Serve a variety of vegetables and fruits to ensure a nutritionally well-balanced meal.**~~

- ~~Small amounts (less than ⅛ cup) of onions, relish, catsup, salsa, jams, jellies, or other condiments may be added for flavor or garnish as "other foods," but do not count as a fruit or vegetable.~~

~~**Bread and Bread Alternates**~~

- ~~Use whole-grain or enriched breads and bread alternatives, or whole-grain, enriched, or fortified cereals. Read labels on commercial products to ensure the use of enriched and fortified products.~~

- ~~Foods such as cake and pie crust, and items usually served as desserts, cannot be used as bread alternates. Crust used as part of the main dish (i.e., for pizza or quiche) is allowed as a bread alternate.~~

- ~~The bread requirement cannot be met with snack foods such as popcorn, hard pretzels, chips, or other low-moisture items made from grain.~~

- ~~Cookies cannot be used for the bread requirement at breakfast, lunch, or supper. Cookies, such as animal crackers, graham crackers, and vanilla wafers may be used occasionally for a snack component.~~

- ~~Doughnuts, honey buns, breakfast tarts, pastries, packaged snack cakes, and other high fat/sugar foods cannot be counted for any bread serving.~~

~~**Milk**~~

- ~~Milk shall be served at Breakfast, Lunch, and Supper. Milk may also be served as part of a snack. The milk shall be pasteurized fluid milk, fortified with vitamin A and D. Low fat should not be served to children less than two years of age. After age two, it is encouraged to change to low fat or skim milk for health benefits.~~

- ~~Dry milk shall not be used as a milk beverage, but may be used for cooking purposes.~~

VITAMIN C SOURCES
VITAMIN C SOURCE MUST BE SERVED DAILY
**BEST CHOICE
*GOOD CHOICE
#ACCEPTABLE CHOICE (ONLY COUNT FOR A VITAMIN SOURCE ONCE PER WEEK)

Fruits			**Vegetables**		
Food	Serving Size		Food	Serving Size	
Blackberries	¼ c.	#	Asparagus	¼ c.	*
Blueberries	¼ c.	#	Artichoke	¼ medium	*
Cantaloupe	¼ c	**	Bok Choy	¼ c.	*
Grapefruit	¼ medium	**	Broccoli	¼ c.	**
Grapefruit Juice	½ c	**	Brussel Sprouts	¼ c.	**
Grapefruit-Orange Juice	½ c.	**	Cabbage	¼ c.	*
Guava	¼ c.	**	Cauliflower	¼ c.	*
Honeydew Melon	½ c.	*	Chicory	¼ c.	*
Kiwi	½ medium	**	Collard Greens	¼ c.	*
Mandarin Orange Sections	¼ c.	*	Kale	¼ c.	#
Mango	¼ medium	*	Kohlrabi	¼ c.	**
Melon balls	¼ c.	*			
Orange	½ medium	**	Mustard Greens	¼ c.	#
Orange Juice	¼ c.	**	Okra, not fried	¼ c.	#

Papaya	¼ c.	*	Peppers, green & red	¼ c.	**
Peach, frozen only	¼ c.	**	Potato, White, or Red Skinned Baked only-no instant/fries/tots	½ medium	*
Pineapple	¼ c.	#	Rutabagas	¼c.	#
Pineapple Juice	¼ c.	*	Snow Peas	¼ c.	#
Pineapple-grapefruit or orange juice	¼c.	**	Spinach	¼ c.	#
Raspberries	¼ c.	*	Sweet Potato	½ medium	*
Starfruit	¼ c.	#	Tomato	½ medium	*
Strawberries	¼ c.	**	Tomato or V-8 Juice	¼ c.	**
Tangelo	½ medium	**	Turnip Greens	¼ c.	*
Tangerine	½ medium	**	**Miscellaneous**		
Tropical fruit mix	¼ c.	*			
Watermelon	½ c.	#	Liver, beef	1 oz.	**

