

Family Day Care Provider Application MINIMUM STANDARDS

YWCA Child Care Resource & Referral service is for all family child care providers in our area. We do not recommend one child care provider over another. This form **must** be completed before we can place you on our registry. Please read through this agreement and sign on the last page.

I am at least 18 years of age. I have a minimum of six (6) months experience in caring for children (either as a parent or in another capacity).

I have read and understand the YWCA Child Care Resource & Referral Complaint Policy.

I will have available for the parent(s) review, a medical form, signed by a physician, attesting that I am in good physical and mental health; that I am able, from the physician's perspective, to care for children, and that I am free from TB and other communicable diseases.

I will attend an orientation with the YWCA Child Care Resource & Referral prior to being added to the registry for referrals. (YWCA Child Care Resource & Referral has many opportunities on a regular basis, for you to attend professional workshops on child development and related topics)

I will notify YWCA Child Care Resource & Referral of any changes in my child care business and will update the registry information when requested.

I will have a reference list of three (3) names, addresses and phone numbers of individuals who know how I interact with children.

Any guns, ammunition and other dangerous sporting equipment will be locked up at all times.

I agree:

- that I, and any individual eighteen (18) years and over who is residing in my home, will be fingerprinted for a criminal record check, and, neither I, nor anyone eighteen (18) years and over, residing in my home, has ever been convicted or plead guilty to child abuse or any other crime set forth in the Ohio Revised Code; and that no child has been removed from my home;
- Effective March 31, 2009; Rule [5101:2-12-26](#) Statement of Non-Conviction and Criminal Records Check for Licensed Child Care Center Staff has been amended to provide new requirements for BCII criminal record checks, to revise the rehabilitation standards and to include a new requirement to have the JFS 01328 "Statement of Nonconviction for Licensed Child Care Centers and Type A Homes" completed at initial application for employment or a license and completed annually thereafter.

* This means that you will need to have both BCII and FBI background checks done. This will also need to be completed by anyone who is living in your home after September 1, 2008 who is 18 years old or older.

I agree:

- not to use physical punishment or harsh discipline in handling behavior problems with children, nor permit any other member of the household, or any other person, to discipline children in such a way;
- to disclose to the parent(s) any information concerning a child's death or serious injury while in my care;
- to report immediately to the proper regulatory agency, any noticeable signs of abuse/neglect,
- including unusual or suspicious marks, bruises, or burns on a child in my care;
- to care for no more than six (6) children at one time, with no more than three (3) of the children being under the age of two (2) years (including your own);
- to keep the home well maintained and to allow parent(s) to inspect the home for safety; to remove any safety hazards from both the indoor and outdoor areas used by the children;

The home safety checklist includes, but is not limited to: maintaining acceptable levels of cleanliness and sanitation, repairing loose floor boards, removing peeling and/or accessible lead paint, placing all toxic and dangerous substances out of the reach of children, removing sharp objects and surfaces, etc.; to take preventative steps to insure the safety of the children in my care.

- All floors/levels on which children will be cared for have two (2) ways of exiting to the outside.
- to have a working telephone and will have numbers for fire, police, life squad, and poison control available on premises;
- to have an emergency plan that includes an adult who can be contacted immediately and arrive at the site within minutes;
- with the parent(s), on a plan for substitute care when I am sick or unavailable, or experiencing an emergency;
- that at no time will children be left unattended or in the care of a minor (a person under the age of 18), and I will notify the parent(s) of any changes in care arrangements or substitute providers;
- to follow state regulations regarding child restraint when transporting children in a vehicle, and to have auto insurance. Parent(s) must authorize, in writing, my transportation arrangements;**
- to maintain basic first aid supplies;*

- to serve well-balanced, nutritious meals in quantities that meet the needs of the children's developmental stages and length of time in care;
- to provide proof that rabies vaccinations have been obtained for dogs, cats, and other pets as appropriate. I will have a place where animals may be restrained or removed from the children, if necessary;
- not to use alcohol or illegal substances while caring for children, nor will anyone who lives in or comes into my home, endanger the children in such a manner;
- not to discriminate against families/children because of sex, sexual orientation, race, creed, national origin, or ability;
- to provide activities, including toys and materials, to assist in the development of all stages of children in my care, and will plan a daily routine that includes both quiet and active times, and allow for comfortable napping and outdoor activities.

I agree to obtain from each family:

- A. A release signed by the parent(2) to permit emergency medical transportation of care (updated yearly);**
- B. Phone numbers where parent(s) can be reached;
- C. Names and phone numbers of at least two (2) additional persons authorized by the parent(s) to care for the child in the event of an emergency or illness;
- D. The names of any other individuals authorized by the parent(s) to remove the child from the child care setting;**
- E. A signed permission from a parent or guardian to dispense each prescribed medication, over-the-counter fever reducing medicines without aspirin, or cough medicines without codeine;**
- F. A signed permission from the child's physician to dispense over-the-counter fever reducing medicines with aspirin, or cough syrup with codeine.**

**YWCA CHILD CARE RESOURCE & REFERRAL
PROVIDER AGREEMENT**

PLEASE SIGN AND RETURN THIS PAGE

1. I have read and understand that I must meet all the minimum standards for the YWCA Child Care Resource & Referral database. (I also understand that if I do not comply with any of the standards, it will mean the removal of my name from the database.)

2. Identifying information will not be shared with any other entity without the written permission of the provider.

3. Are you currently certified by the County Department of Jobs & Family Services?
 Yes No In Process

If yes, what county? _____

What type of Certification? _____

Signature: _____

Printed Name: _____

Date: _____

LIST ALL OTHER PERSONS OVER 18 YEARS OF AGE

<u>NAME</u>	<u>DATE OF BIRTH</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____