

**DCF 250.05 Staffing.****(1) RESPONSIBILITIES AND QUALIFICATIONS OF STAFF.**

(a) *Minimum age and competence.* A family child care provider shall be physically, mentally and emotionally able to provide responsible care to all children, including children with disabilities, and shall be at least 18 years of age.

(b) *Training.*

*An employee or volunteer who assists in the child care center but is not counted in the staff-to-child ratio is not considered a "provider" and is not required to meet the training requirements in this section.*

*See DCF 250.04 (6) (a) – STAFF FILES.*

1.a. A provider shall have satisfactorily completed 3 credits of broad-based early childhood training or a non-credit course in caring for children approved by the department before receiving a license or working with children.

**Note:** The non-credit course called *Introduction To The Child Care Profession* is the non-credit course in caring for children that has been approved by the department. Acceptable broad-based early childhood education courses taken for credit include child development, child psychology or introduction to early childhood education. Information on agencies offering department-approved courses is available on the department's website at <http://dcf.wisconsin.gov>.

b. A person licensed or beginning to work with children after January 1, 2009, shall have satisfactorily completed a non-credit course in operating a child care business approved by the department or its equivalent before becoming licensed or working with children.

**Note:** The non-credit course entitled *Fundamentals of Family Child Care* is the non-credit course in operating a child care business that has been approved by the department. Information on agencies offering the department-approved course is available on the department's website at <http://dcf.wisconsin.gov>.

*Equivalent courses could include a credit-based business training course, a course in the WI Child Care Administrator Credential or a course in center administration taken as part of an associates or bachelor's degree in early childhood education.*

*If a person was qualified as a child care provider before January 1, 2009, the person remains qualified after January 1, 2009 without an exception. A Registry certificate issued before January 1, 2009, indicating the person is qualified as a family child care provider is acceptable documentation that the person has met the requirement for courses in early childhood education and the business of operating a family child care center.*

2. If more than one provider is required to meet the staff-to-child ratios, each additional provider shall meet the training requirements as specified under this paragraph.

*Second providers have 6 months after beginning work to complete the required training.*

3. A substitute or volunteer used to meet staff-to-child ratios need not meet the training requirements specified in this section until the substitute or volunteer has worked in the center for 240 hours, except that the substitute or volunteer used to meet staff-to-child ratios shall complete department-approved training in shaken baby syndrome prevention before providing care and supervision to children under age 5.

*The 240 hours is cumulative, not each year. Training must be complete at the time the individual reaches 240 hours. Documentation of the hours worked must be kept on file at the center.*

4. A provider shall receive and document having received 15 hours of continuing education each year in child growth and development, early childhood education, caring for children with disabilities, or first aid as approved by the department. This training may include attendance at training events, workshops, conferences, consultation with community resource people or observation of child care programs. Up to 5 hours of independent reading or watching educational materials may be used to meet continuing education requirements.

*The calendar year January to December is considered a continuing education year.*

*Fifteen hours of continuing education each year may be documented by class card, certificate, transcript, or Registry bar code. The form, Staff Continuing Education Record, may be used to document continuing education hours.*

*The requirement for 15 hours of continuing education each year does not become effective until the regular license is issued. However, continuing education taken during the probationary period may be counted towards the first year's requirement. Attendance at meetings such as support group meetings may be counted as continuing education if the meeting is related to training on a topic related to caring for children or operating a business. Only that portion of the meeting devoted to the training topic may be counted.*

*The required 10 hour Infant/Toddler, child abuse training and CPR course may be counted toward the continuing education requirement of 15 hours.*

*Continuing education hours or credit courses may be used to meet the continuing education requirement during the year in which the hours are earned and for the 2 years following that year. Hours spent in observation in another program which results in college credits (such as in the mentor/protégé program) may not be counted, but the college credit will count. Credits should be converted to hours—for instructions on how to obtain Credit to Hour Conversion – Technical Colleges and Universities, see Appendix J Resources List.*

*The department does not approve agencies or trainers for continuing education.*

*The Continuing Education Record – Independent Reading / Video Viewing form available on the department's website may be used to document each child care-related book, magazine, article, DVD or video tape that is read/viewed as part of an employee's continuing education effort. This may include time spent in study to develop a program and curriculum. It does not include time spent in the preparation of activities or instruction with children.*

*Time spent doing research in the child development associate credential (CDA) process can be counted as a part of the 5 allowed hours. Time spent assembling the portfolio in the CDA process does not count toward continuing education.*

*The topic addressed by the continuing education experience must be one that would prepare a person to function better in their role as family child care provider and small business person.*

**Note:** The licensee may use either the department's form, Staff Continuing Education Record-Child Care Centers, or the licensee's own form to document the completion of continuing education. Information on how to obtain the department's form is available on the department's website, <http://dcf.wisconsin.gov>, or from any regional licensing office in Appendix A.