VITAMIN A SOURCES
VITAMIN A SOURCE MUST BE SERVED EVERY OTHER DAY, 3 TIMES PER WEEK
** BEST CHOICE
* GOOD CHOICE
#ACCEPTABLE CHOICE (ONLY COUNT FOR A VITAMIN SOURCE ONCE PER WEEK)

Fruits			**Vegetables**		
Food	Serving Size		Food	Serving Size	
Avocado	¼ medium	#	Asparagus	¼ c.	#
Apricot	2 halves	*	Artichoke	½ medium	#
Cantaloupe	¼ c.	*	Bok Choy	¼ c.	*
Cherries, red sour	¼ c.	*	Broccoli	¼ c.	*
Mandarin Orange Segments	¼ c.	*	Brussels Sprouts	¼ c.	*
Mango	¼ medium	**	Carrots	¼ c.	**
Melon Balls	¼ c.	*	Collard Greens	¼ c.	**
Nectarine	¼ medium	#			
Papaya	¼ c.	*	Kale	¼ c.	**
Peaches	¼ c.	#	Lettuce, Green, Romaine, or Red NOT Iceberg (Iceberg is not high in vitamins)	½ c.	#
Plantain	¼ c.	#	Mixed Vegetables	¼ c.	**
Prunes	¼ c.	*	Mustard Greens	¼ c.	**

Tangerine	½ medium	*	Okra, not fried	¼ c.	#
			Peas & Carrots	¼ c.	**
			Peppers, red	¼ c.	**
Miscellaneous			Pumpkin	¼ c.	**
Egg	1 medium	*	Rutabagas	¼ c.	#
Liver, beef	1 oz.	**	Spinach	¼ c.	**
Liver, chicken	1 oz.	**	Sweet Potato	½ medium	**
			Tomato or V-8 Juice	¼ c.	**
			Turnip Greens	¼ c.	**
			Winter Squash, Butternut or Hubbard	¼ c.	**

DENTAL CARE

Dental care is encouraged after each meal service. Parents shall supply toothbrushes and tooth powders or pastes for the child's individual use. Recommendations include replacing the brush every three months or when bristles are bent.

Each toothbrush and powder or paste must be:

- Labeled with the child's full name
- Stored out of children's reach when not in use
- Stored in a manner that prevents the toothbrushes from touching each other during storage

Staff is encouraged to attend trainings on dental care that includes:

- Proper tooth brushing technique as appropriate for the child's age and skills.
- Education to train parents about proper oral healthcare techniques.
- Education for staff and parents to learn the appropriate techniques to feed infants and children that minimize damage to teeth and facial development.

Children must have adult supervision during tooth brushing activities.

GARDENING AND FRESH PRODUCE

Gardening is an excellent opportunity to incorporate physical activity with nutrition education. Facilities are encouraged to have gardening projects with the children. Produce that is grown in the gardens may be washed and handled properly to allow the items to be served for a snack time or education activity.

Purchasing local produce from Mississippi farmers is one way to offer fresh items to the children. This also helps the local economy and raising families' awareness of food sources. The child care center must ensure the safety of foods served. Steps must be taken to demonstrate reasonable care has been taken to ensure the safety of foods purchased. Steps include: Investigating the local farm and production practices, communicating with the

local farmer on the needs of the facility including packaging, delivery, and payment procedures, and promoting the use of local produce with families and the community. There are several resources available to use as a safety checklist, such as the Iowa State University Checklist for Retail Purchasing of Local Produce. The checklist is on the www.Healthyms.com website under Nutrition and Farm to School and Preschool.

REFERENCES

Dietary Guidelines for Americans, 2005.
http://www.health.gov/dietaryguidelines/dga2005/document/

United States Department of Agriculture; Food and Nutrition Service; Child and Adult Care Food Program: Nutrition Guidance for Child Care Centers.
http://www.fns.usda.gov/cnd/care/ProgramBasics/Meals/Meal_Patterns.

Dietary Reference Intakes, (DRIs), Food and Nutrition board, Institute of Medicine, National Academies

USDA National Nutrient Database for Standard Reference, Release 18.

Promoting good Nutrition and Physical Activity in Child-Care Settings, A Research Brief, May 2007, Robert Wood Johnson Foundation.

