**Synopsis:**

The South Carolina Department of Social Services (SCDSS) is required to review child care regulations every three years. These proposed regulations replace the current regulations in their entirety. These regulations update current requirements in order to clarify current regulations, meet the United States Department of Health and Human Services (USDHHS) safety guidelines, as well as United States Department of Agriculture (USDA) food and snack regulations, and finally, raises the South Carolina regulations up to minimum child care standards already in place in neighboring states.

**Document No. 2924**

**DEPARTMENT OF SOCIAL SERVICES**

**CHAPTER 114**

Statutory Authority: 1976 Code Sections 43-1-80 and 20-7-2980 et seq.

114-520. Regulations For The Registration Of
Child Care Centers Operated By Churches Or Religious Entities

Resubmitted: March 2, 2005

<table>
<thead>
<tr>
<th>BY DATE</th>
<th>ACTION DESCRIPTION</th>
<th>COM</th>
<th>VOL/ISSUE</th>
<th>EXP DATE</th>
<th>R. NUM</th>
</tr>
</thead>
<tbody>
<tr>
<td>-</td>
<td>20040924</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Proposed Reg Published in SR</td>
<td></td>
<td>28/9</td>
<td>20050511</td>
<td></td>
</tr>
<tr>
<td>-</td>
<td>20050111</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Received by Lt. Gov &amp; Speaker</td>
<td></td>
<td></td>
<td>20050511</td>
<td></td>
</tr>
<tr>
<td>H</td>
<td>20050111</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Referred to Committee</td>
<td>H3M</td>
<td>27</td>
<td></td>
<td></td>
</tr>
<tr>
<td>S</td>
<td>20050111</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Referred to Committee</td>
<td>SG 8</td>
<td>8</td>
<td></td>
<td></td>
</tr>
<tr>
<td>H</td>
<td>20050222</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Committee Request Withdrawal</td>
<td>H3M</td>
<td>27</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>120 Day Period Tolled</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-</td>
<td>20050302</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Withdrawn and Resubmitted</td>
<td></td>
<td>20050519</td>
<td></td>
<td></td>
</tr>
<tr>
<td>S</td>
<td>20050329</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Resolution Intro to Approve</td>
<td>SG 8</td>
<td>676</td>
<td></td>
<td></td>
</tr>
<tr>
<td>-</td>
<td>20050519</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Approved by: Expiration Date</td>
<td></td>
<td>29/6</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**STATUTORY AUTHORITY:**

1976 Code Sections 43-1-80 and 20-7-2980 et seq.

**SYNOPSIS:**

The South Carolina Department of Social Services (SCDSS) is required to review child care regulations every three years. These proposed regulations replace the current regulations in their entirety. These regulations update current requirements in order to clarify current regulations, meet the United States Department of Health and Human Services (USDHHS) safety guidelines, as well as United States Department of Agriculture (USDA) food and snack regulations, and finally, raises the South Carolina regulations up to minimum child care standards already in place in neighboring states.
The areas in which these regulations are amended include the following: (1) Increasing the number of staff to children in certain age ranges, and (2) updating health, sanitation, and safety requirements to ensure consistency with the South Carolina Department of Health and Environmental Control (SCDHEC) and/or USDA’s requirements. The regulations also clarify existing definitions and add some new ones.

**Instructions:**
Replace current sections 114-520 through 114-521 with new sections 114-520 through 114-521. Add new sections 114-522 through 114-529. The Department requests that section 114-526 be reserved for future use in order to keep section numbers consistent with other types of child care regulations.

**Text:**

114-520. GENERAL PROVISIONS.

A. Purpose
   (1) The purpose of these regulations is to establish standards that protect the health, safety and well-being of children receiving care in child care facilities, through the formulation, application and enforcement of these regulations.

B. Applicability
   (1) These regulations apply to child care centers operated by churches or religious entities as defined in section 114-521A(8).
   (2) These regulations do not apply to the following:
      (a) Educational facilities, whether private or public, which operate solely for educational purposes in grade one or above;
      (b) Five-year-old kindergarten programs;
      (c) Kindergartens or nursery schools or other daytime programs, with or without stated educational purposes, operating no more than four hours a day and receiving children younger than lawful school age;
      (d) Facilities operated for more than four hours a day in connection with a shopping center or service or other similar facility, where the same children are cared for less than four hours a day and not on a regular basis while parents or custodians of the children are occupied on the premises or are in the immediate vicinity and immediately available; however, these facilities must meet local fire and sanitation requirements and maintain documentation of these requirements on file at the facility available for public inspection;
      (e) School vacation or school holiday day camps for children operating in distinct sessions running less than three weeks per session, unless the day camp permits children to enroll in successive sessions so that their total attendance may exceed three consecutive weeks;
      (f) Summer resident camps for children;
      (g) Bible schools conducted during school vacation periods;
      (h) Facilities for the mentally retarded provided in Chapter 21, Title 44; and
      (i) Facilities for the mentally ill as provided for in Chapter 17, Title 44.

C. Access to and within the center, and physical site accommodations and equipment, shall be provided for children with disabilities to meet their health and safety needs in accordance with applicable state and federal laws.

114-521. DEFINITIONS.
A. Terms used in South Carolina Regulations, Chapter 114, Article 5, Part A, shall be all definitions cited in Section 20-7-2700 et seq., Code of Laws of South Carolina in addition to the definitions that follow:

1. Applicant: A person 21 years of age or older, representing a corporation, partnership, voluntary association, other public or private organization who has completed, signed and submitted a Department of Social Services (DSS) application form and other requirements to the Department in order to obtain a child care center registration.

2. Blood-borne pathogens: Pathogenic microorganisms that are present in human blood that can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV) and human immunodeficiency virus (HIV).

3. Center director: The on-site staff person, who is responsible for the daily operation of a child care center, including but not limited to supervision of staff and children. The center director can only have responsibility for one center and may not hold another full-time job during the hours of center operation.

4. Center co-director: The on-site staff person who is responsible for the daily operation of a child care center when the director is not present including, but not limited to, the supervision of staff and children.

5. Center director designee: The on-site staff person who assumes the responsibilities of the Director for limited periods of time, when neither the Director nor Co-Director is on-site.

6. Central registry of child abuse and neglect: An automated, computerized listing, maintained by the DSS containing the names(s), address(es), birth date(s), identifying characteristics and other information about individual(s) who have been listed on the registry due to the determination of perpetrating abuse or neglect upon a child.

7. Child: An individual, from birth through 15 years of age (chronologically), receiving care in a child care center; or up to 18 years of age if the child qualifies as special needs.

8. Child care center: A center that is registered for thirteen (13) or more children for care.

9. Complaint: Statement(s) reporting unsatisfactory conditions in a child care facility.

10. Complete application: An application is complete on the date of receipt of the last document required by the Department in order to issue a registration.

11. Department: Refers to the Department of Social Services.

12. Emergency person: An individual 18 years of age or older, not regularly employed by the child care center who is immediately available to serve as staff in emergency situations. This person shall meet all requirements of an employed teacher/caregiver, with the exception of training.


14. Lifeguard: A person having the qualifications of and possessing a current American Red Cross, YMCA, or equivalent Lifeguard Certificate, current First Aid Certificate and current CPR (which includes adult, child, and infant) Certificate.

15. Parent: The biological or adoptive mother or father, the legal guardian of the child or the individual agency with custody of the child.

16. Preschool child: A child 3 or 4 years of age or older but not yet eligible for public kindergarten.

17. Provisional registration: A registration issued by the Department to a director when the director is temporarily unable to comply with all the requirements for a registration.

18. Regular registration: A registration issued by the Department for two years to a director showing that the registrar is in compliance with the regulations of the Department at the time of issuance and authorizing the religious entity to operate in accordance with the regulations of the Department.

19. Renewal: To grant an extension of a regular registration.

20. School-aged child: A child at least old enough to enroll in public kindergarten.

21. Sex offender registry: A statewide computerized listing of names and other identifying information on convicted sex offenders maintained and updated by the State Law Enforcement Division (SLED) and authorized by Section 23-3-400 et. Seq., Code of Laws of South Carolina, 1976, as amended.
Staff: Full-time and part-time management, administrative, teaching/caregiving, program, maintenance, food service and service personnel; emergency and substitute personnel; supervised students; supervised student teachers and supervised volunteers.

Staff:child ratio: The maximum number of children permitted per teacher/caregiver.

Student teacher: An individual enrolled in his/her final practicum to be qualified for teacher certification. He or she shall meet the same health standards as other staff and undergo background investigation. He or she may be included in staff:child ratios.

Student volunteer: An individual at least 16 years of age from a recognized educational institution or who may receive credit, reimbursement for expenses or a stipend for providing services in a trainee capacity under supervision of a staff member at all times when providing direct care to children shall not be counted in the staff:child ratio.

Supervision: Care provided to an individual child or a group of children. Adequate supervision requires staff awareness of and responsibility for the ongoing activity of each child, knowledge of activity requirements and children’s needs and accountability for their care. Adequate supervision also requires the director, and/or staff being near and having ready access to children in order to intervene when needed. Supervision requires adequate staff to meet staff:child ratios.

Suspend: To void the regular registration of a child care center operated by a religious body.

Teacher/caregiver: Any person whose duties include direct care, supervision, and guidance of children in a child care center.

Toddler: A child 12 months of age or older but younger than 24 months of age.

