



 **DSS** SOUTH CAROLINA
DEPARTMENT *of* SOCIAL SERVICES

Policy Manual:
Family Friend and Neighbor
December 12, 2022



CHILD CARE
LICENSING

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Chapter 1 About SC Voucher and the Monitoring of Family Friend and Neighbor (FFN) Providers

South Carolina is committed to an early care and education system that focuses on building high quality, comprehensive programs that provide integrated services. This commitment reflects a vision that every child in South Carolina will have equal opportunity for success in school based on equitable access to a high-quality early care and education system.

SC Voucher is responsible for approving families who qualify to receive vouchers and is the payment system for all providers. They are also responsible for enrolling Family, Friend and Neighbor Care providers into SC Voucher.

SC Licensing is responsible for the annual monitoring of Family, Friend, and Neighbor Care (FFN) providers. Monitoring reports will be posted on the SC Child Care website to support transparency related to the providers ability to meet and maintain compliance with SC's FFN Policies and SC's minimum health and safety policies related to Family Friend and Neighbor (FFN) Care.

Chapter 2 Family, Friend, and Neighbor (FFN) Provider

The Office of Child Care which is our governing body allows parents to choose the care that is best for their child. One of the options available is called License-Exempt family provider which is care provided by a family member, a friend or a neighbor and is not provided in the child's home, but rather the home of the family member, friend, or neighbor. This is referred to by SC Voucher as Family, Friend and Neighbor Out of Home Care (FFN).

Definition:

The FFN provider is not registered or licensed by SC Child Care Licensing and does not operate any other childcare services in their home.

FFN providers are enrolled only to serve the client that has requested they care for their child(ren). They are not authorized to care for other eligible families.

Chapter 3 Navigating the Process

Apply to Participate

- Contact SC Voucher at 1-800-262-4416 to obtain the application
- Submit your application to SC Voucher
- Make sure the application and forms are complete and correct, and send them to:
SC Voucher Program Control Center
SC Voucher Program
P. O. Box 100160
Columbia, SC 29202-3160
- Send the following with your application:
 - Legible copy of your Social Security Card

- Legible copy of your SC Driver’s License or SC picture identification card

Pre-enrollment Eligibility Criteria Part 1

Once your application is received, SC Voucher will contact you and guide you in completing the eligibility criteria outlined in Chapter 4, Part 1 (4.1.1 through 4.1.5) of this manual. Once this has been done, then authorization will be given for you to begin serving the client.

Post-enrollment Eligibility Criteria Part 2 With On-site Visit

For new FFN providers, a Licensing Specialist will contact you by phone within 90 days of your enrollment to schedule the on-site visit. During this visit, the Specialist will:

- Conduct the Health & Safety Inspection outlined in Chapter 5

Chapter 4 Eligibility Criteria to Participate

Family, Friend and Neighbor (FFN) Providers must meet and maintain the following eligibility criteria to remain enrolled to serve the client.

4.1 Part 1 - Pre-Enrollment Eligibility Criteria

4.1.1 Verification of Minimum Age Qualifications

SC Voucher will verify that any person(s) caring for children must be at least 21 years of age to include an emergency person. Verification will be through a copy of a valid ID, eg Driver’s License

4.1.2 Comprehensive Background Checks

This must be completed through SCDSS for a for anyone responsible for the care or supervision of children to include an emergency person and household members. SC Voucher will provide instructions.

For anyone age 15 and older:

- SLED/FBI fingerprint checks

For anyone age 18 and older:

- State Abuse and Neglect checks
- Out-of-State Abuse and Neglect checks (if applicable)
- State and National Sex Offender Checks

These checks must be completed and have a satisfactory determination prior to providing care for children.

4.1.3 Health Assessment

Health Assessments must be completed for all persons caring for staff to include an emergency person (see Appendix – Staff Medical Statement DSS #2901)

4.1.4 Discipline Policy Statement

A written discipline policy prohibiting corporal punishment must be signed for any person responsible for the care or supervision of children to include an emergency person (see appendix). The policy must include the understanding that the FFN provider cannot use corporal punishment on their own child during the time they care caring for the SC Voucher client. This is signed at enrollment and annually thereafter.

4.2 Part 2 – 90 Days Post Enrollment Eligibility Criteria

These requirements must be completed within 90 days after enrollment and will be checked by the Licensing Specialist upon the announced visit:

4.2.1 SC Family, Friend and Neighbor Health and Safety Pre-Service Certificate – 15 hours

This must be completed for any person responsible for the care or supervision of children to include an emergency person. This Certificate is provided at no cost and consists of 15hrs of on-line courses. Course content includes:

- Infectious Disease Control, Immunizations and Bloodborne Pathogens: Kick Those Germs to the Curb
- SIDS and the use of safe sleep practices
- Administration of medication
- Prevention of and response to different types of allergies
- Building and physical premises safety
- Prevention of shaken baby syndrome & abusive head trauma
- Emergency preparedness & response planning
- Storage and Disposal of hazardous materials & bio-contaminants
- Precautions in transporting children
- First-aid and CPR
- Nutrition
- Child Development Domains of Learning
- Recognizing and Reporting Child abuse and Neglect

4.2.2 Pediatric First Aid

This must be completed for any person responsible for the care or supervision of children to include an emergency person.

4.2.3 Infant/Child CPR

This must be completed for any person responsible for the care or supervision of children to include an emergency person.

Note: both the CPR/FA course is provided at no cost through the National Safety Council. The CPR/FA course must be in person and cannot be on-line.

4.2.4 Health & Safety Inspection

The FFN provider is required to have an annual Health & Safety Inspection. Inspection reports will be posted on our website at www.schildcare.org. Chapter 5 of this manual outlines the areas and items that will be verified during the on-site inspection.