Position of the American Dietetic Association: Benchmarks for Nutrition Programs in Child Care Settings, Journal of the American Dietetic Association, June 2005.

Nemours, Health and Prevention Services, Best Practices for Health Eating: A Guide to Help Children Grow Up Healthy, Version 2, 2008

The Wellness Child Care Assessment Tool: A Measure to Asesess the Quality of Written Nutrition and Physical Activity Policies, The American Dietetic Associations, December 2011

Institute of Medicine, Child and Adult Care Food Programs: Aligning Dietary Guidance for All, November 4, 2011

Preventing Childhood Obesity in Early Care and Education Programs, American Academy of Pediatric, American Public Health Association, National Resource Centre for Health and Safety in Child Care and Early Education, 2010

APPENDIX E

DISHWASHING PROCEDURE

The best way to wash, rinse, and disinfect dishes and eating utensils is to use a dishwasher with a sanitizing cycle. The final sanitizing rinse of a dishwasher must reach a temperature of 180 degrees. If a dishwasher is not available or cannot be installed, a three-compartment sink will be needed to wash, rinse, and disinfect dishes. A two-compartment or one-compartment sink can be used in child care facilities (located in an occupied residence) licensed for 12 or fewer children by adding one or two dishpans, as needed. In addition to three compartments or dishpans, you will need a dish rack with a drain board to allow dishes and utensils to air dry. To wash, rinse, and disinfect dishes by hand:

- Fill one sink compartment or dishpan with hot tap water and a dishwashing detergent.
- Fill the second compartment or dishpan with hot tap water.
- Fill the third compartment or dishpan with hot tap water and 1-1/2 tablespoons of liquid chlorine bleach for each gallon of water.
- Scrape dishes and utensils and dispose of excess food.
- Immerse scraped dish or utensil in first sink compartment or dishpan and wash thoroughly.
- Rinse dish or utensil in second dishpan of clear water.
- Immerse dish or utensil in third dishpan of chlorinated water for at least 1 minute.
- Place dish or utensil in a rack to air dry.

Note: Food preparation and dishwashing sinks should only be used for these activities and should never be used for routine hand washing or diaper changing activities.

Source: The ABCs of Safe and Healthy Child Care: A Handbook for Child Care Providers, Department of Health and Human Services, U.S. Public Health Service, Centers for Disease Control and Prevention.

APPENDIX G

PROCEDURE FOR DIAPERING A CHILD

Either of the following two procedures is acceptable in a child care facility for licensing purposes. However, some programs may be enrolled in a program that requires Procedure #2.

Procedure #1

1. Organize needed supplies within reach:
    a. fresh diaper and clean clothes (if necessary)
    b. dampened paper towels or premoistened toweletts for Cleaning child's bottom

c. child's personal, labeled, ointment (if provided by parents)
d. trash disposal bag

2. Place a disposable covering (such as roll paper) on the portion of the diapering table where you will place the child's bottom. Diapering surfaces should be smooth, nonabsorbent, and easy to clean. Don't use areas that come in close contact with children during play such as couches, floor areas where children play, etc.

3. If using gloves, put them on now.

4. Using only your hands, pick up and hold the child away from your body. Don't cradle the child in your arms and risk soiling your cloths.

5. Lay the child on the paper or towel.

6. Remove soiled diaper (and soiled clothes).

7. Put disposable diapers in a plastic-lined trash receptacle.

8. Put soiled reusable diaper and /or soiled clothes WITHOUT RINSING in a plastic bag to give to parents.

9. Clean child's bottom with some premoistened disposable toweletts or a dampened, single-use, disposable towel.

10. Place the soiled toweletts or towel in a plastic-lined trash receptacle.

11. If the child needs a more thorough washing, use soap, running water, and paper towels.

12. Remove the disposable covering from beneath the child. Discard it in a plastic-lined receptacle.

13. If you are wearing gloves, remove and dispose of them now in a plastic-lined receptacle.

14. Wash your hands. NOTE: The diapering table should be next to a sink with running water so that you can wash your hands without leaving the diapered child unattended. However, if a sink is not within reach of the diapering table, don't leave the child unattended on the diapering table to go to a sink; wipe your hands with some premoistened toweletts instead. NEVER leave a child alone on the diapering table.