Training: Participation by child care center staff, in workshops, conferences, educational or provider associations, formal schooling, in-service training, or planned learning opportunities provided by qualified individuals. Training shall be age appropriate for the child population served by the child care center and in subject areas related to: administration, child growth and development and health and safety (such as, but not limited to child care, nutrition, infection control, communicable disease management and causes and signs of child abuse and neglect). Training for directors may also be in areas related to supervision of child care staff or program administration.

Two-year olds: A child 24 months of age or older but younger than 3 years of age.

Volunteer: An individual parent, grandparent, other professional or skilled individual artist or crafts person at least 16 years of age infrequently assisting with the daily activities for children in a child care center who provides services without compensation and who is supervised by staff at all times when providing direct care to children. An individual meeting this definition is not required to undergo a fingerprint background check or health screening and is not counted in staff:child ratios.

114-522. PROCEDURES.

A. Pre-application consultation

(1) A potential operator may secure information about important items to consider before starting a child care facility by contacting staff of the State or Regional Child Care Licensing Office.

(2) Facilities owned and operated by a local church congregation, established religious denomination, religious college or university which does not receive state or federal financial assistance for child care services may secure information about the registration and inspection process for a child care facility by contacting staff of the State or Regional Child Care Licensing Office.

(3) Facilities owned and operated by a local church congregation, established religious denomination, religious college or university which receive funds through the state or federal government or which voluntarily elect to be licensed, may secure information about the licensing process by contacting staff of the State or Regional Child Care Licensing Office.

B. Registration

(1) An application for a registration shall be completed on appropriate Department forms and shall be signed by the director. The Department representative shall provide the applicant with the required
number of forms, a copy of current regulations, a copy of Section 20-7-2700 et seq., Code of Laws of South Carolina (1976), and a copy of Sections of the Children's Code related to child abuse and neglect with an explanation of procedures and information required by the Department. The Department representative shall request in writing that health and fire officials make inspections of the facility.

(2) After giving the applicant at least two working days notice, Department staff shall arrange a registration study during an on-site visit to the proposed facility for determining compliance with applicable regulations.

(3) Upon request of the Department, health and fire officials shall inspect the facility to determine compliance with appropriate regulations and shall put in writing on appropriate forms the results of their inspections.

(4) The Department shall review the completed application form, completed inspection report, completed health and fire inspection reports, current child abuse and criminal history background records checks, written policies and other information specified by the Department to make a determination of issuance or non-issuance of a registration and shall take one of the following actions:

(a) Issue a regular registration if all the provisions of the regulations and statute for the operation of a child care center have been met;

(b) Issue a provisional registration with an accompanying correction notice if one or more violations have been cited which do not seriously threaten the health, safety or well-being of children; or

(c) Deny the issuance of a registration if one or more violations seriously threaten the health, safety or well being of the children.

(5) Failure of Department staff, except as provided by statute, to approve or deny any complete application within ninety days shall result in the granting of a provisional registration.

(6) If a registration is issued, the Department staff shall mail the registration directly to the director.

(7) The registration shall state clearly the name of the director; the address and type of child care facility, the date on which the registration was issued and will expire, and the maximum number of children to be present in the center at any one time.

(8) Department staff shall notify the director as follows if a provisional registration is issued or an application for a registration is denied:

(a) If a provisional registration is issued, the Department shall notify the director in writing of violations to be corrected. The violations shall be cited by regulation number and shall include a form issued by the Department for the director to complete a written plan to correct each violation as approved by the Department; or

(b) If a registration is denied or suspended, the Department shall give the applicant written notice by certified mail indicating the reason(s) for the denial or suspension and inform the operator of the right to appeal the decision through administrative channels to the department and according to established appeals procedure for the department. Upon appeal, the decision of the department is final unless appealed by a party pursuant to an Administrative Law Judge.

(9) If a facility is found to be in operation after the Department has denied the application for the registration and the administrative appeal/review procedure has been completed, the Department shall notify the Department’s Office of General Counsel.

C. Provisions of the registration

(1) A regular registration issued by the Department to the child care center shall be valid for two years from date of issuance, unless suspended by the Department or voluntarily surrendered by the director; provided however, that a change in location, ownership or sponsorship of the facility shall automatically void the registration.

(2) A provisional registration issued by the Department to a child care center shall be issued for a period within which the deficiencies shall be corrected, and within the conditions permitted by statute.

(3) A provisional registration shall be amended from a provisional to a regular registration when all deficiencies have been verified as corrected.
(4) An application for a registration may be denied or suspended by the Department if the director, any staff member, volunteer(s) or emergency person(s) has been determined to have abused or neglected any child as defined in Section 20-7-490B, S.C. Code of Laws, 1976 as amended.

D. Inspection and consultation
   (1) Department staff may visit and inspect a child care center operated by religious bodies at anytime during the hours of operation without prior notice to verify regulatory compliance with staff:child ratios.
   (2) Department staff may also visit the facility under the following conditions:
      (a) The facility requests in writing that a Department representative visit to discuss problems related to the applicable regulations or other matters of concern;
      (b) The facility has not applied for registration to the Department as mandated by law; or
      (c) There has been a report of child abuse or child neglect involving the facility.
   (3) Upon receipt of a regulatory complaint on staff:child ratios, the Department shall conduct an unannounced inspection of the center to investigate the complaint. If the complaint is written, the Department shall provide a copy to the director upon request.
   (4) Fire and health officials may visit the facility under the following conditions:
      (a) When there is a complaint against the facility citing health and fire regulations violations that threaten serious harm to the children;
      (b) When inspections have been requested by Department staff for registration; or
      (c) When verification is needed that deficiencies cited by fire and/or health officials have been corrected.

E. Reasons for registration denial, suspension or non-renewal
   (1) A registration may be denied, withdrawn or not renewed by the Department if the owner, director or staff member has been determined to have abused or neglected any child as defined in Section 20-7-490B, S.C. Code of Laws, 1976 as amended.
   (2) A registration may be denied, withdrawn, or non-renewed by the Department if cited deficiencies threaten serious harm to the health and/or safety of the children.

F. Reporting of changes affecting registration
   (1) The director shall immediately report to the Department when an occurrence takes place that may affect the status of the registration including the following:
      (a) Change in director, ownership, or sponsorship;
      (b) Change in center location; and
      (c) Major renovations or alterations to the building.

G. Registration renewal
   (1) One hundred and twenty (120) days prior to the expiration date of the current registration, Department staff shall notify the director in writing of the time and requirements for renewal and shall request health and fire inspections.
   (2) The same Department actions cited in 114-522B(1-9) above are applicable to the renewal process, except that the Department shall initiate the registration renewal process one hundred and twenty (120) days in advance.

114-523. MANAGEMENT.

A. Display of registration
   (1) The center shall display the current registration, as well as any violations in a prominent public place in the center. The back of the registration shall be displayed if deficiencies are listed.
(2) When advertising or issuing other public notifications of the service provided, the official registration number issued by the Department shall be included.

B. Capacity
   (1) No child care center operated by religious bodies shall have present at any one time children in excess of the number for which it is registered.
   (2) Exception: In the event of a natural disaster or unscheduled closing of a child care center, the capacity may be exceeded temporarily for a maximum of 90 days to accommodate the displaced children. The director shall notify the Department of the situation and maintain appropriate staff:child ratios at all times. Required records shall be kept on file for the new enrollees.

C. Child abuse
   (1) The center shall immediately report suspected child abuse or child neglect to the Department’s Office of Child Protective and Preventive Services (CPS) or to local law enforcement in accordance with South Carolina Code Annotated Section 20-7-510.
   (2) The director and staff shall cooperate with Department staff during an investigation of child abuse or neglect. Cooperation shall include the following:
      (a) Participate in informational conferences with CPS staff;
      (b) Release records as appropriate, of children and staff upon request; and
      (c) Allow access to the center premises for inspection and investigation of the child abuse allegation by the Department and other officials as permitted by statute.

D. Reporting of incidents
   (1) The center shall report the following incidents to the parents/guardians immediately and provide written notification to the Department within 48 hours after the occurrence:
      (a) Accidents or injuries involving any child occurring at the center requiring professional medical treatment; and
      (b) Child or staff occurrences of communicable diseases that the Department of Health and Environmental Control (DHEC) requires to be reported in its Exclusion List.
   (2) The following incidents shall be reported to the Department immediately:
      (a) A child who is missing from the premises, or who is left unattended in a vehicle operated by the child care center;
      (b) Major structural damage to center;
      (c) Charges or convictions of crimes against the director or any staff person;
      (d) Reports of alleged child abuse involving the director or any staff person; and
      (e) Death of a child while at the facility.
         (i) In the event of the death of a child at the facility, the center shall also immediately notify emergency medical personnel, the child’s parents, and law enforcement; and
         (ii) Provide information for children and parents as appropriate.
   (3) A follow-up report shall be submitted to the Department as soon as an investigation by facility is completed and corrective action is taken.

E. Child records
   (1) The facility shall keep a separate record for each child.
   (2) The file shall be kept in a confidential manner.
   (3) A child’s record shall be maintained on file at the child care center and made available for review on-site by the Department only in the event of a CPS investigation, and it shall contain the following:
      (a) Child’s full legal name, nickname, birth date, date of enrollment, current home address and home telephone number;
(b) Full name of parent(s)/guardian(s), work and home telephone numbers, or telephone number(s) where they can be reached during the time the child is in the center;

c) Name(s), address(es) and telephone number(s) of person(s) who can assume responsibility for the child in an emergency if the parent(s)/guardian(s) cannot be reached;

d) Name, address and telephone number of family physician or health resource;

e) Name(s), address(es) and verification of identification, such as valid driver's license, other picture identification or personal family code word of person(s) authorized to take the child from the child care center;

(f) Accurate records of daily attendance for each child;

(g) Authorization from parent(s)/guardian(s) for child to obtain emergency medical treatment;

(h) Authorization from parent(s)/guardian(s) for child to be transported to and from the center during field trips and other away from the center activities; and

(i) Authorization from parent(s)/guardian(s) for child to participate in swimming activities.