Written Mandatory Policies and Procedures and Staff Training on Each Topic

The FFN provider is required to have the following written policies and procedures and to complete the mandated training aligned to each. The provider must follow these procedures as written. These will be checked at each visit:

4.2.5 Medication Policy

The policy must address:

- ✓ The administration of any prescriptions or over the counter medication to children.
- ✓ Written parental consent to administer the medication with the name of the medication and dosage and times to be administered.
- ✓ Documentation of when medicine is given, including date, time and name of medicine.
- ✓ Staff must wash hands before giving medication and after applying a medical ointment or cream in which a break in the skin (e.g. sores, cuts, or scrapes) may be encountered.

4.2.6 Emergency Medical Policy

The policy must address the following:

- ✓ Medical conditions under which emergency care and treatment is warranted (i.e. allergies, injury).
- ✓ Procedure to prevent emergencies due to allergic reactions, e.g. how will the program collect information of any child's allergies, and how this information be conveyed to staff along with information of what an allergic reaction might look like.
- ✓ Steps to be followed if child has allergic reaction. Detailed information to include what medications should be administered per the parent, e.g. Epi Pen, Benadryl.
- ✓ Notification to parents who might bring snacks or treats to the class of any particular foods to be avoided.
- ✓ Steps to be followed in a medical emergency.
- ✓ The hospital or source of health care to be utilized.
- ✓ The method of transportation to be used.
- ✓ An emergency staffing plan.

4.2.7 Emergency Preparedness Policy

a. The policy must address the following:

What steps the program will take in the event the following occurs as a result of emergencies such as fire, a natural disaster or other threatening situations that may pose a health or safety hazard:

- Evacuation
- Temporary closure
- Relocation
- Shelter in place
- Lock-down

The policy will also address:

- Communication and reunification of children with families if you have to evacuate while children are in case
- Continuity of operations
- Accommodations of children with disabilities, and children with chronic medical conditions.
- The procedure to contact SC Licensing if the provider must evacuate or needs to relocate during an emergency (when safe to do so)

b. The policy must address emergency preparedness training/drills for staff, volunteers, and children.

- It must include the types of drills: fire, tornado, nuclear and active shooter).
- It must include frequency of practice drills. For programs that operate year round, practice drills will be conducted quarterly for each type of emergency.

c. The provider must document occurrence of each practice drill to include date, time, type of drill. These must be kept on site until reviewed each year.

4.2.8 Parental Access Policy

The policy must address giving parents unlimited access to their children during the times care is provided.

4.2.9 Child Abuse and Neglect Policy

The Department of Social Services is authorized to receive and investigate reports of abuse and neglect of children who reside in or receive care or supervision in residential institutions, foster homes, and childcare facilities. Responsibility for investigating these entities must be assigned to a unit or units not responsible for selecting or licensing these entities. To investigate allegations of abuse and neglect, the Out of Home Abuse and Neglect Office (OHAN) at the SC Department of Social Services shall visit to determine if the abuse or neglect complaint is true. The operator shall:

Cooperate with the Department staff during an investigation of child abuse or neglect. Cooperation shall include the following:

- Participate in informal conferences with OHAN staff
- Release records as appropriate, of children and staff upon request; and
- Allow access to the FCCH or FFN premises for inspection and investigation of the child abuse allegation by OHAN and other officials as permitted by statute.

FFN Providers must have a policy that identifies:

- ✓ The procedure for reporting suspected child abuse or neglect to DSS' Office of Child Protective and Preventative Services, The Office of Out of Home Abuse and Neglect (OHAN).
- ✓ What to do when the FFN provider or emergency person suspect abuse/neglect at the child's home or in the FFN Provider home.
- ✓ Information on types of abuse or neglect that staff may look for, e.g.
- ✓ Suspected child abuse or neglect must be reported to:
 1. **DSS' Office of Child Protective and Preventive Services with The Office of Out of Home Abuse and Neglect (OHAN).**

DSS has implemented a centralized number for all counties to report suspected cases, as well as this can be done online at the following link: Both can be reported 365 days per year, 24 hours a day/7 days a week at 1-888-227-3487 or <https://dss.sc.gov/abuseneglect/report-child-abuse-and-neglect/>
 2. **DSS/Licensing** at 1-800-556-7445
- ✓ The Mandated Reporter Law Section 63-7-310. Can be found here: (<https://www.scstatehouse.gov/code/t63c007.php>)
- ✓ Statement regarding the provider's cooperation in allowing DSS staff to conduct any on-site investigation and/or obtain necessary documentation such as the release of staff and children's records as appropriate and upon request.

4.2.10 Transportation Policy (if applicable)

a. If the provider will provide transportation, the policy must address:

- ✓ Written consent from parents prior to transportation.
- ✓ A plan (if applicable) if the child(ren) are to be picked up and dropped off from home. The plan should include times, who will be there with the child(ren) when picked up and who can receive the child(ren) at drop-off. Include the procedure as to what will happen if no one is there to receive the child or the person there is not recognized by the provider.

4.2.11 Prevention and Control of Infectious Diseases Policy

Care provided outside the child's home may expose a child to an increased risk of acquiring infectious diseases for several reasons. Many types of infectious germs may

be contained in human waste (urine, feces) and body fluids (saliva, nasal discharge, tissue and injury discharges, eye discharges, blood, and vomit). “CCDF Health and safety Requirements Brief # 1 – Prevention and Control of Infectious Diseases¹⁶” https://childcareta.acf.hhs.gov/sites/default/files/public/infectious_disease_health_safety_brief.pdf

The provider must address how they will help to ensure that infectious diseases are prevented or minimized while children are in care. The policy should address:

- a. Required Immunizations and or proof of exemption
- b. Health observation of children daily.
- c. Separation of children who show symptoms of a communicable disease or infestation, e.g. pinkeye, Lice, mumps, etc. Include where child will be kept until parents arrive/ how ratios met/contact of parents.
- d. Exclusion or dismissal of children when ill, i.e. flu (what types of illness should preclude the parents from bringing the child to the provider, e.g. fever, flu, pinkeye, strep, etc.).
- e. Hand washing by children to prevent the spread of germs, e.g. after using the restroom and before eating meals/snacks; handling animals.
- f. Hand washing by provider and any emergency person: prior to preparing food; after contact with children while preparing food; after handling bodily fluids or after applying medication/ointments to where there is a break in the skin; handling animals; after cleaning or handling the garbage.
- g. A procedure to notify parents when children have been exposed to an infectious disease.
- h. Cleaning/Disinfecting Schedule of the home/areas where children are served.
- i. Staff health to include the health assessment.

