



## Early Learning Council

December 10, 2025

9:00 a.m. – 2:00 p.m.

Department of Early Learning and Care  
3<sup>rd</sup> Floor, Grand Ronde Room  
700 Summer St NE, Suite 350  
Salem, OR 97301

### COUNCIL ACTION REQUEST

*Date:* December 10, 2025

#### *AGENDA ITEM:* Certified Family Child Care Homes Rule Amendments

**ACTION:** Adopt the proposed permanent rule amendments to the Certified Family Child Care Homes ruleset.

**ISSUE:** DELC is proposing a permanent rule amendment for the Certified Family Child Care ruleset related to Prevention and Management of Hazards to address the unincorporated edits that may cause confusion regarding the storage of firearms and requirements in terms of security of pools and hot tubs. This would make enforcement challenging and risk child health and safety.

**BACKGROUND:** During the implementation period for the recently adopted rules for certified family child care homes (December 2024), it was discovered that key safety provisions-designed to protect children from specific hazards-had been accidentally omitted. In July 2025, the Early Learning Council (ELC) adopted temporary rules to address these omissions. These rules include:

- Prohibiting illegal controlled substances on the premises
- Establishing a general rule protecting children from water hazards.

The temporary rules are in effect for 180 days and DELC must adopt permanent rules within that timeframe in order to remain in effect. Along with the hazard-related rules, CCLD will include other minor corrections and clarifications to this ruleset.

**PROCESS:** DELC convened a Rules Advisory Committee (RAC) that met on October 7, 2025 from 6:00pm-7:30pm with families, child care providers, subject matter experts, early learning system partners, community-based organizations, and other community members. A public hearing was held on November 12, 2025 at 5:00pm and the public comment period is open until November 28, 2025.

**EQUITY ANALYSIS:** No equity impacts were identified during public engagement. DELC does not anticipate equity or fiscal impacts with the proposed changes. Many of the rules proposed for adoption were in effect prior the July 1, 2025 and are expected to have little to no impact on the daily operations of certified family child care providers or the families they serve.

**PROPOSED DRAFT MOTION:** I move to adopt the proposed rule language amendments dated December 10, 2025 that adopt amendments to Oregon Administrative Rules OAR 414-360-0100, OAR 414-360-0250, OAR 414-360-0520, OAR 414-360-0840, OAR 414-360-0920, OAR 414-360-1030, OAR 414-360-1100

**CONTACT:** Alicia Gardiner Director Child Care Licensing Division , Department of Early Learning and Care



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### Appendix:

AMEND: 414-360-0100

RULE TITLE: Definitions

The following words and terms within these rules have the following meanings:

- (1) "Activity Area" means the area of the home that is available, during all the hours of operation, for the children's activities. This area excludes but is not limited to food preparation areas of the kitchen, bathrooms, heating units, storage areas, furniture and stationary equipment not used by children.
- (2) "Applicant" means an individual who submits the child care license application and in whose name the certificate will be issued.
- (3) "Behavior and Guidance" means the on-going process of helping children develop self-regulation and assume responsibility for their own behaviors and actions.
- (4) "Business Day" means Monday through Friday, but does not include any holiday as defined by ORS 187.010 and ORS 189.020, or any day that the central office of CCLD is closed.
- (5) "Capacity" means the total number of children allowed in care at the certified family child care or in care away from the home at any one time.
- (6) "Caregiver" means any person, including the provider, who cares for the children in the certified family child care home and works directly with the children, providing care, supervision and guidance.
- (7) "CBR" (Central Background Registry) means CCLD's Registry of individuals who have been approved to be associated with a child care facility in Oregon pursuant to ORS 329A.030 and OAR 414-061-0000 through 414-061-0120.
- (a) "CBR Enrollment" means approval for a five year period to be enrolled in the CBR following an Oregon State Police criminal records check, child abuse and neglect records check, checks of adult protective services and foster care certification, and an FBI records check.
- (b) "CBR Conditional Enrollment" means temporary approval to be enrolled in the CBR following an Oregon State Police records check and child abuse and neglect records check but prior to receipt by CCLD of the results of the required FBI records check.
- (8) "CCLD" means the Child Care Licensing Division in the Department of Early Learning and Care.
- (9) "Child Care" means the care, supervision, and guidance on a regular basis of a child, unaccompanied by a parent, guardian, or custodial parent, during a part of the 24 hours of the day, with or without compensation.
- (10) "Certified Family Child Care" or "Home" means a child care facility located in a building constructed as a single family dwelling or other dwelling that has a certificate to care for a maximum of 16 children at any one time. References in these rules to "certified family child care home" or "home" refer to the provider or any agent, including a substitute provider, operating under the certificate.
- (11) "Child Care Child" means any child six weeks of age or older and under 13 years of age, or a child who is under the age of 18 with special needs or disabilities and who requires a level of care that is



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above normal for the child's age, for whom the provider has supervisory responsibility in the temporary absence of the parent.