5. A provider shall obtain within 6 months of licensure or date of hire and maintain a current certificate of completion for a department-approved course in infant and child cardiopulmonary resuscitation including training in the use of an automated external defibrillator. The time spent obtaining or renewing cardiopulmonary resuscitation training may be counted towards the required continuing education hours.

*The Department of Health Services, Bureau of Emergency Medical Services (BEMS) approves agencies to offer the CPR with Automated External Defibrillator (AED) training as required by the statutes. A list of currently approved agencies is available on the BEMS website [http://dhs.wisconsin.gov/ems/License\\_certification/CPR.htm](http://dhs.wisconsin.gov/ems/License_certification/CPR.htm). The training must result in a certificate of completion. If the certificate of completion does not have a date specifying the length of time for which it is valid, the CPR training must be renewed every year. If the center does not serve infants, the CPR training could be child/adult CPR.*

*Substitutes will need to have CPR training after they have worked in a center for 240 hours. Emergency back-up providers are not required to have CPR training.*

6. Within 6 months of becoming licensed or working in a center licensed to care for children under age 2, a provider shall have completed at least 10 hours of department-approved training in the care of infants and toddlers.

*Fundamentals of Infant and Toddler Care is the non-credit, department-approved training. Credit-based training in the care of children under age 2 is also acceptable.*

**250.05(1)(b)6. continued**

*If the only child under age 2 is the provider's own child, and the center is not licensed to care for children under age 2, the training is not required. An exception to the age range on the license to care for his/her own child under age 2 should be in place. If a license is amended to include care of children under age 2, the training must be completed within 6 months of the license amendment date.*

7. Before becoming licensed or providing care and supervision to children under age 5, a provider, substitute, volunteer, emergency back-up or any other person providing care and supervision to children in a family child care center shall have completed department-approved training in shaken baby syndrome prevention unless the person has documentation of completion of one of the non-credit, department-approved, entry-level courses that contain the required materials taken after July 1, 2005.

**Note:** *Introduction to the Child Care Profession* and *Fundamentals of Infant and Toddler Care* are the names of the non-credit, department-approved, entry-level courses that contain the required shaken baby syndrome prevention materials. Information on agencies offering the department-approved courses is available on the department's website at <http://dcf.wisconsin.gov>.

(c) Volunteers. No person may offer child care training as specified in this section unless the person and the course have been approved by the department.

**Note:** Information on the approval process for non-credit courses is available on the department's website, <http://dcf.wisconsin.gov>.

**(2) STAFF DEVELOPMENT.**

(a) *Orientation of employees, volunteers and substitutes.* Each employee, volunteer, or substitute shall receive an orientation before beginning work. The orientation shall be documented on a form provided by the department and kept in the employee file. The orientation shall cover all of the following:

**Note:** See s. DCF 250.04(2)(f) relating to a written plan for orientation.

1. Names and ages of all the children in care.
2. Current arrival and departure information for each child enrolled including the names of people authorized to pick up the child.
3. A review of children's records including emergency contact information.
4. Specific information relating to children's special health care needs including medications, disabilities or special health conditions.
5. Procedures to reduce the risk of sudden infant death syndrome, if the center is licensed to care for children under one year of age.
6. An overview of the daily schedule including meals, snacks, nap and any information related to the eating and sleep schedules of infants and toddlers enrolled in the center.
7. A review of the center's procedures for dealing with emergencies.
8. The procedure for reporting suspected abuse and neglect of a child.
9. The plan for evacuating sleeping children, if the center is licensed to care for children between the hours of 9 PM and 5 AM.
10. The procedure to contact a parent if a child is absent from the center without prior notification of the absence from the parent.
11. Review of center policies required under s. DCF 250.04(2)(e).
12. Review of this chapter.
13. Review of s. DCF 12.07(1) which requires a provider to notify the licensee as soon as possible but no later than the provider's next working day when any of the following occurs:
  - a. The provider has been convicted of a crime.
  - b. The provider has been or is being investigated by any governmental agency for any other act, offense, or omission, including an investigation related to the abuse or neglect, or threat of abuse or neglect, to a child or other client, or an investigation related to misappropriation of a client's property.
  - c. The provider has a substantiated governmental finding against them for abuse or neglect of a child or adult or for misappropriation of a client's property.
  - d. A professional license held by a provider has been denied, revoked, restricted or otherwise limited.

**Note:** The department's form, Staff Orientation Checklist — Family Child Care Centers, is used to document completion of employee orientation. Information on how to obtain the form is available on the department's website, <http://dcf.wisconsin.gov>, or from any regional licensing office in Appendix A.