15. Wash the child's hands under running water.

16. Diaper and dress the child.

17. Disinfect the diapering surface immediately after you finish diapering the child.

18. Return the child to the activity area.

19. Clean and disinfect:

a. The diapering area,
b. all equipment or supplies that were touched, and
c. soiled crib or cot, if needed.

20. Wash your hands under running water.

Source: The ABCs of Safe and Healthy Child Care: A Handbook for Child Care Providers, Department of Health and Human Services, U.S. Public Health Service, Centers for Disease Control and Prevention.

Procedure #2

1. Caregiver washes hands

2. Prepare for diapering by gathering wipes, diaper, plastic bag, clean clothes, gloves and other supplies needed. Bring materials to the diaper changing area but not on the changing table

3. Place child on diapering table. Remove clothing to access diaper. If soiled, place clothes into plastic bag.

4. Remove soiled diaper and place into plastic-lined, hands-free covered trash container. (To limit odor, seal in a plastic bag before placing into trash containers.)

5. Use wipes to clean child's bottom from front to back. Use a fresh wipe for each swipe.

6. If gloves were used, remove at this point.

7. Use a wipe to remove soil from adult's hands.

8. Use another wipe to remove soil from child's hands.

9. Throw soiled wipes into plastic-lined, hands-free covered trash container.

10. Put on clean diaper and redress child.

11. Place child at sink and wash hands using the proper hand washing procedure. Return child to a supervised play area without contaminating any surface

12. Spray the surface of the diapering table with soap-water solution to remove gross soil. Wipe clean using a disposable towel and throw away in a plastic-lined, hands-free covered trash container. Be sure the surface is dried completely.

13. Spray the surface of the diapering table with clear water (recommended). Wipe dry using a disposable towel and throw away in a plastic-lined, hands-free covered trash container.

14. Spray the diapering surface with disinfecting strength bleach-water solution (completely cover table; table should glisten) and wait for 2 minutes before wiping dry with a disposable towel or allow to air dry. Dispose of the towel in a plastic-lined, hands-free covered trash container.

15. Adult washes hands using the proper hand washing procedure.

Source: *Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs, 3rd Edition*, American Academy of Pediatrics, American Public Health Association, National Resource Center for Health and Safety in Child Care and Early Education, 2011.

APPENDIX H

CLEANING AND DISINFECTION PROCEDURES

Keeping the child care environment clean and orderly is very important for health, safety, and the emotional well-being of both children and providers. One of the most important steps in reducing the number of germs, and therefore the spread of disease, is the thorough cleaning of surfaces that could possibly pose a risk to children or staff. Surfaces considered most likely to be contaminated are those with which children are most likely to have close contact. These include toys that children put in their mouths, crib rails, food preparation areas, and surfaces likely to become very contaminated with germs, such as diaper-changing areas.

Routine cleaning with soap and water is the most useful method for removing germs from surfaces in the child care setting. Good mechanical cleaning (scrubbing with soap and water) physically reduces the numbers of germs from the surface, just as hand washing reduces the numbers of germs from the hands. Removing germs in the child care setting is especially important for soiled surfaces which cannot be treated with chemical disinfectants, such as some upholstery fabrics.

However, some items and surfaces should receive an additional step, **disinfection**, to kill germs after cleaning with soap and rinsing with clear water. Items that can be washed in a dishwasher or hot cycle of a washing machine do not have to be disinfected because these machines use water that is hot enough for a long enough period of time to kill most germs. The disinfection process uses chemicals that are stronger than soap and water. Disinfection also usually requires soaking or drenching the item for several minutes to give the chemical time to kill the remaining germs. Commercial products that meet the Environmental Protection Agency's (EPA's standards for "hospital grade" germicides (solutions that kill germs) may be used for this purpose. One of the most commonly used chemicals for disinfection in child care settings is a homemade solution of household bleach and water. Bleach is cheap and easy to get. The solution of bleach and water is easy to mix, is nontoxic, is safe if handled properly, and kill most infectious agents. (Be aware that some infectious agents are not killed by bleach. For example, cryptosporidia is only killed ammonia or hydrogen peroxide.)