4.2.12 Handling, Storage, and Disposal of Hazardous Materials and Biological Contaminants Policy

The policy must address:

- a. Toxic substances must be stored out of the reach of children in a locked cabinet. Toxic substances or hazardous materials include but not limited to: chemicals, cleaning products, insecticides, gasoline products, etc.
- b. Toxic substances must not be used while children are present.
- c. Flammable materials should be stored in a separate building or area away from high temperatures and ignition sources, inaccessible to children.
- d. Toxic substances/hazards must be stored away from food and medication.
- e. Poisonous plants must not be allowed in the home.
- f. Chemicals used to control odors must not be allowed, e.g. moth balls, air fresheners, essential oils, toilet/urinal deodorizer blocks.
- g. Procedures when the provider or an emergency person come in contact with bodily fluids resulting from a child injury or illness, or when changing diapers. Include disposal of material that comes into contact with bodily fluids.
- h. The disposal of soiled diapers.

4.2.13 Prevention of Sudden Infant Death Syndrome and Use of Safe Sleeping Practices Policy

The Policy must address:

- ✓ Infants will not sleep/nap in car seats, pack n plays, swings, bouncers, bean bag chairs, etc. If the infant falls asleep in a swing or the parent brings the child car seat and they are asleep, they will be removed and placed in a crib.

- ✓ Infants must be provided an age-appropriate crib that is approved by the US Consumer Product Safety Commission.
- ✓ Infants must not be placed to sleep with pacifiers, bottles or bibs around their neck.
- ✓ Infants up to 12 months of age must be placed on their back to sleep, unless an infant's primary health care provider has completed a signed waiver indicating the child requires an alternate sleep position.
- ✓ Soft or loose bedding must be kept away from sleeping infants. This includes loose fitting sheets, bumper pads, pillows, heavy blankets, and stuffed animals, etc.

4.2.14 Prevention of Shaken Baby Syndrome, Abuse Head Trauma and Child Maltreatment

The policy must address

- ✓ Strategies to use when a child in care is fussy, cries constantly or is distraught.
- ✓ Symptoms that may be exhibited by a child that has been a victim of shaken baby syndrome/abusive head trauma, e.g. irritability, trouble staying awake, trouble breathing, vomiting, poor sucking or swallowing, inability to lift head, inability for eyes to focus or track, etc.

4.2.15 Physical Safety of the Home and Premises

The policy must address ways to ensure that the indoor and outdoor environments remain free of hazards that could be harmful to children. Including the following items:

Indoor:

- Home is free from hazards and litter.
- Healthy animals which present no apparent threat to the health and safety of children shall be permitted, provided they are clean, properly housed, fed and cared for, and have the required current vaccinations, as appropriate.
- Smoking, consumption of alcoholic beverages, or use of other non-prescription narcotic or illegal substances are prohibited on the premises (indoor or outdoor) or while transporting children during the time children are in care.
- How the following are kept locked or out of children's reach: medications, cleaning supplies/hazardous materials, caregiver's purse, objects (knives/scissors), illegal drugs, weapons, miscellaneous that could harm children (e.g. hot glue gun, iron)

Outdoor:

Provides for the safety of the building and physical premises, including the identification of and protection from hazards that can cause bodily injury, such as electrical hazards, vehicular traffic, and bodies of water.

4.2.16 Immunization regarding grace periods, exemptions, and children experiencing homelessness.

- According to SC DHEC Regulation 61-8, medical and religious exemptions are the only available immunization exemptions in South Carolina. These two exemptions allow a child to attend child care in South Carolina without being vaccinated, however, if there is an outbreak of a vaccine preventable disease in your child's child care facility, and your child has not been vaccinated against that disease, your child may have to be excluded from child care for their protection.
- According to SC DHEC regulation, policies, and procedures allows for a child to attend the first 30 days without an immunization certificate and may attend for 30 days after the expiration date on an immunization certificate.
- Some enrolled children may meet the federal definition of homeless, if this has been determined, then the center may be given a grace period of 90 days for the parent to submit the child's SC Certificate of Immunization and other paperwork. The McKinney-Vento Act states that children and youth who lack "a fixed, regular, and adequate nighttime residence" will be considered children experiencing homelessness. The lack of a fixed nighttime residence includes loss of housing, economic hardship, living in motels, hotels, trailer parks, doubled-up, or camping grounds due to the lack of alternative accommodations or are living in emergency or transitional shelters. Furthermore, living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations or similar settings.

Chapter 5 Health & Safety Inspection

CCDBG Act of 2014 has new regulations regarding health and safety standards. SC Licensing is required to conduct an annual inspection of all facilities utilizing SC Vouchers. The checklist that follows outlines the areas and items that will be verified during the on-site inspection. These inspections will be conducted prior to enrollment and then at the annual unannounced visit.

Health and Safety Inspection Checklist – Self Assessment and Monitoring

INTRODUCTION

The FFN provider is not registered or licensed by SC Child Care Licensing and does not operate any other childcare services in their home. FFN providers are enrolled only to serve the client that has requested they care for their child(ren). FFN providers are not authorized to care for other eligible families.