(12) "Child with Specific Needs" means a child who requires specialized supports or other accommodations including some adaptation of the certified family child care's standard program of care, activities or equipment to accommodate a physical, developmental, behavioral, mental or medical condition or disability which is either permanent or temporary.

(13) "Civil Penalty" means a fine imposed by CCLD on a provider for violation of these rules.

(14) "DELC" means the Department of Early Learning and Care.

(15) "Developmentally Appropriate" means:

- (a) Caregivers interact with each child in a way that respects the child's unique abilities;
- (b) Caregivers have knowledge about how children grow and learn;
- (c) Activities, materials, and curriculum reflect the interests and abilities of a specific child or group of children being served; and
- (d) Equipment is appropriately sized or adapted so that each child can participate fully and safely.

(16) "Disinfect" means to destroy or inactivate all germs from an inanimate surface. Disinfecting involves cleaning and rinsing followed by applying a disinfectant, such as:

- (a) A chlorine and water solution following the manufacturer's instructions; or
- (b) An EPA-registered disinfectant, used according to the manufacturer's instructions including correct concentrations, contact time, drying or rinsing requirements, and suitability for the surface.

(17) "Family" means a group of individuals related by blood, marriage or adoption, or individuals whose functional relationships are like those found in such associations.

(18) "Field Trip" means an excursion or program activity with a specific destination away from the home that begins when caregivers and children leave the premises, whether by vehicle or by walking. It does not include neighborhood walks, routine school or home pick-up and drop-offs provided by the certified family child care.

(19) "Fire Code Official" means a Fire Inspector II, Fire Marshal, Deputy State Fire Marshal or designated person defined by ORS 476.030, ORS 476.060 and OAR 837-039-0016.

(20) "Hazard" means anything that may inflict injury or cause harm.

(21) "Inaccessible to children" means a method to prevent a child from reaching, entering, using, or getting to items, areas, or materials of a certified family child care by one or more of the following means:

- (a) Secured with a child safety device, such as a child safety cupboard lock or doorknob device:
  - (A) A device specifically manufactured as a child safety product; or
  - (B) For a product not manufactured as a child safety product, the device must have a multi-step opening process, or require two hands to open.
- (b) Locked, such as in a locked room, cupboard, or drawer; or locks that do not use a key or combination, such as a deadbolt or hook-and-eye latch, only if they are installed at least 60 inches high;



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- (c) Behind a properly secured child safety gate; or
  - (d) In a cupboard or on a shelf that is not within reach of any surface from where a child could stand or climb.
- (22) "Infant" means a child who is 6 weeks to 12 months of age.
- (23) "Infestation" means the invasion of insects and worms that causes a disease to the host. These insects can be mites, ticks, fleas or lice. Worms can be roundworms, pinworms, flatworms or other helminths.
- (24) "License" means the document that is issued by CCLD to a certified family child care. A license may also be referred to as a certificate.
- (25) "Licensing period" means the 12 months for which a certified family child care license is issued.
- (a) For an initial license, the licensing period begins the day the temporary or regular license is issued and ends the same day the following year. For example, if a certified family child care is issued a license on July 6, 2024, the licensing period is July 6, 2024 through July 6, 2025.
  - (b) For a renewal license for which the provider submitted a timely renewal application, the licensing period begins the day the prior licensing period ended and ends the same day the following year, regardless of the date the renewal license is issued, unless the provider and CCLD agree to change the licensing period to begin on a different date.
- (26) "Lockdown" means restricted to an interior room with few or no windows while the facility or building is secured from a threat.
- (27) "Night Care" means care given between 9:00 p.m. and 5:00 a.m. or when any enrolled child sleeps for more than 3 hours at the certified family child care.
- (28) "Oregon Registry" means the voluntary registry at the Oregon Center for Career Development in Childhood Care and Education at Portland State University that documents the training, education and experience of individuals who work in childhood care and education.
- (29) "Oregon Registry Online" (ORO) means the statewide database that stores all submitted training and education to be verified for use by CCLD.
- (30) "Owner" means the person who holds the certified family child care business as property and has a major financial stake in the operation of the home.
- (31) "Parent" means a child's parent, a guardian, or a person 18 years of age or older with supervisory responsibility of the child in the absence of the child's parent.
- (32) "Physical Restraint" means purposely limiting or obstructing the freedom of a person's bodily movement. Physical restraint does not include:
- (a) Holding a child to comfort the child when in distress;
  - (b) Holding a child to move them safely from one area to another without the use of force (e.g. redirecting a toddler to another activity);
  - (c) Assisting a child to complete a task, if the child does not resist the physical contact (helping a child to tie their shoe or hold a pencil or tool, bottle feeding, etc.); or
  - (d) Any prohibited discipline or action listed in OAR 414-360-0710.



