## PROPOSED REGULATION OF THE

## **BOARD FOR CHILD CARE**

## LCB File No. R072-98

June 5, 1998

EXPLANATION - Matter in *italics* is new; matter in brackets [] is material to be omitted.

AUTHORITY: §§1-4, NRS 432A.077.

**Section 1.** NAC 432A.310 is hereby amended to read as follows:

432A.310 1. Every member of the staff of a facility, including a volunteer, shall present to the director of the facility, to be placed in the employee's file, written evidence that the employee is free from communicable tuberculosis. The evidence must be in the form of a [ negative report of a tuberculosis test or an X-ray film of the chest taken within the 2 years before or 1 week after the employment. The test or X-ray film must be repeated every 2 years after the issuance of the negative report.

- 2. ]:
- (a) Report of a Mantoux tuberculin skin test; or
- (b) Statement from a provider of health care who is authorized to diagnose active tuberculosis,

that the employee is free from active tuberculosis, as provided in this section.

- 2. Before a person, including a person who has received a bacillus Calmette-Guerin (BCG) vaccination, begins employment at a facility, he must have submitted to a:
  - (a) Mantoux tuberculin skin test; or

(b) Chest radiograph and examination by a provider of health care who is authorized to diagnose active tuberculosis,

within the 12 months immediately preceding the first day of employment at the facility.

- 3. Every member of the staff of a facility, including a volunteer, shall submit to:
- (a) A Mantoux tuberculin skin test; or
- (b) An examination by a provider of health care who is authorized to diagnose active tuberculosis,

at least once every 12 months after the date the skin test or chest radiograph and examination were conducted pursuant to subsection 2.

- 4. Each caretaker or member of the staff of a facility who has an identified health problem that may affect his ability to provide adequate care to children in a facility shall:
- (a) Report the problem to the director of the facility or, if self-employed, to his licensing agency; and
- (b) Submit to the director or, if self-employed, to his licensing agency, a written statement from a licensed physician attesting to the fact that the health of the caretaker does not endanger the children who are under his care in the facility.
- [3.] 5. Each director shall report to his licensing agency any health problem reported to him pursuant to subsection [2.] 4.
- [4.] 6. Each director or caretaker, if self-employed, shall immediately report to his licensing agency any person residing at his facility who contracts a serious communicable disease.

- **Sec. 2.** Section 2 of LCB File No. R047-98, which was adopted by the board for child care and was filed with the secretary of state on June 10, 1998, is hereby amended to read as follows:
  - Sec. 2. 1. Each area in a facility that is used for changing diapers must:
  - (a) Have a smooth, nonabrasive, impervious surface;
  - (b) Be located within close proximity to a sink that is not used for the preparation of food;
    - (c) Not be located in an area in which food is prepared;
    - (d) Have a smooth, nonabsorbent floor covering;
  - (e) Have nearby for wet or soiled diapers a washable receptacle that is lined with plastic and covered with a lid;
    - (f) Be kept in good repair and in a safe condition; and
  - (g) Be cleaned and disinfected after each use by removing any visible soil and applying an approved disinfectant.
  - 2. Each soiled cloth diaper and any soiled clothing *that may be contagious* must be stored in an individual plastic bag and be returned to the parents daily.
    - 3. The staff of a facility:
  - (a) Shall discourage children from coming near an area that is used for changing diapers; and
    - (b) Shall not leave a child unattended in the diaper changing area.

- **Sec. 3** Section 4 of LCB File No. R047-98, which was adopted by the board for child care and was filed with the secretary of state on June 10, 1998, is hereby amended to read as follows:
  - Sec. 4. 1. A carpeted floor or rug on a floor that is too large to wash in a washing machine must be vacuumed not less than one time each day or more often if necessary and professionally cleaned not less than one time every 3 months or more often if necessary.
  - 2. Each floor of a facility that is not carpeted must be swept and mopped not less than one time each day or more often if necessary.
  - 3. When cleaning a nonporous surface in a facility, including, without limitation, cleaning toys, cribs, tables, high chairs and surfaces used to change diapers, the staff of the facility shall:
    - (a) Clean the surface first with soap and water to remove any dirt or debris; and
  - (b) Disinfect the surface with a disinfecting agent . [that is prepared fresh daily and is sprayed onto the surface by a bottle.]
  - 4. The disinfecting agent used pursuant to subsection 3 must [be prepared fresh daily and must] consist of:
  - (a) One-fourth of a cup of liquid chlorine bleach added to 1 gallon of water *that is* prepared fresh daily;
  - (b) One tablespoon of liquid chlorine bleach added to 1 quart of water *that is prepared fresh daily*; or
  - (c) A solution that is approved by the appropriate state or local agency and is at least as effective as the solutions described in paragraphs (a) and (b).

- **Sec. 4** Section 5 of LCB File No. R047-98, which was adopted by the board for child care and was filed with the secretary of state on June 10, 1998, is hereby amended to read as follows:
  - Sec. 5. 1. The staff of each facility shall:
  - (a) Provide appropriate and adequate seating for the children at the facility during snacks and meals;
    - (b) If a high chair is used, ensure that the chair:
      - (1) Is in good condition;
      - (2) Has a wide base; and
      - (3) Has a safety belt for the child;
  - (c) Wash with a detergent and disinfect after each use any chair or table that is used during a snack or meal;
  - (d) Allow, encourage and assist each child to feed himself, including, without limitation, encouraging a child to hold and drink from a cup, use a spoon and use his fingers to feed himself;
    - (e) Offer each child drinking water at times other than during his regular feedings;
    - (f) Discard any food that is left in a dish after a meal;
  - (g) Store each bottle of formula and container of food in accordance with the instructions from the manufacturer of the formula or food;
  - (h) Label each bottle of formula and container of food with the name of the child to whom it belongs and the date the formula or food was prepared by the facility or was prepared or purchased by the parent;

- (i) Immediately refrigerate and label each container of breast milk provided by a parent;
- (j) Return each bottle [and any unused container of food] to the appropriate parent each day; [and]
- (k) Return any unused, open container of food to the appropriate parent each day if the child was not fed directly from the container of food; and
- (1) Develop with the parents of a child a plan for feeding the child, which must include, without limitation:
  - (1) Instructions for feeding;
- (2) Any special dietary restrictions, including, without limitation, any allergies to food;
  - (3) A schedule of times for feeding;
  - (4) Whether the child will be fed breast milk, formula or solid food;
- (5) If the child will be fed breast milk or formula, when to begin feeding solid food; and
  - (6) Likes and dislikes of certain foods.
- 2. A child who is fed with a bottle and does not hold his own bottle must be held by a caretaker while being fed with a bottle. The bottle must not be propped for feeding. A child who demonstrates a preference for holding a bottle during feeding may hold his own bottle and need not be held by a caretaker if the caretaker is directly observing the child.
- 3. The staff of a facility may feed a child commercially prepared baby food directly from the jar in which it was packaged or from a separate dish. If the staff feeds the child from the jar, the staff shall discard the jar after it is used.