PROVIDER INFORMATION	
Provider Name: _____	
Address: _____	
Checklist Completed By: _____	Date: _____

PLEASE CHECK ALL THAT APPLY

Supervision and Access

- 1. Provider does not exceed a group size of six with only 1 unrelated child.
- 2. Provider cares for the children of one family.
- 2. Supervision is always maintained including during naps, changing diapers, toileting, bathing, changing clothes and when isolated due to a communicable disease.
- 3. Parents, legal guardians and/or custodians have access to their child(ren) in care.

Transportation

- 1. Provider never transports children in care in any vehicle. (If transports, check following)
- 2. Vehicle(s) has current and documented insurance and current vehicle inspection.
- 3. Seat belts and/or proper child safety restraints are used, and vehicle capacity is appropriate when transporting children.
- 4. The driver of the vehicle transporting children has a valid SC driver's license and current first aid and CPR Certification.
- 5. Procedures are in place to account for all children being transported in the vehicle.
- 6. Communication devices and contact information for all children are always kept in the vehicle.
- 7. Emergency care plans, supplies and/or required medication are available for children being transported.
- 8. Written consent from parents prior to transportation.
- 9. A plan (if applicable) if child(ren) are to be picked up and dropped off from home.

Child Discipline/Discipline Policy

- 1. Provider does not use discipline that is severe, humiliating or frightening to children or associated with food, rest and/or toileting.
- 2. Provider does not use corporal or physical punishment.
- 3. Children are not denied opportunities for physical activity as a form of punishment.
- 4. Adherence to the child abuse and neglect policy.
- 5. Provider has a written discipline policy prohibiting corporal punishment that is signed by a person responsible for the care or supervision of children. Policy includes the understanding that the FFN provider cannot use corporal punishment on their own child during the time they care caring for SC Voucher clients.

Physical Environment

- 1. Home is in good repair, clean, free from vermin infestation, and health and safety hazards.
- 2. Toys, equipment and furnishings are clean, safe, sanitary and in good repair.

- 3. All potentially harmful items including cleaning supplies, flammable products, poisonous, toxic, hazardous and materials are labeled and stored in locked area out of children's reach. Bio-contaminants are disposed of properly.
- 4. Narcotics, alcohol or other impairing drugs are stored out of children's reach.
- 5. There are no firearms in the home.
- 6. If there are firearms in home; they are locked and stored in a location that is not accessible to children.
- 7. Home and outdoor play area are smoke-free environments when children are in care.
- 8. The inside temperature of home is kept comfortable (between 65 to 82°F).
- 9. At least one working telephone is available during hours of operation.
- 10. There is a minimum of 35 square feet of usable indoor floor space for each child.
- 11. Poisonous plants are not found in the home.
- 12. Chemicals to control odors are not utilized.
- 13. Universal precaution are followed.
- 14. The building is free from hazards that can cause bodily injury, such as electrical hazards.

Outdoor Play Areas and Equipment

- 1. Home does not have access to an outdoor play area.
- 2. Outdoor play area provides shade and is clean and free of litter, nails, glass and other hazards.
- 3. The outdoor play area has a fence that is four feet high or higher.
- 4. Outdoor play equipment is safe and in good repair.
- 5. Home has a swimming pool that is deeper than one foot and has a fence/barrier that is a minimum of four feet in height on all four sides or has an operable pool alarm.
- 6. There is an appropriate amount of usable, safe and sanitary outdoor play area.
- 7. The building and physical premises is free from hazards that can cause bodily injury, such as electrical hazards, vehicular traffic, and bodies of water.

Bedding and Nap/Sleep

- 1. Safe and sanitary bedding that includes individual beds, cots, cribs, mattresses, or floor mats are provided for each child and positioned at least 18 inches apart.
- 2. Floor mats are at least one-inch thick and covered with an impermeable surface.
- 3. Children up to 1 year of age are in their own crib or port-a-crib.
- 4. Young infants who are not capable of rolling over on their own are positioned on their back on a firm surface when napping and sleeping.
- 5. If cribs are used, bar spacing does not exceed 2 3/8 inches and all cribs meet Title 16, Parts 1219 and 1220 Code of Federal Regulations (CFR) (anti-loosening devices on crib hardware, durable mattress supports, no traditional drop-side cribs and others).

Proper Handwashing

- 1. Everyone in the house is required to wash their hands with soap and running water, drying thoroughly, immediately following personal hygiene procedures for themselves, or when assisting others (including diapering), after outdoor play, and before preparing food or administering medication.

Toileting and Bathing Facilities

- 1. Toilets and sinks are accessible, in good working condition, clean and sanitized.
- 2. Platforms and stools have surfaces that can be easily cleaned and sanitized.
- 3. Running water, toilet paper, soap, trash cans, and individual or disposable towels are available and, within reach of children.
- 4. Potty chairs are cleaned and sanitized after each use.
- 5. At least one bathing facility is available.

Diaper Area and Diapering Procedures

- 1. Diaper-changing area has impermeable surface and is cleaned with sanitizing solution or disinfected after each use.
- 2. There is an ample supply of clean diapers, clothing, and linens at all times, which are changed or removed promptly when soiled or wet.
- 3. The diaper-changing area is physically separated from food preparation, food service and feeding area(s).
- 4. Diapers, disposable, or cloth, are placed in separate, covered, lined containers not accessible to children.
- 5. Containers holding soiled diapers are emptied and sanitized when containers are full and at least once daily.