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(33) "Play yard" means a framed enclosure with mesh or fabric sides. A play yard is intended for sleeping and playing accommodations.

(34) "Potentially hazardous food" means any food or beverage containing milk or milk products, eggs, meat, fish, shellfish, poultry, cooked rice, beans or pasta, and all other previously cooked foods, including leftovers.

(35) "Premises" means the physical location used by a certified family child care to provide care subject to regulation or investigation by CCLD, including all indoor and outdoor areas not directly used for child care if the provider, child care staff, or child care children have actual or potential access to the areas.

(36) "Preschool-Age Child" means a child who is at least 36 months of age but not yet eligible to be enrolled in kindergarten or above, before the first day of the current school year.

(37) "Provider" means the person in the certified family child care home who is responsible for the children in care, is the children's primary caregiver, and in whose name the certificate is issued. The provider is the person responsible for the overall operation of the home and who has the authority to perform the duties necessary to meet certification requirements.

(38) "Restrictable Disease" means an illness or infection as identified by the Public Health Division in OAR 333-019-0010 that would prohibit the child from attending child care.

(39) ~~"Sanitizing" means using a treatment that provides enough heat or concentration of chemicals for enough time to reduce the bacterial count, including disease-producing organisms, to a safe level on utensils, equipment, and toys.~~

(40) "Sanitizing" means using a treatment that provides enough heat or concentration of chemicals for enough time to reduce germs, to a safe level on utensils, equipment, toys, and other non-porous surfaces.

(a) An appropriate test kit or strips are required to measure the concentration of sanitizing solutions.

(b) Any sanitizer used on food contact surfaces or toys must be labeled as "safe for food contact surfaces."

(41) ~~(40)~~ "School-Age Child" means a child eligible to be enrolled in kindergarten or above on or before the first day of the current school year (also see ORS 329A.250(12)). This includes the months from the end of the prior school year to the start of the kindergarten school year.

(42) ~~(41)~~ "Serious Injury or Incident" means any of the following:

- (a) Injury requiring surgery;
- (b) Injury requiring admission to a hospital;
- (c) Injury requiring emergency medical attention;
- (d) Choking and unexpected breathing problems;
- (e) Unconsciousness;
- (f) Concussion;
- (g) Poisoning;
- (h) Medication overdose;



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- (i) Broken bone or joint dislocation;
- (j) Severe head or neck injury;
- (k) Chemical contact in eyes, mouth, skin, inhalation or ingestion;
- (l) All burns;
- (m) Allergic reaction requiring administration of Epi-Pen;
- (n) Severe bleeding or stitches;
- (o) Shock or confused state; or
- (p) Near drowning.

~~(43)~~ **(42)** "Serious Complaint" and "Serious Violation" means an allegation or finding of noncompliance in which:

- (a) Children are in imminent danger;
- (b) There are more children in care than allowed by licensed capacity;
- (c) Disciplinary methods prohibited under OAR 414-360-0710 are being used;
- (d) Children are not being supervised;
- (e) Multiple or serious fire, health or safety hazards are present in the certified family child care;
- (f) Extreme unsanitary conditions are present in the certified family child care;
- (g) Adults are in the home who are not enrolled in the CBR; or
- (h) A home is providing child care without the appropriate certification.

~~(44)~~ **(43)** "Shelter-in-Place" means caregivers and children staying at the home due to an external threat such as a storm, chemical or gas leak or explosion, or other event that prohibits the occupants from safely leaving the building.

~~(45)~~ **(44)** "Substitute Provider" means a person who acts as the children's primary caregiver in the certified family child care in the temporary absence of the provider.

~~(46)~~ **(45)** "Supervision" means the act of caring for a child or group of children. This includes awareness of and responsibility for the ongoing activity of each child. It requires physical presence, knowledge of children's needs, and accountability for their care and well-being. Supervision also requires that caregivers be near and have ready access to children in order to intervene when needed.

~~(47)~~ **(46)** "Technical Assistance" means consultation and advice given to providers to assist them in maintaining compliance.

~~(48)~~ **(47)** "Toddler" means a child who is 12 months of age to 36 months of age.