4) A health record shall be maintained in the center for each child enrolled, and it shall include all of the following information:

(a) A signed statement of the child's health prior to admission to the child care center;

(b) A current South Carolina Certificate of Immunization which shall be made available for review on-site; and

(c) Other health information if deemed necessary by the director of the center and/or by parent(s)/guardian(s).

F. Staff records shall include the following:

1) Names, positions and hours of duty of staff members;

2) Criminal history background records check forms for the director, staff, emergency person(s), and any volunteer(s) not meeting the definition at 114-521A(33);

3) Record of training for director and staff;

4) Health records for the director, staff, and emergency person(s) in accordance with 114-525G(1)(a-c).

G. Communication

1) The center shall have an operable telephone with an outside line that is accessible to staff persons in emergencies.

2) Emergency telephone numbers for the police, fire department, ambulance service and poison control center shall be posted by each telephone.

H. Staffing

1) Child abuse checks.

(a) The director or staff shall not have been determined to have committed an act of child abuse or neglect or have been convicted of any crime listed in Chapter 3 of Title 16, Offenses Against the Person, any crime listed in Chapter 15 of Title 16, Offenses Against Morality and Decency or for the Crime of Contributing to the Delinquency of a Minor in Section 16-17-490.

(b) A check of the South Carolina Central Registry of Child Abuse and Neglect shall be requested by the director(s) on each staff person, except for volunteers in accordance with the following time lines:

(i) For the director(s) and at least two staff persons prior to the initial issuance of a regular or provisional registration;

(ii) For the director(s) and staff prior to employment;

(iii) For all other staff persons (including the emergency person) prior to employment; and

(iv) For all persons hired by the child care facility at each registration renewal.

(c) No child care center shall employ or retain an individual who has been determined to have committed an act of child abuse or neglect.
(2) Background criminal history checks.
   (a) To be employed by or to provide teacher/caregiver services at a child care facility, a person shall first undergo a State fingerprint review from SLED.
   (b) A person may be provisionally employed or may provisionally provide teacher/caregiver services after the favorable completion of the state fingerprint review. The Federal Bureau of Investigation (FBI) fingerprints shall be submitted for review within 14 business days upon receiving the SLED results. Upon the completed FBI review, the results will be forwarded to the appropriate Department for distribution.
   (c) No child care facility may employ a person, engage the services of or knowingly allow a person in the child care facility during normal hours of operation who is required to register under the sex offender registry act pursuant to SC Code of Laws Section 23-3-430 or who has been convicted of:
      (i) A crime listed in SC Code of Laws Chapter 3 of Title 16, Offenses Against the Person;
      (ii) A crime listed in SC Code of Laws Chapter 15 of Title 16, Offenses Against Morality and Decency;
      (iii) The crime of contributing to the delinquency of a minor, contained in SC Code of Laws Chapter 17 of Title 16 at Section 16-17-490;
      (iv) The felonies classified A through F in SC Code of Laws Chapter 1 of Title 16 at Section 16-1-10A;
      (v) The offenses enumerated in Chapter 1 of Title 16 at Section 16-1-10D; or
      (vi) A criminal offense similar in nature to the crimes listed in this subsection committed in other jurisdictions or under federal law.
   (d) The results of the fingerprint reviews are valid and reviews are not required to be repeated as long as the person remains employed by or continues providing teacher/caregiver services in a child care facility; however, if a person has a break in service of one year or longer, the fingerprint reviews shall be repeated.
   (e) Copies of State and Federal fingerprint results shall be retained in the staff file and available for review by Department staff, upon request.

(3) Center director and/or center co-director(s).
   (a) There shall be a center director and/or center co-director(s), who, operating within the organization’s chain of command, is responsible for the following:
      (i) Administration and management of the center;
      (ii) Safety and protection of the children;
      (iii) Development and implementation of policies and procedures;
      (iv) Communication with parents about the policies and procedures of the center;
      (v) Staff hiring, supervision and ongoing professional development; and
      (vi) Compliance with all applicable laws and regulations of the child care center.
   (b) The center director(s) or a designee shall be physically present on-site during the hours of the center’s operation. A center co-director is required when the program operates more than 12 hours per day.
   (c) The center director and center co-director(s) shall be at least 21 years of age and meet one of the following qualifications:
      (i) A college or university degree in early childhood education, child development, child psychology or a related field that includes at least eighteen credit hours in child development and/or early childhood education;
      (ii) A bachelor’s degree from a college or university in any subject area and six months experience working with children in a licensed, approved or registered child care facility;
      (iii) An associate’s degree from a college or university in early childhood education, child development and/or child psychology or a related field, that includes at least eighteen credit hours in child development and/or early childhood education with six months work experience in a licensed, approved or registered child care facility;
(iv) A diploma in child development/early childhood education from an institution of higher learning or a child development associate (CDA) credential, and one year work experience in a licensed, approved or registered child care facility; or

(v) A high school diploma or General Educational Development (GED) certificate with at least one year of work experience in a licensed, approved or registered child care facility. That year shall have included supervision of child care staff. A director/co-director who is prevented from obtaining a high school diploma or GED because of a disability, and who otherwise is qualified to perform the essential functions of the position, must have at least a high school Certificate of Completion with at least one year of work experience in a licensed, approved or registered child care facility. That year shall have included supervision of child care staff.

(4) Teacher(s)/caregiver(s)

(a) Teacher(s)/caregiver(s) shall meet the following qualifications:
   (i) Be at least 18 years of age, and able to read and write.
   (ii) A teacher/caregiver who began employment in a licensed, approved, or registered child care center in South Carolina after June 30, 1994, must have at least a high school diploma or GED and at least six months experience as a teacher/caregiver in a licensed, approved or registered child care facility.
   (iii) A teacher/caregiver who is prevented from obtaining a high school diploma or GED because of a disability, and who otherwise is qualified to perform the essential functions of the position of teacher/caregiver, must have at least a high school Certificate of Completion and at least six months experience as a teacher/caregiver in a licensed, approved, or registered child care facility.
   (iv) If a teacher/caregiver does not meet the experience requirements, the teacher/caregiver must be directly supervised for six months by a staff person with at least one-year experience as a teacher/caregiver in a licensed, approved, or registered child care facility.
   (v) Within six months of being employed, a teacher/caregiver must have six clock hours of training in child growth and development and early childhood education or shall continue to be under the direct supervision of a teacher/caregiver who has at least one year of experience as a teacher/caregiver in a licensed, approved, or registered child care facility.
   (vi) A teacher/caregiver who has two years experience as a teacher/caregiver in a licensed, approved facility and was employed as of July 1, 1994, in a licensed or approved child care center in South Carolina is exempt from the high school diploma, GED, and Certificate of Completion requirements of (ii and iii) above.
   (vii) A teacher/caregiver with an undergraduate college or university degree in early childhood, child development, or a related field may begin working with the children immediately without additional supervision.

(b) Exception: A teacher/caregiver may be 16 or 17 years of age if he/she is continuously supervised by a qualified teacher/caregiver who is in the room at all times.

(c) Exception: Staff persons who were employed prior to the effective date of these revised regulations are not required to meet the staff qualifications specified in this chapter if the staff qualifications required in the prior regulations are met. If a teacher/caregiver has had more than a twelve-month break in service, the new guidelines shall be met for re-employment as a teacher/caregiver.

(5) Professional development.

(a) The director shall participate in at least twenty clock hours of training annually. Training shall be age appropriate for the child population served by the child care center and at least five hours shall be related to program administration and at least five hours shall be in child growth and development and health and safety excluding first aid and CPR training. The remaining hours may come from, but not be limited to, the following areas: Safety, Health, Nutrition, Guidance, or Professional Development and must include blood-borne pathogens training as required by OSHA.

(b) All staff, with the exception of emergency person(s) and volunteer(s), providing direct care to the children shall participate in at least fifteen clock hours annually. At least five clock hours shall be in child growth and development and at least five clock hours shall be in curriculum activities for children excluding first aid and CPR training. The remaining hours may come from, but not be limited to, the
following areas: Guidance, Curriculum Activities, Nutrition, or Professional Development and must include blood-borne pathogens training as required by OSHA.

c) When children with special needs are enrolled, the director and staff members shall receive orientation and/or training in understanding the child’s special needs and ways of working in group settings when children with special needs are enrolled.

d) All staff shall receive information regarding the developmental abilities of the age group(s) with whom the teacher/caregiver will be working.

e) Records of training received shall be kept on the premises and include the name of the person trained, the person or persons conducting the training, date, number of hours, location, and the competency area of the training.

f) At least one person who is certified in pediatric first aid, including rescue breathing, CPR, and management of a blocked airway shall be present in the center at all times when children are in care, and during group outings or field trips. Training shall be provided by an individual who is certified as a trainer by a recognized health care organization.

114-524. APPLICATION OF STAFF:CHILD RATIOS.