Fire Drills and Emergency Preparedness

- 1. Exit areas are clear in accordance with fire-safety regulations.
- 2. Working fire extinguisher is in home. Extinguisher expiration date is checked and is not expired.
- 3. Working smoke detectors are in home.
- 4. A fully equipped first aid kit, is available in the home at all times and in vehicles used for transporting children.
- 5. Emergency phone numbers are posted near all phones and include ambulance, fire, police, poison control center and the SC Abuse Hotline numbers, and the address and directions to the home.
- 6. Monthly fire drills are conducted, and emergency evacuation plans are posted.
- 7. Emergency contact information for all children in care.
- 8. Adherence to required emergency medical policy
- 9. Adherence to Emergency Preparedness Policy that includes: Fire, earthquake and nuclear drills, Evacuation of children, Relocation of children, Shelter in place, Lock down, Continuity of operations, Reunification with families, Accommodations of infants and toddlers, children with disabilities and/or chronic medical conditions, Staff and volunteer training and practice drills, Communication with families, Continuity of operations.

Background Screening, Certifications and Training

- 1. A child abuse and neglect screening is conducted for all household members.
- 2. Background screening is conducted for the operator and household members or persons over 18 years of age residing in the home.
- 3. Provider has current and valid first aid and infant and child cardiopulmonary resuscitation (CPR) certifications.
- 4. Provider has completed the required 15-hour Health and Safety Training and 10 hours of annual ongoing training requirements

	Date:
	Date:
	Date:
	Date:

- 5. Provider has policies and procedures in place related to their adherence to each of the topics covered in the 15 hours health and safety training. Adherence will be monitored annually.

Infectious Disease Control

- 1. Any member of the household or any child suspected of having a communicable disease is placed in an isolation area. Any child placed in an isolation area is closely observed.
- 2. The isolation area is adequately ventilated, heated and equipped with a bed, mat or cot and materials that can be cleaned and sanitized or disinfected easily; linens are changed after each use.
- 3. The local county health department is notified immediately of any suspected outbreak of communicable disease and the health department's directions are followed.
- 4. Health observation of children daily.
- 5. Exclusion or dismissal of children when ill.

- 6. A procedure to notify parents when children have been exposed to an infectious disease.
- 7. Cleaning/Disinfecting Schedule of the home/areas where children are served.
- 8. Staff health to include the health assessment.
- 9. Proof of child immunizations or exemption.

Medication

- 1. Prescription and non-prescription medication are stored in an area inaccessible to children, in the original container, appropriately labeled, dispensed according to directions on the label and documented.
- 2. Information about a child’s known allergies is documented and kept current; household members are made aware of children with allergies.
- 3. Medication is not administered.
- 4. If medication is administered, instructions for administration is provided by parent or legal guardian and the medication is not expired.

Animals

- 1. There are no animals on the premises.
- 2. If animals are on the premises, they are properly immunized, free from disease and clean.

Food and Nutrition

- 1. Safe drinking water is always available to children, including during outdoor play.
- 2. Meals and snacks are provided by the provider and meet daily nutritional needs of children according to the USDA MyPlate. Copies of the USDA My Plate can be found at the website <http://www.choosemyplate.gov>.
- 3. Special food restrictions, including food allergies, are documented, and kept current; household members are made aware of children with food restrictions and/or allergies.
- 4. Children are either fed individually or supervised at meals/snacks and are offered age-appropriate food.
- 5. All breast milk and infant formula remaining in bottles after feeding are discarded within one hour.
- 6. The temperature of heated foods and bottles is tested before giving to children to prevent injury.

Record Keeping

- 1. Emergency contact information, immunization records and required health examination records are obtained and kept current for all children.
- 2. Daily attendance of children is recorded and maintained, documenting when each child enters and departs each day.
- 3. Parents and or legal guardians are notified of an accident or incident on the day it occurs.

Plan of Activities

- 1. Planned activities are age-appropriate and include physical activity.

Notes / Technical Assistance Provided

Signature of Licensing Representative: _____ Date: _____

Signature of FFN Provider: _____ Date: _____

Chapter 6 History of Compliance

History of Compliance for a provider that is regulated by Child Care Licensing means adhering to the rules and regulations pertaining to meeting ratios, supervision and serious health & safety requirements to ensure that children are protected while in care.

As an FFN provider, you must also meet certain basic health and safety regulations while enrolled. These are:

6.1 Supervision

Adequate supervision requires 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 requires being near and having ready access to intervene when needed.

Supervision also requires that:

- a. Children must not be left alone in the home or outside on the play area alone

6.2 Physical Safety of the Home and Premises

The indoor and outdoor environments must be free of hazards that could be harmful to children.

a. Indoor:

- Home is free from hazards and litter.
- Healthy animals which present no apparent threat to the health and safety of children shall be permitted, provided they are clean, properly housed, fed and cared for, and have the required current vaccinations, as appropriate.
- Smoking, consumption of alcoholic beverages, or use of other non-prescription narcotic or illegal substances are prohibited on the premises (indoor or outdoor) or while transporting children during the time children are in care.

The following must be kept locked or out of children's reach:

- Medications
- Cleaning Supplies/Hazardous materials
- Caregiver's purse
- Objects (Knives/Scissors)
- Illegal Drugs
- Weapons
- Miscellaneous that could harm children (e.g. hot glue gun, iron)

b. Outdoor

Provides for the safety of the building and physical premises, including the identification of and protection from hazards that can cause bodily injury, such as electrical hazards, vehicular traffic, and bodies of water.

- Children shall be restricted from unsafe areas and conditions such as traffic, and parking areas and bodies of water such as ponds, lakes, swimming pools.
- Lawn Mower/Lawn Tools shall be locked or inaccessible to children.
- Chemicals (Bug Spray, Fertilizer, etc.) and gasoline shall be locked or inaccessible to children.

6.3 Background checks

- Everyone residing in the home plus any emergency person must complete all background checks.
- If someone moves in your home you must have the background check completed on them.
- Any emergency person who cares for the child in your absence must have the clear background check and meet Eligibility Criteria.