(a) "Younger Toddler" means a child who is 12 months of age to 24 months of age.

(b) "Older Toddler" means a child who is 24 months of age to 36 months of age.

~~(49)~~ **(48)** "Unsupervised Access to Children" means contact with children that provides the person opportunity for personal communication or touch when not under the direct supervision of a qualified child care provider or caregiver with supervisory authority.

~~(50)~~ **(49)** "Visitor" means someone who is at the home for a single event, including but not limited to: a repair person, privately contracted professional working with an individual child, or librarian visiting the program. Visitors are not potential employees and are not counted in ratio.



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(51) **(50)** "Volunteer" includes any person who provides labor or services to a certified family child care but is not compensated with employment pay or benefits.

### **OAR 414-360-0250**

#### **RULE TITLE: Program Records**

A provider must maintain the following program records, either in paper or electronic format:

(1) The current day's attendance record for each child care child as defined in OAR 414-360-0400(1). All caregivers must have access to the attendance records to determine which children are in care during their work shift, changes in caregivers, and emergency evacuations. The daily attendance record must include:

- (a) The child's full name; and
- (b) Times recorded as ~~caregivers~~ **children** arrive and depart so that the record shows the ~~caregivers~~ **children** in attendance at any given time.

(2) Daily caregiver attendance records to include:

- (a) The caregiver's name; and
- (b) Times of **recorded as caregivers** arrival arrive and departure depart, **so that the record shows the caregivers in attendance at any given time.**

(3) Written reports of injuries as identified in OAR 414-360-1020(1);

(4) A visitor log to document all adults, excluding persons authorized to drop off and pick up a child, that includes name, relationship to home (e.g., volunteer, vendor, guest, landlord, etc.), and recorded time in and out of the home.

(5) Documentation of the administration of any medication that includes:

- (a) The child's name;
- (b) Medication administered;
- (c) The date and time when medication was administered;
- (d) The dosage or amount of medication administered; and
- (e) Any side effects exhibited by the child.

(6) Written records of suspected child abuse and neglect reports made to the Department of Human Services Child Welfare or law enforcement.

(7) Written records regarding emergency preparedness and fire protection, such as dates of drills.

(8) Current week's menu, with substitutions recorded.

### **OAR 414-360-0520**

#### **RULE TITLE: Program Schedule & Activities**

(1) The provider and any caregivers must give the children's needs first priority, ensuring they get adequate care and attention.



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- (2) Immediate attention shall be given to the emotional and physical needs of the children.
- (3) A provider must develop and follow a written daily schedule.
- (4) The written schedule must include a consistent routine that allows for flexibility to respond to the needs of the individual children and group of children.
- (5) The schedule must:
  - (a) Cover all hours of operation;
  - (b) Include regular activities such as eating, napping, and toileting
  - (c) Provide for a balance of active and quiet activities;
  - (d) Provide individual choice time and guided activities; and
  - (e) Include daily indoor and outdoor activities.
- (6) There must be activities available for children according to their ages, interest, abilities and cultures. Children must be provided with opportunities to choose from a variety of developmentally appropriate activities and experiences which include:
  - (a) Literacy and language;
  - (b) Creative expression through the arts;
  - (c) Dramatic play;
  - (d) Gross motor development;
  - (e) Fine motor development;
  - (f) Music and movement;
  - (g) Opportunities to listen and speak;
  - (h) Concept development; and
  - (i) Sensory play.
- (7) For preschool and toddler age children, a provider must include one or more regularly scheduled rest periods.**
  - (a) Rest periods must include the opportunity for each child to lay down on an individual bed, mat, cot or other sleep equipment. Rest periods may take the form of children sleeping, being awake but inactive, or participating in alternative quiet activities.**
  - (b) If children are unable to sleep after 30 minutes, the provider must provide alternative quiet activities.**
- ~~(7)~~ **(8)** A provider must not provide or allow children preschool-age or younger to have more than 5 hours of screen time per week. School-age children may not be provided or allowed more than 10 hours of screen time per week.
  - (a) Screen time is defined as time spent using electronic devices, including, but not limited to computers, television, tablets, phones and game consoles but does not include assistive or adaptive technology for children with disabilities.
  - (b) Usage times may be extended for physical activity guidance, special events, projects (i.e., coding lessons), distance/online learning, and homework.
  - (c) All media exposure must be developmentally and age appropriate, non-violent, and culturally sensitive.