A. Children shall be directly supervised at all times by qualified staff persons.

1) Directly supervised shall be defined as:

a) For infants and toddlers: staff persons shall be in the same room or area as the children and the children shall be within their sight at all times; and

b) For preschool and school age children: staff persons are in the same room or area, readily accessible, aware and responsible for the ongoing activity of each child and able to intervene when needed.

2) The center shall have a written procedure to account for the presence of each child as the child enters and exits the premise, enters and exits a vehicle or moves to a new location in or around the center.

3) There shall be at least two staff persons in the center at all times.

4) Children in feeding chairs shall be constantly supervised.

5) Unsupervised isolation of a child shall not be allowed. The child shall be within sight of staff if isolation from the group is used.

6) Children shall not be subjected to:

a) Withholding, forcing, or threatening to withhold or force food, sleep or toileting;

b) The use of children to discipline other children; and

c) Restraining children through drugs or mechanical restraints.

B. Ratios

1) The following staffing ratios apply at all times children are present on the premises and during activities away from the center and shall be prominently posted in all classrooms.

<table>
<thead>
<tr>
<th>Child’s Age</th>
<th>Staff:Child Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Two years after</td>
</tr>
<tr>
<td>Birth to one year</td>
<td>1:5</td>
</tr>
<tr>
<td>One to two years</td>
<td>1:6</td>
</tr>
<tr>
<td>Two to three years</td>
<td>1:9</td>
</tr>
<tr>
<td>Three to four years</td>
<td>1:13</td>
</tr>
<tr>
<td>Four to five years</td>
<td>1:18</td>
</tr>
<tr>
<td>Five to six years</td>
<td>1:21</td>
</tr>
<tr>
<td>Six to twelve years</td>
<td>1:23</td>
</tr>
</tbody>
</table>
When there are mixed age groups in the same room, the staff:child ratio shall be consistent with the age of the majority of the children when no infants or toddlers are in the mixed age group. When infants or toddlers are in the mixed age group, the staff:child ratio for infants and toddlers shall be maintained.

For mixed age groups, with one or more infants or toddlers, the ratios applicable to the youngest child in the group apply.

C. Nap time staff:child ratios
(1) During nap times the following ratios apply as long as at least one other staff person is readily available for each group of children ages two and older:

<table>
<thead>
<tr>
<th>Child’s Age</th>
<th>Staff:Child Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Two years after</td>
</tr>
<tr>
<td>Birth to one year</td>
<td>1:5</td>
</tr>
<tr>
<td>One to two years</td>
<td>1:6</td>
</tr>
<tr>
<td>Two to three years</td>
<td>1:18</td>
</tr>
<tr>
<td>Three to four years</td>
<td>1:26</td>
</tr>
<tr>
<td>Four and older</td>
<td>1:36</td>
</tr>
</tbody>
</table>

D. Water safety staffing
(1) The following staffing ratios apply at all times while children are swimming, wading or near a water source. The staffing ratios shall also apply at all times while children are near a water body that poses a potential risk based upon the age of the child.

<table>
<thead>
<tr>
<th>Child Age</th>
<th>Staff:Child Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>Birth to two years</td>
<td>1:1</td>
</tr>
<tr>
<td>Two to three years</td>
<td>1:2</td>
</tr>
<tr>
<td>Three to four years</td>
<td>1:3</td>
</tr>
<tr>
<td>Four to five years</td>
<td>1:6</td>
</tr>
<tr>
<td>Five years and older</td>
<td>2:25</td>
</tr>
</tbody>
</table>

(2) All swimming activities shall be supervised by a person with current lifeguard training certification. If this is a staff person who has current lifeguard training certification, they may be included in the staff:child ratio. In instances in which all staff members can, without the ability to swim, quickly reach any child, a certified lifeguard is unnecessary.

114-525. HEALTH, SANITATION AND SAFETY.

A. Child health
(1) There shall be a statement from a parent/guardian attesting to the health status of the child within 30 days prior to admission and utilizing the appropriate DSS Form.

(2) Children shall be excluded from child care when they exhibit the conditions listed in the DHEC Exclusion Policy.

(3) During hours of operation there shall be no smoking or consumption of alcoholic beverages in the areas used by children or in the food preparation or storage areas. Smoking shall be permitted only in designated areas, a safe distance from the center. Consumption of alcoholic beverages or use of other non-prescription narcotic or illegal substances is prohibited on the center premises. People who appear to be under the influence of alcohol or other drugs shall not be in the center when children are present.
B. Sanitation
(1) Staff shall ensure that children’s faces and hands are clean.
(2) Furniture, toys, and equipment that come into contact with children’s mouths shall be washed, rinsed, and sanitized daily and more often if necessary.
(3) Furniture, toys and equipment soiled by secretion or excretion shall be sanitized before reuse.
(4) Linens and blankets as well as cribs, cots, and mats shall be cleaned at least weekly.
(5) If playpens are used, they shall have waterproof, washable, comfortable pads.
(6) If children brush their teeth at the center, each child shall have a separate, labeled toothbrush, stored with bristles exposed to circulating air, and not in contact with another toothbrush.

C. Emergency medical plan
(1) The center shall have an emergency medical plan to address the following:
   (a) Medical conditions under which emergency care and treatment is warranted;
   (b) Steps to be followed in a medical emergency;
   (c) The hospital or source of health care to be used;
   (d) The method of transportation to be used; and
   (e) An emergency staffing plan.
(2) Emergency information for the child shall be taken with the child to the hospital or emergency location.
(3) A staff person shall remain with the child at the hospital or emergency location until the parent arrives.

D. Medications or medical procedures
(1) Written, signed and dated parental consent is required prior to the administration of any prescription or over the counter medication or administration of special medical procedures.
   (a) All medications shall be used only for the child for whom the medication is labeled;
   (b) Medications shall not be given in excess of the recommended dose; and
   (c) Prescribed special medical procedures ordered for a specific child shall be written, signed and dated by a physician or other legally authorized healthcare provider.
(2) Storage of medications.
   (a) All medications shall be kept in their original labeled containers. The child’s first and last name shall be on all medications.
   (b) All medications shall be stored in a separate locked container under proper conditions of sanitation, temperature, light, and moisture.
   (c) Discontinued and expired medications shall not be used and shall be returned to the parent or disposed of in a safe manner.
(3) Medication log.
   (a) For each medication that is administered by a staff person, a log shall be kept including the child’s name, the name of the medication, dosage, date, time and name of person administering the medication. This information shall be logged immediately following the administration of the medication and a copy provided to the child’s parent(s)/guardian(s).
(4) Medication errors.
   (a) Medication errors, e.g. failure to administer a medication at the prescribed time, administering an incorrect dosage of medication or administering the wrong medication; shall be recorded in the child’s record.
   (b) The parent shall be immediately notified and notified in writing of a medication error or a suspected adverse reaction to a medication.

E. First aid kit
(1) A first aid kit shall be available for the treatment of minor cuts and abrasions and shall be stored in a location inaccessible to children.

F. Diapering
(1) Each room in which children who wear diapers are cared for shall have its own diaper-changing area adjacent to the hand-washing sink.
(2) Facilities caring for infants shall provide a diaper changing area located within clear view.
(3) Diaper changing procedures shall be consistent with those recommended by the Center for Disease Control and Prevention.
(4) Diapering surfaces shall be sanitizable.
(5) Diapering surfaces shall be clean, seamless, waterproof and sanitary.
(6) Diapering surfaces shall be cleaned and sanitized after each use by washing to remove visible soil followed by wiping with an approved sanitizing solution (e.g. 1 tablespoon liquid chlorine bleach per one quart of water) and/or disposable, non absorbent paper sheets approved for this purpose and shall be discarded immediately after each diapering.
(7) Blood contaminated materials and diapers shall be discarded in a plastic bag with a secure tie, or in a manner approved by OSHA or the county in which the center is operating. Surfaces contaminated with blood or blood-containing body fluids shall be cleaned with a solution of chlorine bleach and water, or in a manner approved by OSHA or the county in which the center is operating.
(8) Diapering shall occur only at a diapering changing area or in a bathroom.
(9) Diapering changing areas shall not be used for any purpose other than for diapering.
(10) Individual disposable wipes shall be used at each diaper change and shall be placed in a plastic-lined, covered container and disposed of properly, and kept out the reach of children.
(11) Each waste and diaper container shall be labeled and clean and free of build-up of soil and odor. Wastewater from such cleaning operations shall be disposed of as sewage.
(12) Soiled disposable diapers and disposable wipes shall be kept in a closed, labeled hands-free operated, plastic lined receptacle within arm’s reach of diaper changing area separate from other trash. Soiled non-disposable items shall be kept in a sealed plastic bag after feces shall be disposed of through the sewage.
(13) Disposable non-absorbent paper sheets shall be disposed of immediately after diapering is completed.
(14) Soiled disposable diapers shall be disposed outside the building daily. Soiled non-disposable diapers shall be kept in a sealed plastic bag and returned to the parent daily.
(15) Staff shall check diapers and clothing at a frequency that ensures prompt changing of diapers and clothing.
(16) No child shall be left unattended while being diapered.