6.4 Transportation of Children

- Must have written permission from the parent to transport.
- Each child must be secured in an individual, age appropriate safety restraint at all times the vehicle is in motion.
- The driver must have a valid regular driver's license.
- Children must not be left unattended in the vehicle at any time.

6.5 Group Size

The FFN provider cannot exceed caring for six children at one time.

6.6 Annual Training

Family, Friend and Neighbor Providers are required to complete 10 hrs of annual training. A list of free and low cost trainings are available at:

https://www.prosolutionstraining.com/menu/?HomeState_id=41

Chapter 7 Records

The following records must be kept on-site. You are required to keep these records for a period of three years or until an audit is conducted.

7.1 Attendance Records

- Daily attendance for each child served
- The daily attendance record must match what is reported on the SVL

7.2 Fee Receipts

- Copy of the paid fee receipt given to the client
- The record must show the fees are collected on time

7.3 Service Voucher Log (SVL)

- Keep a copy of each SVL

7.4 **Child File**

- a. Copy of all letters/correspondence sent to you from SC Voucher pertaining to the child
- b. Child Enrollment Form which lists the pertinent information for each child. This would include parent's names, address, contact information; child's allergies, etc.

7.5 **Provider and Emergency Person File**

- a. Copy of SC Pre-Service Safety Certificate
- b. Copy of Child Infant CPR and Pediatric First Aid
- c. signed and dated FFN Code of Ethics
- d. Signed and Dated Discipline Statement

Chapter 8 Complaints

- If a complaint is received on an FFN provider, the complaint will be documented, and the Licensing Specialist will make an unannounced visit, as appropriate, to investigate the complaint.
- Any complaint that involves an injury to a child may be referred to the Office of Out of Home Abuse and Neglect (OHAN).
- Any findings made during the visit by SC Child Care Licensing will be documented in a letter and sent to the provider.
- All complaints received, and subsequent correspondence will be kept on file with Child Care Licensing and are public record.

Chapter 9 General Information

The FFN provider voluntarily enrolls and agrees to meet and maintain the eligibility requirements. As part of enrollment, you must sign a Provider Agreement which signifies you agree to comply with the requirements set forth in this Manual. Therefore, it is very important that you read this document in its entirety. Any questions about this Manual should be referred to SC Licensing.

Please let us know if any of the following changes occur (Also, see Chapter 11 Changes to Your Enrollment):

- If there has been a serious injury or death of a child in your home
- If emergency personnel are called to the home while the child is there (fire, police, ambulance)
- If there has been damage to your home due to fire and or flood, etc.
- If you, the emergency person or a family member are under an OHAN (Out of Home Abuse and Neglect) investigation
- If you have to evacuate or need to relocate during an emergency when the child is in your care (call when safe to do so)
- If the child is missing from your home or has been left unattended in a vehicle operated while in your care

SC VOUCHER

Anywhere there is a reference to contact or notify SC Voucher, this is the contact information:

SC Voucher Phone: (800) 262-4416

ATTN: Provider Team Fax: (800) 310-5417

S. C. Department of Social Services

P. O. Box 100160

Columbia, South Carolina 29202-3160

Please let us know if any of the following occur:

- Change in address or payment address
- Change in phone number
- If your name changes (e.g. married or divorced)
- Change in Regulatory Status (if you become Licensed or Registered)
- Within 3 working days of excessive absences or irregular child care usage
- Within one working day if a child is no longer in your care for reasons other than termination by DSS.
- Queries regarding payment if payment not received after 10-14 working days from the date of SVL receipt by the SC Voucher
- If you are going to discontinue services to the client
- If you will be temporarily closed for a week or longer
- If clients fail to attend after authorization is given

Chapter 10 Changes to Your Enrollment

Please contact SC Voucher if any of the following occurs:

10.1 Regulatory Status

If you become registered or licensed through SC Child Care Licensing, you will then no longer meet the definition of an FFN provider. If you wish to remain enrolled in SC Voucher, you may apply to become part of ABC Quality by completing an application.

10.2 Name Change

If your name changes due to marriage or divorce, you must notify SC Voucher immediately to avoid possible payment delays. You will need to provide a new signed W-9 along with a copy of your SC Driver's License or SC Identification card and a copy of your Social Security card.

10.3 Address Change

If you move or have a change in payment address, please notify SC Voucher in writing prior to the move to avoid possible payment delays. Provider Agreements are specific to your address and a new Provider Agreement must be signed with the new address. Please submit the following in writing to SC Voucher:

- a. Your full name (printed)
- b. Your Social Security Number
- c. Your Old Address
- d. Your New Address
- e. Your signature

10.4 Telephone Number Change

FFN providers must have access to a working telephone at all times. If the phone number changes, you must contact SV Voucher as soon as possible, but no later than 15 days of the date the number changes.

10.5 Add an Additional Care Type

If the child(ren) you are serving age up to another age group, you may contact SC Voucher to request it be added to your enrollment.

Chapter 11 SC Voucher Clients and Services

SC Child Care Licensing and SC Voucher are advocates for parental choice and clients are responsible for selecting the provider of their choice. Clients choose their child care arrangements. If an eligible SC Voucher Program client wants you to care for their child, you will need to contact SC Voucher to complete an application and complete the necessary eligibility requirements for participation. Please refer back to Chapter 3 “Navigating The Process” for more detailed information.

11.1 Weeks of Care a Client receives

- A child may get up to one year (52 weeks) of care. This can be full-time care, all half-time care or a combination of both full time, half-time and/or less than half-time.
- The number of weeks approved and the type of care is determined at the client’s eligibility.
- Less than half-time care may be used with full or half-time care or may be used alone but cannot be used to pay the same provider.