A solution of bleach and water loses its strength very quickly and easily. It is weakened by organic material, evaporation, heat, and sunlight. Therefore, bleach solutions should be mixed fresh each day to make sure it is effective. Any leftover solution should be discarded and the end of the day. NEVER mix bleach with anything but fresh tap water! Other chemicals may react with bleach and create and release a toxic chlorine gas.

Keep the bleach solution you mix each day in a cool place out of direct sunlight and out of the reach of children. (Although a solution of bleach and water mixed as shown in the accompanying box should not be harmful if accidentally swallowed, you should keep all chemicals away from children.)

If a child care facility uses a commercial cleaner, sanitizer, or disinfectant it must be a U.S. Environmental Protection Agency (EPA)-registered product that has an EPA registration number on the label. Such products shall only be used according to the manufacturer's instructions.

NOTE: All EPA-registered products may not be appropriate for use in a child care facility. Therefore, it is the responsibility of the facility to make sure any product use is appropriate for use in a child care facility.

~~If you use a commercial (brand-name) disinfectant, read the label and always follow the manufacturer's instructions exactly.~~

Recipe for Bleach Disinfecting Solution

(For use on non-porous surfaces such as diaper change tables, counter tops, door and cabinet handles toilets, etc.) **~~(For use in bathroom, diapering areas, etc.)~~**

~~1/4~~ ¼ - ¾ cup bleach
1 gallon of cool water

OR

1 - 3 tablespoon bleach
1 quart of cool water

Apply as a spray or poured fresh solution, not by dipping into a container with a cloth that has been in contact with a contaminated surface.

Add the household bleach (5.25% sodium hypochlorite) to the water.

Recipe for Weaker Bleach ~~Disinfecting~~ Sanitizing Solution

For food contact surfaces sanitizing (dishes, utensils, cutting boards high chare trays), toys that children may place in their mouths, and pacifiers.
~~(For use on toys, eating utensils, etc.)~~

1 tablespoon bleach
1 gallon cool water

Add the bleach to the water

Washing and Disinfecting Toys

- Infants and toddlers should not share toys. Toys that children (particularly infants and toddlers) put in their mouths should be washed and disinfected between uses by individual children. Toys for infants and toddlers should be chosen with this in mind. If you cannot wash a toy, it probably is not appropriate for an infant or toddler.

- When an infant or toddler finishes playing with a toy, you should retrieve it form the play area and put it in a bin reserved for dirty toys. This bin should be out of reach of the children. Toys can be washed at a later, more convenient time, and then transferred to a bin for clean toys and safely reused by the other children.

- To wash and disinfect a hard plastic toy:
    - Scrub the toy in warm, soapy water. Use a brush to reach into the crevices.
    - Rinse the toy in clean water.
    - Immerse the toy in a mild bleach solution (see above) and allow it to soak in the solution for 10-20 minutes.
    - Remove the toy from the bleach and rinse well in cool water.
    - Air dry.

- Hard plastic toys that are washed in a dishwasher or cloth toys washed in the hot water cycle of the hot water cycle of a washing machine do not need to be additionally disinfected.

- Children in diapers should only have washable toys. Each group of children should have its own toys. Toys should not be shared with other groups.

- Stuffed toys used by only a single child should be cleaned in a washing machine every week or more frequently if heavily soiled.

- Toys and equipment used by older children and not put into their mouths should be cleaned at least weekly and when obviously soiled. A soap and water wash followed by clear water rinsing and air drying should be adequate. No disinfection is required. (These types of toys and equipment include blocks, dolls, tricycles, trucks, and other similar toys.).

- Do not use wading pools for children in diapers.

- Water play tables can spread germs. To prevent this:
    - Disinfect the table with chlorine bleach solution before filling it with water.
    - Disinfect the all toys to be used in the table with chlorine bleach solution. Avoid using sponge toys. They can trap bacteria and are difficult to clean.