G. Staff health
(1) The director shall maintain the following records in the center for herself/himself, staff, and emergency person(s):
   (a) Medical statements required by the Department and completed by the staff person verifying whether his/her health is satisfactory. Medical statements shall be updated as necessary;
   (b) A health assessment from a health care provider assessing the ability of the staff person to work with children. The health assessment shall be completed within three months prior to employment or within the first month of employment and shall include health history, physical exam, vision and hearing screening, tuberculosis screening, and a review of immunization status. A new health assessment shall be obtained by the director and staff at least every four years after the initial assessment or as necessary; and
   (c) Written evidence from a physician or health resource attesting that each staff person is free from communicable tuberculosis at the time of employment and subsequently according to state statute.
(2) No person who is known to be afflicted with any disease in a communicable form, or who is an
known carrier of such a disease, or who is afflicted with boils, infected wounds, or sores or acute
respiratory infection, shall work in any capacity in a child care center in which there is likelihood of such
person transmitting disease or infection to other individuals.

(3) Any staff member, including the director, emergency person(s) and volunteer(s) who, upon
examination or as a result of tests, shows a condition that could be detrimental to the children or staff, or
which would prevent satisfactory performance of duties, shall not continue work at the child care center
until the healthcare provider indicates that the condition no longer presents a threat to children or staff.

(4) Staff persons shall wash their hands with soap and warm running water upon arrival at the
center, before preparing or serving food, before assisting a child with eating, after assisting a child with
toileting or diapering, before and after toileting, after administering medication, after cleaning, after
assisting with wiping noses, after contact with body fluids, after contact with animals and after using
cleaning materials. Hands shall be washed even if gloves are worn to perform these tasks.

(5) Staff shall be excluded when they exhibit the conditions listed in the DHEC Exclusion Policy.

H. Fire safety and emergency preparedness

(1) Private and public child care centers shall comply with the regulations and codes of the State
Fire Marshal.

(2) In the event of a natural disaster or unscheduled closing of a child care center, the capacity may
be exceeded temporarily to accommodate the displaced children. The director shall notify the
Department of the situation and maintain appropriate staff:child ratios at all times. Required records shall
be kept on file for the new enrollees.

(3) The facility shall have an up to date written plan for evacuating in case of a fire, natural disaster
or other threatening situation that may pose a health or safety hazard. The facility shall also include
procedures for staff training in this emergency plan.

I. Transportation

(1) If the center provides or arranges for transportation through contract, the following
transportation requirements apply:

(a) The staffing ratios specified in 114-524B(1-3) apply. The driver of the vehicle shall not be
counted in the ratios for infants or toddlers;

(b) Each child shall be secured in an individual, age-appropriate safety restraint at all times the
vehicle is in motion;

(c) Safety restraints shall be used in accordance with the manufacturer’s instructions;

(d) A child shall not be left unattended in a vehicle;

(e) Placement of children in the vehicle shall be in accordance with all applicable state and
federal laws;

(f) The driver shall have a valid regular or commercial driver's license and shall be in
compliance with Section 20-7-2725A(4) of the Code of Laws of 1976;

(g) There shall be a first aid kit and emergency information on each child in the vehicle;

(h) Use of tobacco products is prohibited in the vehicle;

(i) Written consent from the parent is required prior to transportation;

(j) When the facility provides transportation to and from the child's home, the facility staff shall
be responsible for picking the child up and returning the child to a designated location; and

(k) The director and/or staff of the center shall provide the driver of the vehicle with a record
that lists the name, address, and telephone number of the center, as well as names of children being
transported.

(2) The following requirements apply for safe pick-up and drop-off:

(a) The center shall have safe crossways and pick-up and drop-off locations and communicate
these locations to the parents;

(b) Children shall be directly supervised during boarding and exiting vehicles;
(c) The director and/or staff shall have on file, in the facility, written permission from parent(s)/guardian(s) for transporting children to and from the home, school, or other designated places, including center-planned field trips and activities; and

(d) Written transportation plans for routine travel shall be on file. Plans shall include a checklist to account for the loading and unloading of children at every location.

114-526. RESERVE FOR FUTURE USE.

114-527. PHYSICAL SITE.

A. Indoor space and conditions

(1) The director shall provide at least thirty-five (35) square feet of indoor play space per child, measured by Department staff from wall to wall. Department staff shall determine the total number of children to be cared for in each room by measuring and computing the rooms separately. Bathrooms, reception areas, isolation rooms, halls and space occupied by cupboards, shelves, furniture and equipment which are accessible to children for their use shall be allowable space. Kitchens, storage rooms and storage cabinets used solely for or by staff shall be excluded. Halls, although included in total indoor space, shall not be used for activities or storage of furniture and equipment.

(2) Ventilation.

(a) Child care areas, dining areas, kitchens and bathrooms shall be ventilated by mechanical ventilation, such as fans or air conditioning, or at least one operable window.

(b) If freestanding fans are used, fans shall have a stable base, be equipped with protective guards and be placed in a safe location.

(c) Windows, including windows in doors, when utilized for ventilation purposes shall be securely screened to prevent the entrance of insects.

(d) Windows accessible to children under 5 years of age that are above ground level of the building shall be adjusted to limit the opening to less than 6 inches or protected with guards that do not block outdoor light.

(3) Safety glass shall be used on clear glass windows and doors that are within thirty-two inches above floor level and that are accessible to children. Decals shall be applied to all glass or sliding patio doors and placed at eye level of the children being cared for at the facility.

(4) Lighting.

(a) Rooms, hallways, interior stairs, outside steps, outside doorways, porches, ramps and fire escapes shall be lighted.

(b) At least twenty foot candles of light shall be required on all work surfaces in food preparation, equipment washing, utensil washing, hand-washing areas, and toilet rooms.

(c) Adequate, safe lighting for individual activities, for corridors, and for bathrooms shall be provided.

(5) Environmental hazards.

(a) Safety barriers shall be placed around all heating and cooling sources, such as hot water pipes, fixed space heaters, wood- and coal-burning stoves, hot water heaters, and radiators, that are accessible to children to prevent accidents or injuries upon contact by the child.

(b) Knives, lighters, matches, projectile toys, tobacco products, microwave ovens and other items that could be hazardous to children shall not be accessible to children.

(c) To prevent lead poisoning in children, child care centers shall meet applicable lead base paint requirements, as established by the DHEC.

(d) Floors, walls, ceilings, windows, doors and other surfaces shall be free from hazards such as peeling paint, broken or loose parts, loose or torn flooring or carpeting, pinch and crush points, sharp edges, splinters, exposed bolts and openings that could cause head or limb entrapment.
(e) The use of sinks, equipment and utensil-washing sinks, or food preparation sinks for the cleaning of garbage and refuse containers and the cleaning of mops or similar wet floor cleaning tools and for the disposal of mop water or similar liquid waters is prohibited.

(f) Children shall not be present in the area during construction or remodeling and not in the immediate area during cleaning or in such a manner as not to create a condition that might result in an accident or cause harm to the health and safety of the children.

(g) The following items shall be secured or inaccessible to children for whom they are not age appropriate:

(i) Items that may cause strangulation such as blind cords, plastic bags, necklaces, drawstrings on clothing and string;

(ii) Items that may cause suffocation such as sand, beanbag chairs, pillows, soft bedding and stuffed animals; and

(iii) Items that may cause choking such as materials smaller than 1 ¼ inch in diameter, items with removable parts smaller than 1 ¼ inch in diameter, Styrofoam objects and latex balloons.

(6) Water supply.

(a) The water supply shall meet applicable requirements for water quality and testing in accordance with the DHEC.

(b) The center shall have hot and cold water under pressure. (Forty PSI recommended) If an individual private well water supply is used, the director shall obtain approval pursuant to DHEC to ensure safe location, construction, and proper maintenance and operation of the system.

(c) Hot water shall be between 100 and 120 degrees Fahrenheit.

(d) Safe drinking water shall be available to children at all times and there shall be no use of common drinking cups.

(e) If a water fountain is available, it shall be of an angle-jet design, maintained in good repair and kept sanitary. There shall be no possibility of mouth or nose submersion.

(f) Ice used for any purpose shall be made from water from an approved source. The ice shall be handled and stored in a sanitary manner.

(7) Temperature.

(a) Temperature shall be maintained between 68 and 80 degrees Fahrenheit as appropriate to the season while children are present in the center.

(b) When outdoor temperature exceeds 90 degrees Fahrenheit, caution shall be used when children are involved in outdoor physical activities.

(8) Sanitation.

(a) Clean and sanitary conditions shall be maintained indoors and outdoors, including indoor and outdoor recreational equipment and furnishings.

(b) Measures to control insects, rodents, and other vermin shall be taken to prevent harborage, breeding, and infestation of the premises.

(c) All solid wastes shall be disposed of at sufficient frequencies and in such a manner not to create a rodent, insect, or vermin problem.

(d) Trash in diapering areas shall be kept in closed, hands-free operated, plastic lined receptacles in good repair.

(e) Trash in kitchen areas shall be kept in closed, plastic lined receptacles.

(f) Trash in children’s restrooms, classrooms, and eating areas shall be kept in plastic lined receptacles.

(g) Trash receptacles outside the building, shall be watertight with firm fitting lids that prevent the penetration of insects and rodents.

(h) Trash disposal and sewage system construction and usage shall be in accordance with local standards and ordinances.

(i) The use of child care room, bathroom, or kitchen sinks for cleaning of trash receptacles or cleaning equipment is prohibited.

(9) Doors.
(a) Protective gates shall be of the type that do not block emergency entrances and exits and that prevent finger pinching and head or limb entrapment.