11.2 When a Child is Absent

- A child may be absent no more than 31 days a year. Children who get less than a year of child care will receive less days they can be absent based on the number of weeks of care they are authorized to receive.
- SC Voucher will not pay you when the children are absent for a week or more.
- When the child has exceeded the allowable number of absences, the child may be terminated by SC Voucher. If that occurs, you and the client will be sent a letter. You will not be paid for any care you provide to the child after the week the child is terminated.
- Examples of allowable absences
52 Weeks of Care = 365 Days = 31 Days of Absences

50 Weeks of Care = 350 Days = 30 Days of Absences

38 Weeks of Care = 260 Days = 23 Days of Absences

33 Weeks of Care = 231 Days = 20 Days of Absences

13 Weeks of Care = 91 Days = 8 Days of Absences

12 Weeks of Care = 84 Days = 7 Days of Absences

- If a child misses an entire week, you are required to record “0” in the hours box on the Service Voucher log (SVL) and you must enter the appropriate absence code in the ABS code box on the SVL. You will not be paid for this week.
- When using absence codes NLA, CNS, DEC or MOV, you must enter a drop/transfer date and a pay until date.

11.3 Client Fees

Clients who receive services have a fee or co-pay which is paid to the provider. Foster children do not have a fee/co-pay. SC Voucher determines the client fee by evaluating the client’s family size and income. **The provider is responsible for the collection of client fees from the parent in advance of service delivery.** Neither SC Child Care Licensing or SC Voucher assumes any responsibility for collection or payment of client fees.

- a. Foster parents and clients participating in the Family Independence Program are exempt from paying client fees. However, they are responsible for the difference between the provider’s rate and the maximum rate paid by SC Voucher
- b. The client fee should be collected weekly in advance of service delivery. ****Providers should not let clients get behind on their weekly fees.**
- c. Providers must give the client a receipt upon payment of the fee.
- d. Providers must keep a record when clients pay the fee.

11.4 Client Transfer

Clients may transfer from one provider to another.

- a. Clients must contact SC Voucher either by telephone prior to moving their child.
- b. Family, Friend and Neighbor care providers are not entitled to a transfer notice. Services will end the Sunday following the last day the child attends.
- c. Once the client is approved to transfer, SC Voucher will give the client the approved transfer date. You will receive the “Transfer Letter” letting you know the child is transferring and the last day you should care for the child.
- d. You will not be paid after the transfer date is given by SC Voucher.

11.5 Discontinuing Services to Clients

- a. If you choose to stop services for an SC Voucher child, you must tell the client and SC Voucher before stopping services.
- b. You must let them know the reason the service is being discontinued, such as client will not pay the fees or client has too many absences.
- c. The end date is the last date of the service week which is always a Sunday.
- d. You should let the client know in advance before you stop services for the child.
- e. Clients should be allowed to finish any week that you have asked to be paid for on the SVL. If the client is not allowed to finish the week, you will not receive payment for that week.

- f. If SC Voucher terminates a client's services, you will receive a letter stating the date of the termination, the reason for the termination, and the last date SC Voucher will pay you.

11.6 Payment

The Service Voucher Log (SVL)

The SVL is the official payment document for the SC Voucher Program. It is used to request reimbursement for child care services provided to eligible children participating in the SC Voucher Program.

- a. Enrolled providers may choose to receive the SVL in paper form or may choose to use the on-line SVL. Providers who choose to use the on-line SVL must notify the SC Voucher Program.
- b. The SVL (both paper and on-line) is a pre-populated document that lists the child(ren) for whom payment is due, any applicable registration fees, and the weekly reimbursement rate per child.
- c. If the SVL is not submitted, then the provider will not receive reimbursement and another SVL is not generated. A new SVL is generated with each payment that is made and will continue to generate as long as there is an active connection which have not paid to the provider.

11.7 Getting the Service Voucher Log Started

Upon enrollment of the FFN provider, the provider must submit a Connection Card to SC Voucher. This will cause the first SVL to generate.

- a. Upon receipt of the Connection Card, SC Voucher will send a letter by mail notifying you of the start and stop dates for the child(ren) you have been authorized to care for. The letter will also include any fees the client is to pay directly to the provider.
- b. The provider must not serve the child(ren) before receiving the written authorization, as you will not receive payment from SC Voucher.
- c. **IMPORTANT NOTICE:** If the child(ren) never starts, you must notify SC Voucher so that payment will not be made.

11.8 Completing the Service Voucher Log

Providers must:

- verify the child(ren) on the SVL are indeed the child(ren) they serve;
- record the actual total hours the child attended per day;
- record any absences the child(ren) may have had, and select the correct absence code;
- insert a drop/transfer and pay until date if a child no longer attends
- The SVL cannot be submitted prior to the ending date of the SVL. For example: if the week of 10/4/21 – 10/10/21 appears on the SVL, you cannot submit the SVL before 10/10/21.
- You must keep a copy of your SVL for your records.

11.9 Problems/Questions with Payment

Payment is expected to take 10 to 14 working days from the date SC Voucher receives the original, completed, and signed SVL, OR the electronic version of the SVL.

- a. Providers are required to wait until after the 14th day before calling about payment.
- b. The provider may call SC Voucher with questions regarding payments or transactions that did not process.
- c. If a child misses an entire week (illness, etc.), you may request to be paid for the week. You are required to record "0" in the Hours Box on the SVL.
- d. If you are not able to care for the child(ren) for an entire week, you may not be eligible for payment for the week. The child may need to go to another child care provider and SC Voucher cannot pay two providers for the same week of care. You must contact SC Voucher in advance with this information.
- e. With each payment you will receive a "Remittance Advice" statement that indicates which child(ren) has been paid or if you have not been paid. There are three types of "Remittance Advice" statements a provider will or can receive with each payment:
 - Paid Remittance Advice: This will be received with each payment. The Paid Remittance Advice will identify the client, child and payment amount for each transaction (or week of care) on the SVL that was submitted which makes up the payment total. Provider are to match the Paid Remittance Advice against the provider's copy of the SVL to ensure proper payment for each transaction.
 - Rejected Remittance Advice: This may be included if payment was rejected. It identifies the child(ren) who were not paid and the reason.
 - Adjusted Remittance Advice: This may also be included if funds were deducted from the provider's payment. Funds can be deducted if an overpayment occurred

Chapter 12 Fraud

SC Voucher takes fraud very seriously. It is our intent through these procedures that SC Child Care Licensing strives to make known its expectations of providers for participation in the program, along with subsequent consequences for non-compliance.

