

# Regulations Compliance Review License Exempt Providers

	Compliance	Non-Compliance	Not-Applicable	Notes and Observations If Not Applicable, Explain:
<b>392 NAC 5-003 – Provider Standards for License-Exempt Family Child Care Homes:</b>				
<b>5-001.02 – Provider Age Qualifications:</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
1. Must be at least 19 years or; Be a minor who is 16, 17, or 18 years of age if: a. Provider would not be absent from school or training program to provide service; b. Provider would not be absent from regular employment without employer permission; c. They are acceptable to the client; and d. They are supervised by a parent or guardian.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Provider age 18 or younger must obtain the signature of his/her parent or legal guardian unless they are an emancipated minor.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>5-001.04 Release of Information:</b> A signed, written release of information to conduct background checks must be submitted for each person over the age of majority. A parent or guardian must sign a release for a child's background check.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>5-003.03 Background Checks:</b> The provider and all household members must submit to required background checks. The provider must inform their Resource Development Worker within 10 days of any changes to the household. The required background checks are as follows:				
1. The State Central Register of child protection for any state in which the provider and/or household members have lived in the past five years (if age 13 or older): .....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Adult Protective Services Central Registry for any state in which the provider and/or household members have lived in the past five years (if age 13 or older):.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Appropriate local law enforcement agency for any state in which the provider and/or household members have lived in the past five years (if age 18 or older).....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Sex Offender Registry for any state in which the provider and/or household members have lived within the past five years (if age 18 or older).....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. State-level criminal history for any state in which the provider and/or household members have lived in the past five years (if age 18 or older).....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>5-003-2 Maximum Number of children who care can be provided:</b>				
The Department will pay for a maximum of:				
a. Three children from different families with a maximum of 3 of his/her own children, grandchildren, or foster children age 12 or younger in the home.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Six children from one family; the provider must not have other children, grand-children, or foster children age 12 or younger in the home.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Maximum of 2 infants (children 17 months or younger) including infant children of the provider.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>5-003 Responsibilities of Provider: Provider must ensure:</b>				
<b>5-003-5</b> No household members conduct a business in the home that would interfere with providing care for children and if property is leased is approved by a landlord.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>5-003-6</b> All children in care will always be supervised.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>5-003-7</b> Arrangements with another person, age 16 or older, will be made to provide substitute care in the provider's absence once required background checks are completed for the substitute.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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5-003-8 Parents/guardians of children are notified when there will be/has been care provided by a substitute caregiver.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5-003-9 Discussions are had with parents/guardian regarding the hours of care, care for ill children (if provided), disciplinary practices (no physical discipline is allowed), meals, snack, napping schedules, and toilet training practices (if applicable) before care is provided.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5-003-10 During the hours of operation, the home will be open to announced and unannounced visits by parents/guardians of children whom care is being provided. Parents always have access to their children at all times while children are in care.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5-004.01 - Conflict of Interest: No employee of the Department or its subdivisions may be approved as a service provider if s/he is in a position to influence his/her own approval or utilization.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5-001.01-9 Department staff are allowed to visit the home, announced or unannounced, to determine compliance with license exempt standards and requirements.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>License Exempt Providers are required to maintain the following records:</b>				
1. Maintain records with up to date information for children in care including:				
a. Immunizations.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. 5-003-12 Contact information (parent/guardian's work and home phone number; children's physician phone number)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. 5-001.01-7 Retain authorizations, billing documents, and attendance records for four years to support and document all claims (electronically or physically).....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5-003-32 Transportation Safety: If the provider is responsible to transport and accompany children in their care, they are responsible to ensure that safety restraints and age appropriate car seats are available and used for each transported based on state law.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>5-003 Environmental Requirements:</b>				
<b>Facilities:</b> The provider shall ensure that:				
5-003-11 A working landline or cellular telephone is available at all times.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5-003-14 Emergency numbers are visible within the home and provider will contact 911 or local medical emergency if needed.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5-003-15 Building and physical premises is clean and in good repair.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5-003-16 The facility has operable utilities including electricity, heat, water, etc.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5-003-20 The facility has a sufficient number of safe, age appropriate play materials available for children in care to use.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5-003-21 A first aid kit is on site and inaccessible to children which includes the following supplies: working fever thermometer, antiseptic wipes, band aids, gauze, tape, and scissors.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5-003-25 The facility has at least 35 square feet of indoor child care space for each child in care.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5-003-26 Clean and comfortable napping and sleeping arrangements are available for each child in care and are age appropriate.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5-003-27 Toilets and sinks are clean and in good working order for children to use.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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<b>5-003-31</b> An outdoor play area is maintained and free of hazards that can cause bodily injury.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>5-003-33</b> During evening care, children age 7 years or younger will sleep only on a floor level where an adult is present.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Wellness and Nutrition:</b> The provider must ensure that:				
<b>5-003-17</b> Children are served nutritious meals and snacks while in care.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>5-003-18</b> Cooking and eating areas and utensils/equipment will be kept clean and in good repair.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>5-003-19.</b> Perishable foods served to child care children will be stored in covered containers and at a safe temperature.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>5-003-22</b> They dispense prescription and non-prescription medications only with prior written permission and instructions from parent/guardian.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
A prevention and response plan is created for emergencies due to food and allergic reactions.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
A plan is created to prevent and control infectious diseases within the home.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Hazardous Materials and Equipment:</b> The provider must ensure that:				
<b>5-003-23</b> Medications, cleaning, agents, poisons, and other potentially hazardous items, materials or equipment are inaccessible to children through locked storage.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
a. Refrigerated medications are stored in separate locked storage from food storage...	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>5-001.01-18</b> Smoking is prohibited when a child in care is present in any part of the home	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Hazardous materials are properly handled, stored, and disposed according to their labels	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Tobacco products and containers holding cigarette butts, cigar butts, or ashes are inaccessible to children.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All alcohol is inaccessible to children.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All weapons and firearms are unloaded and locked or stored in a locked cabinet or area...	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All ammunition is stored in a locked cabinet and stored separate from the firearms.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Pets:</b> The provider must ensure that household pets:				
<b>5-003-30</b> Are current on any necessary or required vaccinations if they are susceptible to rabies.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Have no history of aggression.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Emergency Preparedness and Safety:</b> The provider must:				
<b>5-003-24</b> Develop and practice an evacuation plan with the children for use in emergencies such as a fire or tornado.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>5-003-28</b> Maintain the home to be free from fire hazards such as exposed wiring, storage of combustibles away from a fire source (furnace, water heater, stove), and there are no blocked exits.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>5-003-29</b> Develop an emergency procedure to reach children should they become locked into an area of the home which can be locked.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Ensure the home has operable smoke and carbon monoxide detectors, maintained according to manufacturer's recommendations, which are located on each level of the home used to provide care.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Ensure a fire extinguisher is on site and not expired.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Have a signed authorization from child's parent/guardian for emergency care.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Have a completed emergency preparedness and response plans; including past emergency drill forms.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Training:</b> The provider must complete training as follows:				
Recognition and reporting of child abuse neglect training.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Initial Provider Declarations:**