*An orientation plan for employees, volunteers and substitutes is not required if the licensee is the only person providing child care.*

**250.05(2)(b)**

(b) *Orientation of emergency back-up providers.* Each time an emergency situation occurs, each emergency back-up provider shall receive an orientation immediately before being left alone with the children. The orientation shall cover all of the following:

**Note:** See s. DCF 250.04(2)(f) relating to a written plan for orientation.

1. Names and ages of all the children in care.
2. Arrival and departure information for each child in care including the names of people authorized to pick up the child.
3. Location of children's files including emergency contact information, consent for emergency medical treatment and any special health care needs.
4. Procedures to reduce the risk of sudden infant death syndrome, if the center is licensed to care for children under one year of age.

**(3) SUPERVISION.**

(a)1. A provider may not be engaged in any other activity or occupation during the hours of operation of the center, except for daily maintenance of the home.

*Daily maintenance of the home does not include time-consuming tasks which would prevent the provider from supervising and interacting with children. Acceptable tasks include dusting, floor sweeping, meal preparation and clean up and laundry.*

*Home-based occupations may not be practiced during hours of operation (such as, but not limited to, Mary Kay cosmetics, Avon, Tupperware).*

*HOME SCHOOLING or CHILDREN ATTENDING a VIRTUAL (ON-LINE) SCHOOL: Home schooling is defined as a program of educational instruction provided to a child by the child's parent or guardian or by a person designated by the parent or guardian. A virtual school or cyber school describes an institution that teaches courses entirely or primarily through online methods. The program must provide 875 hours of instruction in a sequentially-progressive curriculum of fundamental instruction in reading, language arts, mathematics, social studies, science and health each school year. Licensed family child care in a home where the provider's own children are receiving home-based education or virtual schooling may be permitted if the following conditions are met:*

- *The department is notified in writing that home-schooling or attendance through a virtual school is occurring.*
- *The provider does not provide any home-based instruction during the hours of center operation.*

2. The licensee may not combine the care of children enrolled in the child care center with foster care of other non-related children or adults without the prior written approval of both licensing agencies.

*Care of adult family members will be reviewed on a case-by-case basis.*

(b) A provider shall be awake whenever children are in care.

(c) No individual provider may take care of children for more than 12 hours in any 24-hour period.

*A license may be granted for more than 12 hours in a 24-hour period if a second qualified provider cares for and supervises children after 12 hours.*

*See DCF 250.04(5)(d) – STAFF FILE – DAYS, HOURS WORKED.*

(d) No child may be in care for more than 12 hours in any 24-hour period.

*An exception may be granted to a child care center for a child or children to be in care for more than 12 hours in a 24-hour period if a local business or corporation operates a 12-hour work shift for their employees or if the department determines that granting an exception would support the circumstances and the family. The exception does not need to be individual to each child if the exception is granted in relation to employees of a specific business. A written parental request for care in excess of 12 hours must be on file at the center.*

(e) Except when a substitute is providing care, at least one provider who has completed the training required under s. DCF 250.05(1)(b)1. shall supervise children at all times. Substitutes shall have completed the training in shaken baby syndrome prevention required under s. DCF 250.05(1)(b)7. before working as a substitute.

**250.05(3)(f)**

(f) No person under 18 years of age may be left in sole charge of the children.

(g) The center shall have a plan approved by the department for ensuring supervision of the children in an emergency or during a provider's absence.

*See 250.04(2)(e)3. POLICY SUBMITTED AND IMPLEMENTED – ABSENCES; 250.05(2)(b) EMERGENCY BACK-UP PROVIDER – ORIENTATION and 250.03(7) for the definition of emergency back-up provider.*

(h) A provider and any other adult in contact with children may not consume beverages containing alcohol or any non-prescribed controlled substance specified in ch. 961, Stats., or be under the influence of any alcohol or a non-prescribed controlled substance, during the hours of the center's operation.

(i) Each child shall be closely supervised by a provider to guide the child's behavior and activities, prevent harm and assure safety.

*Electronic listening devices may be used for supervising sleeping children. Consideration should be given to the quality of the device, proximity and accessibility of provider and noise levels that may interfere with the provider's ability to hear.*

*See DCF 250.03(33) – SUDDEN INFANT DEATH SYNDROME DEFINITION; DCF 250.05(3) (j) – OUTDOOR SUPERVISION and DCF 250.07(7) (e) – PETS AND ANIMALS – SUPERVISORIN.*

(j) A provider shall be outside with children and provide sight and sound supervision of the children unless the children are playing inside the enclosed outdoor area on the premises, as specified under s. DCF 250.06(11)(b).