(10) Landings, stairs, handrails and railings.
   (a) Children shall not have access to a door that swings open to a descending stairwell or outside steps, unless there is a landing that is at least as wide as the doorway at the top of the stairs.
   (b) Each ramp and each interior stairway and outside steps exceeding two steps shall be equipped with a secure handrail at the height appropriate for the sizes of the children at the center.
   (c) Stairs shall have a nonskid surface.
   (d) Each porch and deck that has over an 18-inch drop shall have a well-secured railing.
   (e) Interior stairs that are not enclosed shall have a barrier to prevent falls.

(11) Electrical sources.
   (a) The center shall be connected with an electrical source.
   (b) Electrical outlets and fixtures shall be connected to the electrical source in a manner that meets local electrical codes, as certified by an electrical code inspector.
   (c) Electrical outlets shall be securely covered with childproof covers or safety plugs when not in use in all areas accessible to children.
   (d) No electrical device accessible to children shall be located so that it could be plugged into the outlet while in contact with a water source, such as sinks, tubs, shower areas, or swimming/wading pools unless ground fault devices are utilized.

(12) Bathrooms.
   (a) There shall be at least one flush toilet for every 20 children over two years of age. Staff shall be included when determining availability of toilets if there are no staff rest rooms.
   (b) If seat adapters are used for toilet training, they shall be cleaned and sanitized after each use.
   (c) Toilet training equipment shall be provided to children who are being toilet trained.
   (d) There shall be at least one sink with hot and cold running water under pressure for every 20 children over two years of age. Sinks shall be located in or near each toilet area.
   (e) Toilets and sinks shall be at heights accessible to the children using them or shall be equipped with safe and sturdy platforms or steps.
   (f) Privacy shall be provided for toilets used by preschool and school age children.
   (g) Floor and wall surfaces in the toilet area shall have smooth, washable surfaces. Carpeting is not permitted in the toilet area.
   (h) Toilets, toilet seat adapters, sinks, and restrooms shall be cleaned at least daily and shall be in good repair.
   (i) Liquid or granular soap and disposable towels shall be provided at each sink.
   (j) Children shall not be left unattended in a bathtub or shower.
   (k) Easily cleanable receptacles shall be provided for waste material. Toilet rooms used by women shall be provided with at least one covered waste receptacle.
   (l) Bathroom facilities shall be completely enclosed.

B. Outdoor space
   (1) The director shall provide at least seventy-five (75) square feet of outdoor play space per child. Where outdoor space is insufficient at the center, the director and/or staff may take the children outdoors in shifts or utilize parks or other outdoor play areas which meet safety requirements and which are easily accessible.
   (2) The outdoor space shall be free from hazards and litter.
   (3) Outdoor walkways shall be free from debris, leaves, ice, snow, and obstruction.
   (4) Children shall be restricted from unsafe areas and conditions such as traffic, parking areas, ditches, and steep slopes by a fence or natural barrier that is at least four feet high.

C. Furniture, toys, and recreational equipment
(1) Shall be clean and free from hazards such as broken or loose parts, rust or peeling paint, pinch or crush points, unstable bases, sharp edges, exposed bolts, and openings that could cause head or limb entrapment.

(2) Shall meet the standards of the CPSC, if applicable. Recalled products listed by the CPSC shall not be accessible to children.

(3) Shall be developmentally and size appropriate, accommodating the maximum number of children involved in an activity at any one time.

(4) The sides of playpens shall remain latched as long as a child is using the playpen. If playpens are used they shall have waterproof, washable, comfortable pads.

(5) Outdoor recreational equipment shall be made of durable, non-rusting, non-poisonous materials, and shall be sturdy.

(6) Stationary outdoor equipment shall be firmly anchored and shall not be placed on a concrete or asphalt surface. Cushioning material such as mats, wood chips or sand shall be used under climbers, slides, swings, and large pieces of equipment.

(7) Swings shall be located to minimize accidents and shall have soft and flexible seats.

(8) Cushioning material shall extend at least six feet beyond the equipment and swings.

(9) Slides shall have secure guards along both sides of the ladder and placed in a shaded area.

(10) Outdoor metal equipment shall be located in shaded areas or otherwise protected from the sun.

(11) Outdoor equipment shall be arranged so that children can be seen at all times.

(12) The height of play equipment shall be developmentally and size appropriate.

(13) Sand in a sand box shall be securely covered when not in use and, if outdoors, constructed to provide for drainage.

(14) Indoor recreational equipment and furnishings shall be cleaned and disinfected when they are soiled or at least once weekly and shall be of safe construction and free of sharp edges and loose or rusty points. Indoor recreational equipment and furnishings shall be clean and shall be of safe construction and free of sharp edges and loose or rusty points.

(15) A properly fitting bicycle helmet that is approved by American National Standards Institute, Snell Memorial Foundation, or American Society for Testing and Materials, shall be worn by each child when riding a bicycle, skateboard, roller blades, or skates. Helmets are optional for use with tricycles.

D. Rest equipment

(1) Cribs shall meet the requirements of the CPSC.

(2) Individual, clean, developmentally appropriate cribs, cots, or mats shall be provided for each infant, toddler and preschool child, and used only by that child until they have been sanitized.

(3) Cribs, cots, and mats shall be made of easily cleanable material.

(4) Placement of sleeping and napping equipment shall allow ready access to each child by staff.

(5) Individual, clean, appropriate coverings shall be provided.

(6) Cots and mats shall be stored so that the surface on which a child lies does not touch the floor.

E. Environmental hazards

(1) Poisons or harmful agents.

(a) Poisons or harmful agents shall be kept locked, stored in the original containers, labeled and inaccessible to children.

(b) Poisons or harmful agents shall be purchased in childproof containers, if available.

(c) Play materials, including arts and crafts, shall be non-poisonous.

(d) Poisonous plants are not permitted.

(e) Pesticides shall be of a type applied by a licensed exterminator in a manner approved by the United States Environmental Protection Agency. Pesticides shall be used in strict compliance with label instructions and should not be used while children are present. Pesticide containers shall be prominently and distinctly marked or labeled for easy identification of contents and stored in a secure site accessible only to authorized staff.
(2) Water hazards.
   
   (a) Swimming pools located at the center or used by the center shall conform to the regulations of DHEC for construction, use, and maintenance.
   
   (b) Swimming pools, stationary wading pools and other water sources such as ditches, streams, ponds, and lakes shall be made inaccessible to children by a secure fence that is at least 4 feet high; exits and entrances shall have self-closing, positive latching gates with locking devices;
   
   (c) Children shall not be permitted in hot tubs, spas, or saunas.
   
   (d) Children shall not be permitted to play in areas where there are swimming pools or other water sources without constant supervision.
   
(3) Firearms, weapons, and ammunition are not permitted in the center or on the premises without the express permission of the authorities in charge of the premises or property. This does not apply to a guard, law enforcement officer, or member of the armed forces, or student of military science.

(4) Animals: The following requirements apply in regard to animals:
   
   (a) Healthy animals which present no apparent threat to the health and safety of the children shall be permitted, provided they are cleaned properly housed, fed and cared for and have had required vaccinations, as appropriate. Live animals shall be excluded from areas where food for human consumption is stored, prepared or served;
   
   (b) Animals shall not be permitted if a child in the room or area is allergic to the specific type of animal;
   
   (c) Animal litter and waste shall not be accessible to children; and
   
   (d) Reptiles and rodents shall not be accessible to children without adult supervision.

114-528. MEAL REQUIREMENTS AND PREPARATION, SERVING, STORAGE AND PROTECTION OF FOOD SUPPLIES, UTENSILS AND EQUIPMENT.

A. Meal requirements

(1) If food is provided by the facility, the following requirements shall be met:
   
   (a) Daily menus shall be dated and posted in a conspicuous location in public view;
   
   (b) Meals and snacks provided shall be in compliance with the USDA Child Care Food Program Guidelines. Centers that do not provide overnight care shall serve at least one meal and at least one snack that meet USDA Child Care Food Program Guidelines. Centers providing care between the hours of 6:00 p.m. and midnight shall additionally meet USDA Child Care Food Program Guidelines in serving dinner and at least one additional snack. Meal components and serving sizes shall be in accordance with these guidelines;
   
   (c) Only Grade A pasteurized fluid milk and fluid milk products may be given to any child less than 24 months old, except with a written permission from the child’s health provider;
   
   (d) Whole milk may not be served to children less than 12 months of age, except with a written permission from the child’s health provider; and
   
   (e) Reconstituted milk shall not be served to any child, regardless of age.

(2) Food served shall be suited to the child’s age and appetite. Second portions shall be available.

(3) Round, firm foods shall not be offered to children younger than four years old. Examples of such foods include: hot dogs, grapes, hard candy, nuts, peanuts, and popcorn. Hot dogs may be served if cut lengthwise and quartered; grapes may be served if cut in halves.

(4) All food in child care centers shall be from a source approved by the health authority and shall be clean, wholesome, unspoiled, free from contamination, properly labeled, and safe for human consumption.

(5) The use of food in hermetically sealed containers that was not prepared in an approved food-processing establishment is prohibited.

(6) The use of home-canned foods is not allowed.

(7) The following requirements shall be met when it is necessary to provide meals through a catering service:
(a) Catered meals shall be obtained from a food service establishment approved by the DHEC; 
(b) If adequate cleaning and sanitizing equipment is not available, only disposable eating and 
   drinking utensils shall be used to serve catered meals or food; and 
(c) The procedures and equipment used to transport catered meals shall be approved by the 
   DHEC.

8 Meals and snacks may be provided by the center or the parent. The center shall have a small 
   supply of nutritional food and beverages available in the event a parent neglects to bring the child’s food 
   on an unanticipated basis.