SC Voucher maintains a 1-800 number for complaints and this number can be used by the public to reports complaints and incidents of fraud. (1-800-262-4416).

12.1 Definition:

SC Child Care Licensing and SC Voucher refers to fraud as the following (but not limited to):

- a. Intentionally making a false statement;
- b. Misrepresentation regarding a material fact;
- c. Failure to disclose a material fact/information; or
- d. Any action that results in obtaining, attempting to obtain, or continuing to receive funds, which the provider would not otherwise qualify to receive, or to circumvent or help others circumvent the requirements of SC Voucher or SC Child Care Licensing.

- e. Conviction of fraud in a federal/state court.
- f. Billing for services and receiving payment for services or goods that were not obtained in accordance with requirements of SC Voucher, and the Provider Agreement.

Examples of this could include billing clients for services when payment is being received through SC Voucher for the service (other than the client co-pay or difference in what SC Voucher pays and the provider rate); serving children at unauthorized locations; continuing to bill for clients who have left the program, allowing another provider or location that is not enrolled to use your Federal ID or Social Security number to connect children, collecting the payment and distributing it to them; submitting falsified documents such as a SCCPR/First aid cards, etc.

Any complaint or suspicion of fraud will be investigated by the Department of Social Services and may be conducted alone or in conjunction with other Division of Early Care and Education staff. SC Voucher may also refer the provider to the Division of Internal Audits or Office of Inspector General depending upon the nature of the fraud. You must agree to cooperate with the investigation which may be by allowing an on-site visit(s) or by providing requested documents.

If the Department of Social Services determines there is evidence to support the claim of fraud, or if the provider refuses to cooperate with the investigation, then SC Voucher will initiate termination and funds could be recouped.

Chapter 13 Glossary

Definitions of key terms are presented to ensure clarity and understanding. These definitions express the administering agency's intent and meaning for the terms identified.

13.1 Absences

When the child is not present (absent all day) with you during the service unit week, either due to illness, vacation, or court-ordered non-custodial visitation or other known or unknown reason.

13.2 Absence Reason Codes

Pre-determined absence reason codes that must be used when completing the SVL.

13.3 Authorized Service Period

The specific time frame child care services are approved to a client and a specific provider.

13.4 Billing Rate

The weekly rate you are paid to keep a child.

13.5 Care Type

The age groups (or care types) the provider has been approved to serve.

13.6 Child

The recipient of child care services.

13.6 Child Name

The first and last name of the child that is eligible to receive services.

13.7 Child Number

The last four digits of the client's Social Security number plus the two-digit code (01, 02 etc) given to each child.

13.8 Client Name

An individual who has met the eligibility criteria and is funded for child care. The client is listed on the SVL by the initial of their first name and their last name.

13.9 Client Fee

The fee amount established by SCDSS based on the family size and gross income, and paid to you by client.

13.10 Client Number

The last four digits of the client's Social Security number.

13.11 Client Termination of Eligibility

Action taken when the client is no longer eligible for services. Notice is always given to the provider when child care services are terminated.

13.12 Connection

The start and stop dates (dates a child is connected to a specific provider) within the SC Voucher System

13.13 Effective Date of Termination

The date a client no longer qualifies to receive child care for their child(ren).

13.14 Eligibility Criteria

The eligibility criteria is found in this document.

13.15 End Date

The last date services are authorized.

13.16 Family, Friend, Neighbor Child Care – Out-Home Care

A neighbor, relative or friend who does not reside in the home of the client/child, but is not required to meet regulatory requirements. Child care is provided in the provider's home.

13.17 Full-Time Care

Thirty or more hours of child care provided during one week.

13.18 Half-Time Care

Less than thirty hours, but more than 15 hours of child care provided during one week.

13.19 Less Than Half-Time Care

Less than fifteen (15) hours of child care provided during one week. No registration fee is allowed for this care type.

13.20 Office of Out of Home Abuse and Neglect (OHAN)

Located within SCDSS, this office is responsible for investigating complaints reported regarding incidents that occur outside a child's home environment, such as day care facilities, foster homes, etc.

13.21 Remittance Advice

A document included with the provider's check. There are three different types:

- a. Paid Remittance Advice: indicates what clients and weeks were paid;
- b. Rejected Remittance Advice: indicates which clients and weeks were not paid and the reason;
- c. Adjusted Remittance Advice: indicates if funds were deducted from the provider's check, the amount, and the reason.

13.22 SC Voucher

The authorized child care voucher system management center that is available to provide assistance to clients and providers, and to handle child care applications, funding and connecting.

Providers call: 1-800-262-4416 for notification requirements and/or questions.

Parents call: 1-800-476-0199 for any questions.

13.23 Service Unit

One week of child care. A service unit may be for full-time, half-time, or less than half-time.

13.24 Service Voucher Log [SVL]

A pre-printed payment request form used to process payments to providers for eligible clients.

13.25 South Carolina Department of Social Services [SCDSS]:

The administering state agency for SC Child Care Licensing and SC Voucher and the agency responsible for administering the Welfare Reform, Family Independence Program.

13.26 Start Date

The date the provider is approved to begin caring for the child(ren)

13.27 Termination

Action taken by SC Voucher when the client no longer qualifies to receive child care.

13.28 Week

Monday through Sunday