*The provider may supervise school-age children in or outside of the enclosed area from within the house if the provider is within sight or sound and the children have been informed of the boundaries. The provider must be able to guide the behavior and activities of the children as specified in the definition of supervision under DCF 250.03(34).*

*It is expected that children will play inside any enclosed area on the premises. If children are riding tricycles or other riding toys on a driveway or sidewalk or using sidewalk play items such as sidewalk chalk, they may play outside the enclosed area on an occasional basis.*

(k) A child may not be released to any person who has not been previously authorized by the parent to receive the child.

*Centers may accept a fax or phone call from the parent with proper ID presented at time of pick up. The Department recommends documentation of the telephone call and that identification of the person picking up a child was checked.*

(L) The licensee shall implement a procedure to ensure that the number, names and whereabouts of children in care are known to the provider at all times.

(m) A provider shall be outside with children providing sight and sound supervision of the children when a wading pool with water in it is present in the outdoor play space specified in s. DCF 250.06(11)(b).

**(4) STAFFING AND GROUPING.**

(a) At no time may more than 8 children be in the care of the center. This total includes:

1. All children under 7 years of age, including a provider's own children.

*All licensing rules apply to the provider's own children under age 7 including 250.07(2)(a) GUIDING CHILDREN'S BEHAVIOR; 250.08(5) and (6) regarding transportation of children; 250.09 regarding care of infants and toddlers. See 250.03(28) for the definition of provider's own children.*

2. All children 7 years of age or older who are not a provider's own children.

*See DCF 250.03(9) for the definition of family child care center.*

*Overlap periods in which more than 8 children are in care is a violation of the rule. Providing care for more than 8 children is in conflict with Commercial Building Codes, local zoning ordinances and staff-to-child ratios.*

**250.05(4)(a)2. continued**

*VISITING CHILDREN: There may be times when neighborhood or school playmates age 7 or older are on the premises to visit the provider's own children. There is no rule violation in these circumstances.*

*Children age 7 or older who visit the child care center to play with children in care (not the provider's own children), or to act as a "helper" for the provider, are considered to be in the care of the provider. When children under age 7 are present to visit the provider's own children without an accompanying adult to supervise them, the licensing specialist may ask for the name and telephone number of parents or caregivers for these children to help determine whether the children are actually in the care of the licensed provider.*

*There may be occasions when a non-resident adult will visit the child care center bringing along his/her own children under the age of 7. Children must be properly supervised when a provider is visiting with another adult. Appropriate consideration must be given to the children's activities during these visits.*

*Individual situations will be evaluated on a case-by-case basis.*

*JOINT ACTIVITIES WITH MORE THAN ONE LICENSED/CERTIFIED PROVIDER: Licensing rules do not permit family child care centers to combine at one licensed premises for joint activities if the number of children present will exceed 8 because the building codes for a family child care center were designed for no more than 8 children in care at one time. Having more than 8 children present requires that the Wisconsin Commercial Building Codes for 9 or more children in care be followed.*

*As an alternative to meeting at a family child care center, we suggest that providers planning activities for multiple groups of children use a location off the premises of a licensed family child care center, e.g., the public library or local park. These types of activities, off the premises of a licensed facility, would be considered a field trip and the building code requirements would not apply.*

(b) The maximum number of children that one provider may care for is specified in Table 250.05.

*A child who is enrolled in a 4 year old kindergarten (4K) program may be considered a school-age child once the child turns age 5, even if this occurs during the 4K school year.*

*An exception may never be granted to exceed the licensed capacity of 8 children.*

(c) If the size of the group or the age distribution of the children exceeds the number that may be served by one provider, an additional qualified provider shall be present.

**Note:** For example, if there are 3 children under age 2 present at one time and 5 children between the ages of 2 years and 6 years present, a second provider is required. At no time may the maximum number of children in care exceed 8.

*See DCF 250.05(1)(b)2. PROVIDER TRAINING – ADDITIONAL REQUIRED PROVIDER; DCF 250.04(5) STAFF FILE – MAINTENANCE & AVAILABILITY.*

*The qualified second provider may be a person under the age of 18 who has successfully completed the DPI approved Assistant Child Care Teacher course, documented by a certificate from DPI. This person may not be left in sole charge of children.*

(d) Each provider may care for no more than 2 children under age 2 when care is provided on a level that is more than 6 feet above or below the ground level. A center may care for 3 or 4 children under age 2 when care is provided on a level that is more than 6 feet above or below the ground level only if there is more than one qualified provider.

**Note:** Section DCF 250.06(4)(e) requires an interconnected smoke detection system in operating condition if one or more children under age 2 will be cared for on a level that is more than 6 feet above or below the ground level.

**Table DCF 250.05**

**Maximum Number of Children in Family Child Care per Provider**

Children Under 2 Years of Age	Children 2 Years of Age and Older	Maximum Number of Additional School-age Children In Care For Fewer Than 3 Hours a Day	Maximum Number of Children
0	8	0	8
1	7	0	8
2	5	1	8
3	2	3	8
4	0	2	6