9 Dietary alternatives shall be available for a child who has special health needs or religious 
   beliefs.

10 Written permission/instructions for dietary modifications signed by the child’s health care 
   provider or parent or legal guardian are required.

B. Food preparation

1 Adequate hand-washing facilities equipped with hot and cold water under pressure, supplied 
   through a mixing faucet, shall be provided in the food preparation area. Hot water shall be between 100 
   and 120 degrees Fahrenheit. (Facilities shall not be required to install an additional hand-washing sink in 
   the food preparation area if, in the opinion of the health authority, the existing hand-washing facilities are 
   adequate.)

2 Sanitary soap and towels shall be provided.

3 Utensils, such as forks, knives, tongs, spoons, and scoops shall be provided and used to 
   minimize handling of food in all food preparation areas.

4 Staff shall thoroughly wash their hands and exposed areas of arms with soap and warm water in 
   an approved hand-washing sink before starting work, during work as often as is necessary to keep them 
   clean, e.g., after smoking, eating, drinking, or using the toilet. Staff shall keep their fingernails clean and 
   trimmed.

5 The outer clothing of all staff shall be clean. The director shall ensure proper hair restraints are 
   worn to protect from falling hair.

6 Staff shall neither use tobacco in any form while preparing or serving food, nor while in areas 
   used for equipment or utensil washing or for food preparation. Staff shall use tobacco only in approved, 
   designated areas.

7 Potentially hazardous foods requiring cooking shall be cooked to heat all parts of the food to an 
   internal temperature of at least 140 degrees Fahrenheit, with the following exceptions:
   (a) Hamburger shall be cooked to at least 155 degrees Fahrenheit;
   (b) Poultry, poultry stuffing, stuffed meats, and stuffing-containing meat shall be cooked to heat 
       all parts of the food to at least 165 degrees Fahrenheit with no interruption of the cooking process;
   (c) Pork and any food containing pork shall be cooked to heat all parts of the food to at least 150 
       degrees Fahrenheit; and
   (d) Rare roast beef and rare beefsteak shall be cooked to surface temperature of at least 130 
       degrees Fahrenheit.

8 Potentially hazardous food such as meats, cooked rice, and cream-filled pastries shall be 
   prepared (preferably from chilled products) with a minimum of manual contact and on surfaces with 
   utensils that are clean and sanitized prior to use.

9 Metal, stem-type, numerically-scaled indicating thermometers, accurate to plus or minus three 
   degrees Fahrenheit, shall be provided and used to ensure that proper internal cooking, holding, or 
   refrigeration temperatures of all potentially hazardous foods are maintained.

10 Potentially hazardous foods shall be thawed as follows:
   (a) In refrigerated units at a temperature not to exceed 45 degrees Fahrenheit;
   (b) Under potable running water from the cold water supply with sufficient water velocity to 
       remove loose food particles;
(c) In a microwave oven only when food will be immediately transferred to conventional cooking equipment as part of a continuous cooking process or when the entire, uninterrupted cooking process takes place in the microwave oven; or
(d) As part of the conventional cooking process.

(11) All raw fruits and vegetables shall be washed thoroughly before being cooked, served, or placed in refrigerators.

C. Food service
(1) No child shall be deprived of a meal or snack if he/she is in attendance at the time the meal or snack is served.
(2) Easily breakable dinnerware shall not be used.
(3) Children shall not be forced to eat.
(4) Food shall not be used as a punishment.
(5) Children shall not be allowed in the kitchen except during supervised activities.
(6) Portions of food once served shall not be served again.
(7) Single-service articles shall be stored in closed cartons or containers to protect them from contamination.
(8) Use of common drinking cups is prohibited.
(9) Disposable cups, if used, shall be handled and stored properly to prevent contamination.
(10) Reuse of single service articles is prohibited.
(11) If potentially hazardous foods that have been cooked and then refrigerated are to be served hot, they shall be reheated rapidly to 165 degrees Fahrenheit or higher throughout before being served or before being placed in a hot food-storage facility. Steam tables, double boilers, warmers, and similar hot food holding facilities are prohibited from use for the rapid reheating of potentially hazardous foods.

D. Storage
(1) All food shall be properly labeled and stored, and shall be protected against contamination.
(2) The director shall provide refrigeration units and insulated facilities, as needed, to ensure that all potentially hazardous foods are maintained at 45 degrees Fahrenheit or below or 130 degrees Fahrenheit or above, except during necessary periods of preparation.
(3) Thermometers shall be accurate to plus or minus 3 degrees and conspicuously placed in the warmest area of all cooling and warming units to ensure proper temperatures.
(4) Containers of food, food preparation equipment and single service articles shall be stored at least 6” above the floor, on clean surfaces, and in such a manner to be protected from splash and other contamination.
(5) Food not subject to further washing or cooking before serving shall be stored in such a manner to be protected against contamination from food requiring washing or cooking.
(6) The storage of food or food equipment, utensils, or single-service articles in toilet rooms and under exposed sewer lines is prohibited.
(7) Custards, cream fillings, or similar products which are prepared by hot or cold processes shall be kept at safe temperatures except during necessary periods of preparation and service.
(8) All cleaning supplies, detergents, and other potentially poisonous items shall be stored away from food items and shall be inaccessible to children.

E. Cleaning, storage, and handling of utensils and equipment
(1) Tableware shall be washed, rinsed, and sanitized after each use.
(2) All kitchenware and food-contact surfaces of equipment shall be washed, rinsed and sanitized.
(3) The cooking surfaces of cooking devices shall be cleaned as often as necessary and shall be free of encrusted grease deposits and other soil.
(4) Non-food contact surfaces of all equipment, including tables, counters, and shelves, shall be
  cleaned at such frequency as is necessary to be free of accumulation of dust, dirt, food particles, and other
debri s.
(5) After sanitation, all equipment and utensils shall be air-dried.
(6) Prior to washing, all equipment and utensils shall be rinsed or scraped, and when necessary,
  presoaked to remove gross food particles and soil.
(7) When manual dishwashing is employed, equipment and utensils shall be thoroughly washed in a
detergent solution that is kept reasonably clean, be rinsed thoroughly of such solution, sanitized by one of
the following methods:
  (a) Complete immersion for at least 30 seconds in a clean solution containing at least 50 parts per
      million of available chlorine as a hypochlorite and at a temperature of at least 75 degrees Fahrenheit;
  (b) Complete immersion for at least 30 seconds in a clean solution containing at least 12.5 parts
      per million of available iodine and having a pH no higher than 5.0 and at a temperature of at least 75
      degrees Fahrenheit;
  (c) Complete immersion for at least 30 seconds in a clean solution containing at least 200 parts
      per million of quaternary ammonium at a temperature of at least 75 degrees Fahrenheit; or
  (d) Complete immersion in hot water at a temperature of 170 degrees Fahrenheit in a three-
      compartment sink.
(8) Other chemical sanitizing agents may be used which have been demonstrated to the satisfaction
  of the health authority to be effective and non-toxic under use conditions, and for which suitable field
tests are available. Such sanitizing agents, in use solution, shall provide the equivalent bactericidal effect
for a solution containing at least 50 parts per million of available chlorine at a temperature not less than
75 degrees Fahrenheit.
(9) A test kit or other device that accurately measures the parts per million concentration of the
    solution shall be available and used.
(10) All dishwashing machines shall be approved by DHEC and shall meet applicable installation
    requirements.
(11) Food-contact surfaces of cleaned and sanitized equipment and utensils shall be handled in such
    a manner as to be protected from contamination.
(12) Cleaned and sanitized utensils shall be stored above the floor in a clean, dry location so that
    food-contact surfaces are protected from contamination.
(13) Clean spoons, knives, and forks shall be picked up and touched only by their handles. Clean
    cups, glasses, and bowls shall be handled so that fingers and thumbs do not contact inside surfaces or lip-
    contact surfaces.
(14) Dish tables or drain boards of adequate size to properly handle soiled utensils prior to washing
    and for cleaned utensils following rinsing and sanitizing shall be provided.

114-529. INFANT AND TODDLER CARE, CARE FOR MILDLY ILL CHILDREN, AND NIGHT
CARE.

A. Infant and toddler care
   (1) Feeding, eating and drinking.
      (a) Cups and bottles shall be labeled with the child’s name and used only by that child.
      (b) Infants shall be fed in accordance with the time schedule, specific food and beverage items
          and quantities as specified by the parent.
      (c) Infants shall be held while being bottle fed until they are able to hold their own bottles.
          Bottles shall not be propped or given in cribs or on mats.
      (d) Due to nutritional concerns, the microwaving of breast milk is prohibited. The microwaving
          of formula and other beverages is strongly discouraged due to the possibility of a burn injury to the child.
          However, if the facility plans to use this method of heating formula and other beverages, they must notify
          all parents in writing as part of the enrollment or orientation process.
(e) All warmed bottles shall be shaken well and the temperature tested before feeding to a child.

(f) Baby formula, juice, and food served in a bottle shall be prepared, ready to feed, identified, and packaged for single use for the appropriate user. Any excess formula, juice or food shall be discarded after each feeding. Formula, juice and food requiring refrigeration shall be maintained at 45 degrees Fahrenheit or below.

(g) Infants and toddlers shall not sleep with bottles in their mouths.

(h) Toddlers shall be offered water routinely throughout the day.