*SB*  
*SB*

I have reviewed and understand "Child Care Provider Online Portal Billing Guide"

**5-003.01** I do not engage in or have a history of behavior which may endanger the health or safety of children

*SB*

**5-003-3** I do not knowingly allow an individual to be on the premises that has been convicted of, admitted to, or there was substantial evidence of crimes involving intentional bodily harm, crimes against children, crimes involving the illegal use of controlled substances, or crimes involving immorality

*SB*

**5-003.4** I am physically, mentally, and emotionally able to provide care for children and provide a statement from a medical professional should there be reasonable cause to question this capacity to provide care

*SB*

I do not knowingly allow individuals who are a registered sex offender on the premises except to pick up or drop off his/her child

By signing, provider agrees to provide child care services in accordance with their agreement, applicable portions of Nebraska Administrative Code Titles 391, 392, and 480, and applicable state and federal law. The provider also understands that this compliance review will be posted on the Child Care Subsidy page in compliance with federal requirements and regulations.

Provider's Printed Name: Sasha Briggs

Provider's Signature: *Sasha Briggs*

Resource Development Worker: *SB* Inspection Date: 4-30-2020

Notes:

Follow-Up Corrections:

Date Corrections are Due: \_\_\_\_\_ Provider Initials in Agreement: \_\_\_\_\_