- Have all children wash their hands before and after playing in the water table.
- Do not allow children with open sores or wounds to play in the water table.
- Carefully supervise the children to make sure they do not drink the water.
- Discard water after play is over

Washing and Disinfecting Bathroom and Other Surfaces

Bathroom surfaces, such as faucet handles and toilet seats, should be washed and disinfected several times a day, if possible, but at least once a day or when soiled. The bleach and water solution or chlorine-containing scouring powers or other commercial bathroom surface cleaner/disinfectants can be used in these areas. Surfaces that infants and young toddlers are likely to touch or mouth, such as crib rails, should be washed with soap and water and disinfected with a nontoxic disinfectant, such as bleach solution, at least once every day, more often if visibly soiled. After the surface has been drenched or soaked with the disinfectant for at least 10 minutes, surfaces likely to be mouthed should be thoroughly wiped with a fresh towel moistened with tap water. Be sure not to use a toxic cleaner on surfaces likely to be mouthed. Floors should be washed and disinfected at least once a day and whenever soiled.

Washing and Disinfecting Diaper Changing Areas

Diaper Changing Areas should:

- Only be used for changing diapers.
- Be smooth and nonporous, such as Formica (NOT wood).
- Have a raised edge or low flfence around the area to prevent a child from falling off.
- Be next to a sink with hot and cold running water.
- Not be used to prepare food, mix formula, or rinse pacifiers.
- Be easily accessible to providers.
- Be out of reach of children.

Diaper changing areas should be cleaned and disinfected after each diaper changer as follows:

- Clean the surface with soap and water and rinse with clear water.
- Dry the surface with a paper towel.
- Thoroughly wet the surface with the recommended bleach solution.
- Wipe dry with a clean disposable towel or air dry. If using a commercial disinfectant/sanitizer, follow labeled manufacturer's instructions.

Washing and Disinfecting Clothing, Linen, and Furnishings

Do not wash or rinse clothing soiled with fecal material in the child care setting. You may empty solid stool into the toilet, but be careful not to splash or touch toilet water with your hands. Put the soiled clothes in a plastic bag and seal the bag to await pick up by the child's parent or guardian at the end of the day. Always wash your hands after handling soiled clothing.

Explain to parents that washing or rinsing soiled diapers and clothing increases the chances that you and the children may be exposed to germs that cause diseases. Although receiving soiled

clothes is not pleasant, remind parents that this policy protects the health of all children and providers. Each item of sleep equipment, including cribs, cots, mattresses, blankets, sheets, etc., should be cleaned and sanitized before being assigned to a specific child. The bedding items should be labeled with that child's name, and should only be used by that child. Children shall not share bedding. Infantsfi linens (sheets, pillowcases, blankets) shall be cleaned and sanitized daily, and crib mattresses shall be cleaned and sanitized weekly and when soiled or wet. Linens from beds of older children shall be laundered at least weekly and whenever soiled. However, if a child inadvertently used another child's bedding, you shall change the linen and mattress cover before allowing the assigned child to use it again. All blankets shall be changed and laundered routinely at least once a week.

Cleaning up Body Fluid Spills

Spills of body fluids, including blood, feces, nasal and eyed discharges, saliva, urine, and vomit shall be cleaned up immediately. Wear gloves unless the fluid can be easily contained by the material (e.g., paper tissue or cloth) that is being used to clean it up. Be careful not to get any of the fluid you are cleaning in your eyes, nose, mouth or any open sores you may have. Clean and disinfect any surfaces, such as counter tops and floors, on which body fluids have been spilled. Discard fluid-contaminated material in a plastic bag that has been securely sealed. Mops used to clean up body fluids should be (1) cleaned, (2) rinsed with a disinfecting solution, (3) wrung as dry as possible, and (4) hung to dry completely. Be sure to wash your hands after cleaning up any spill.

Source: The ABCs of Safe and Healthy Child Care: A Handbook for Child Care Providers, Department of Health and Human Services, U.S. Public Health Service, Centers for Disease Control and Prevention (as amended by MSDH).