(i) Breast milk and formula shall be dated and labeled with the child’s name and refrigerated until ready to use. Prepared formula and breast milk that is not frozen should not be saved for another day.

(j) Food for infants shall be cut in pieces one-quarter inch or less.

(k) Food for toddlers shall be cut in pieces one-half inch or less.

(2) Feeding chairs.

(a) Feeding chairs shall have a stable base.

(b) Feeding chairs shall have a safety strap that prevents the child from slipping or climbing out of the chair. The safety strap shall be used at all times the child is in the chair.

(c) Feeding chair trays shall be in good repair and made of an easily cleanable surface and shall not have chips or cracks.

(d) Feeding chairs shall be used only for eating or a specific, short time-limited tabletop play activity.

(e) Seat heights of feeding chairs shall be appropriate to the age and development of the child. Feeding chairs shall be in good repair and children shall be constantly supervised.

(3) Sleeping.

(a) Infants shall be placed on their backs to sleep unless the parent provides a note from a physician specifying otherwise.

(b) Crib mobiles shall not be permitted for infants or toddlers who can sit.

(c) Cribs shall not be placed next to each other so that one child may reach into the other child’s crib.

(d) Two years from the effective date of these regulations, stacked cribs will no longer be permitted.

(4) Equipment and materials.

(a) The infant and toddler room shall have chairs for staff persons to sit while holding and feeding children; and

(b) Indoor space shall be protected from general walkways where crawling children may be on the floor.

(c) Mobile walkers are not permitted.

B. Care for mildly ill children

(1) Parent notification and instructions.

(a) If a child becomes ill while in care, the center shall notify the parent or responsible party immediately;

(b) If a child may have been exposed to a serious communicable disease that is spread through casual contact, the center shall notify the parents of all potentially exposed children about the nature of the illness and the potential exposure to the illness, and recommend consultation with the child’s physician; and

(c) If a center chooses to provide care to a mildly ill child, the center shall receive instructions from the parent for any special care needs of the child.

(2) Policies and procedures.

(a) If a center chooses to provide care to a mildly ill child, the center shall have written policies and procedures specifying inclusion and exclusion from the group, communication with parents, recording of illness and care provided, specific types of illnesses and symptoms which prohibit care from being provided, special staff training required and emergency health procedures.
(b) Children shall be excluded when they exhibit the conditions listed in the DHEC Exclusion Policy.
(c) If a child is in a rest area due to illness, the child shall be directly supervised at all times.
(d) A hand-washing sink shall be in close proximity to the area designated for mildly ill children.

C. Night care
1. Requirements for staffing ratios.
   (a) Staff counted in the staffing ratios shall be awake, alert and attentive to the children at all times; and
   (b) The supervision and ratio requirements for sleeping hours are the same as specified for napping in 114-524C.
2. An unannounced emergency drill shall be held during sleeping hours at least every 60 days.
3. Sleeping equipment.
   (a) Each child shall have a bed with a solid foundation, a fire retardant mattress, a pillow, and bedding appropriate for the temperature of the center.
   (b) Cots and portable beds are not permitted.
4. Special bedtime routines as specified by the parent shall be followed to the extent feasible.
5. Bathing.
   (a) If children bathe at the center, there shall be one bathtub or shower with a slip resistant surface for every ten children.
   (b) Each child shall have his or her own clean towel and washcloth.
6. The center shall make arrangements with the parent to provide clean appropriate nightclothes.

Fiscal Impact Statement:
The Department of Social Services estimates the costs incurred by the State and its political subdivisions in complying with the proposed regulation will be minimal. The cost to child care providers to comply with the proposed regulations is not able to be determined because that type of data is not currently kept at the agency. Although providers will incur some costs, it is hoped that those costs can be minimized and grants to assist providers in meeting the new requirements may be available.

Statement of Rationale:
The purpose of these regulations is to establish standards that protect the health, safety and well being of children receiving care in child care facilities, through the formulation, application and enforcement of these regulations. Child care licensing standards provide the foundation for ensuring safety and quality for children. In addition to ratio revisions, these proposed regulations improve readability and strengthen and clarify basic health and safety standards.

The improved readability and clarified basic health and safety standards will enable parents to be better-informed consumers of child care. Staff:child ratios and well-trained consistent caregivers are critical factors in child care. States with higher quality standards in their regulations report better outcomes for children. High staff:child ratios improve quality for all children, but are most important for infants and toddlers.

The proposed regulations set new staff:child ratios.
When programs lower the number of children each adult cares for:
   • Providers have more time for each child;
   • Children can be more closely supervised, reducing danger to health and safety; and
   • Children can be cared for and nurtured in a manner more similar to a homelike environment.
Positive outcomes for children will include:
   • Increased interaction among adults and children;
• Enhanced language, social, and intellectual development;
• Less aggression and more cooperation among children;
• More likely to be better prepared to learn and more successful in school;
• Growing into productive citizens;
• Improving their academic performance;
• Increasing earning ability; and
• Decreasing potential for criminal activity.

The agency will implement the regulations with existing staff and resources, which have been maximized as a result of the transfer of the CCDF-financed ABC Child Care Program to DSS. Quality early childhood experiences have an economic and social benefit to the State:
• SC employers have reported that employees who have safe, dependable, high quality environments for their children while they work, demonstrate increased productivity and decreased absenteeism.
• Children in high quality child care are more likely to be ready to learn and successful in school and grow into contributing members of society rather than members of the welfare or corrections systems.

The positive implications of quality early childhood education and child care for juvenile justice, schools, and the work force are emphasized by the National Conference of State Legislatures (NCSL) in Early Childhood Care and Education: An Investment That Works (1997).

Lawrence J. Schweinhart of the High/Scope Perry Educational Research Foundation states: “...a high-quality program for young children living in poverty, over their lifetimes, improves their educational performance, contributes to their economic development, helps prevent them from committing crimes, and provides a high return on taxpayer investment.”

Changes in ratios are minimal and implementation will be over a 4-year period. Changes in ratios only result in decreasing the number of infants and 2-3 year olds per caregiver by one child 2 years after the regulations become effective. At the end of 4 years, infants and 1-2 year old ratios are unchanged, 2-3 year olds will have decreased by 3 children per caregiver, and 3-12 year olds decrease by 2 children per caregiver.

Experiences reported from other states have shown that higher staff:child ratios have not adversely affected the market.
• When Arizona changed ratios from 1:8 to 1:5 for infants and from 1:40 to 1:15 for 4 year olds, the number of centers increased from 777 to 1,081.
• Ohio experienced an increase of 35-50% in the number of slots when infant ratios changed from 1:8 to 1:5.

In Florida reduced ratios...“Did not have a marked negative impact on the child care marketplace nor did ... [they] significantly affect consumer costs.”
Although providers may incur some costs, it is hoped that those costs can be minimized and that grants to assist providers in meeting the new requirements may continue to be available.
SC and GA currently allow more children per staff member for children 0-18 months than any of the other Southeastern states. SC’s proposed ratios will result in the following comparisons to other Southeastern states:
• For children 0-12 months old, SC will equal KY, MS, and NC but will still lag behind TN, AL, and FL
• For children ages 2–3 years old, SC will move to comparable ratios with TN and AL, leaders in the region.
• For 3-year-old children, SC will be behind TN and AL but ahead of KY, MS, GA, NC, and FL.
• For 4-year-old children, SC will be comparable to AL and MS.
• For 5-year-old children, SC will lag behind KY, TN, and AL but will be slightly better than GA and MS and ahead of NC and FL.
• No changes are proposed for SC ratios for children 6 years and up. SC ratios lag behind KY but are better than GA, NC, and FL for 6 year olds.
### Ratios in Neighboring States

<table>
<thead>
<tr>
<th>Ages</th>
<th>South Carolina</th>
<th>Georgia</th>
<th>North Carolina</th>
<th>Tennessee</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Current</td>
<td>Proposed*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 weeks</td>
<td>1:6</td>
<td>1:5</td>
<td>1:6</td>
<td>1:4</td>
</tr>
<tr>
<td>9 months</td>
<td>1:6</td>
<td>1:5</td>
<td>1:6</td>
<td>1:4</td>
</tr>
<tr>
<td>18 months</td>
<td>1:6</td>
<td>1:6</td>
<td>1:8</td>
<td>1:6</td>
</tr>
<tr>
<td>27 months</td>
<td>1:10</td>
<td>1:7</td>
<td>1:10</td>
<td>1:7</td>
</tr>
<tr>
<td>3 years</td>
<td>1:13</td>
<td>1:11</td>
<td>1:15</td>
<td>1:9</td>
</tr>
<tr>
<td>4 years</td>
<td>1:18</td>
<td>1:16</td>
<td>1:18</td>
<td>1:20</td>
</tr>
<tr>
<td>5 years</td>
<td>1:21</td>
<td>1:19</td>
<td>1:20</td>
<td>1:20</td>
</tr>
</tbody>
</table>

*These proposed ratios would become effective in 2008.

---

**Bibliography**

- Highlights of South Carolina Child Care Survey. (2002, December 2). Human Services Policy Center (HSPC), University of Washington.
- *Who Cares? Recommendations for Improving Child Care in South Carolina*. Healthy Child Care SC and SC Child Care Action Committees To Improve the Quality, Affordability, and Availability of Child Care in Our State.
- Florida Child Care Quality Improvement Study Findings, Galinsky, Ellen; O'Donnell, Nina Sazer; Beyea, Brigit; Boose, John; 1998.

---

**Additional selected research**