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- ~~(8)~~ **(9)** If the provider is certified to care for more than 12 children the provider must have a written program of activities for each age group.
- ~~(9)~~ **(10)** A provider must ensure daily outdoor play for each child, regardless of age, provided weather and environmental conditions do not pose a health or safety risk.
- ~~(10)~~ **(11)** In addition to the activities specified in OAR 414-360-0520(6), school-age children must have opportunities to choose from a variety of activities, including:
- (a) Individual or group projects and activities, including homework; and
  - (b) Rest or relaxation.

### **OAR 414-360-0840**

#### **RULE TITLE: Prevention and Management of Hazards**

- (1) A provider must ensure that the following items are inaccessible to children as defined in OAR 414-360-0100(21):
- (a) All toxic or potentially dangerous items;
  - (b) Cleaning, sanitizing and disinfecting supplies and equipment;
  - (c) Poisonous plants;
  - (d) Tobacco products, smokeless or vaping devices;
  - (e) Alcohol;
  - (f) Flammable materials, including matches and lighters, and corrosive materials;
  - (g) Knives and other sharp objects; and
  - (h) Motorized yard or power tools.
- (2) Toxic substances must be stored separately from medication, food service equipment, and food supplies.
- (3) Products must be stored in the original labeled containers. Any smaller containers or solutions mixed by caregivers must be labeled with the contents of the container.
- (4) A provider must take steps to prevent children's exposure to the following, if they exist on the premises:
- (a) Any sources of lead and lead based paint. Painted surfaces must be in good condition, both inside and outside, to avoid exposing children to lead-based paint;
  - (b) Asbestos;
  - (c) Toxic mold; and
  - (d) Other identified toxins and hazards.
- (5) A provider must recognize, address or remove potentially dangerous items and situations, using protective barriers to prevent children's access, if needed. Caregivers must:
- (a) Regularly inspect the indoor and outdoor play areas and equipment for hazards, such as missing parts or broken equipment, sharp edges, splinters, and trash;



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- (b) Ensure open containers of water such as bathtubs, buckets, and mop pails are emptied immediately after use;
  - (c) Ensure sand boxes are free of animal waste and trash; and
  - (d) Ensure that all plastic bags that are large enough to fit over a child's head are inaccessible to children.
- (6) A provider must not permit the use of any tobacco products such as cigarettes, cigars, and smokeless or vaping devices, drug paraphernalia, hemp, marijuana and marijuana infused products on the premises during operating hours or when child care children are present. This includes:
- (a) In the child care home;
  - (b) In the outdoor play area;
  - (c) Within 10 feet of any entrance, exit, or window that opens or any ventilation intake that serves an enclosed area; or
  - (d) In any vehicles where child care children are present or on any field trip.
- (7) All marijuana, marijuana derivatives and associated paraphernalia must be stored through one of the following methods:
- (a) Under a child safety device or child safety lock; or
  - (b) In a locked room.
- (8) No one shall grow or distribute marijuana on the certified family child care premises.
- (9) No one shall consume alcohol on the certified family child care premises during operating hours or when child care children are present.
- (10) No one shall possess, use, or store illegal controlled substances on the certified family child care premises.**
- ~~(10)~~ **(11) Firearms, BB guns, pellet guns and arrows must be kept under lock, such as a key, combination, or biometric lock and stored in an area not used by child care children. A child safety lock or trigger lock does not meet this requirement.**
- (a) Ammunition must be stored and locked separately.
  - (b) Firearms, BB guns, and pellet guns must be kept unloaded.
- ~~(11)~~ **(12) Firearms, BB guns, pellet guns and arrows must be kept under lock, such as a key, combination, or biometric lock and stored in an area not used by child. A provider must prevent access to all pools and other bodies of water such as hot tubs, spas, ponds, creeks, fountains, ornamental ponds, and rain barrels.**
- (a) Pools and hot tubs must be made inaccessible through one of the following methods:
    - (A) A locking, rigid cover;
    - (B) A minimum four foot high fence that begins at ground level, and all gates and doors that allow access are locked;
    - (C) Four foot non-climbable sides with pool ladder removed or inaccessible; or
    - (D) In a locked room or all doors that access the area are locked.
  - (b) For certified family child cares with licensure prior to July 1, 2025, ornamental and natural ponds within the child care outdoor play area must be made inaccessible through one of the following methods:



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- (A) Enclosed by a secure barrier and locked with either a key or a combination lock;
  - (B) A grate on top of a small pond of sufficient strength and rigidity to prevent children from falling into the water. The grate must be locked or secured to prevent removal; or
  - (C) A locked door to the outside area where the pond is located as long as the door is always locked during operating hours and children are not using the outside area where the pond is located.
- (c) For certified family child cares with licensure on or after July 1, 2025, ornamental or natural ponds are prohibited in the child care outdoor play area. Certified family child cares licensed prior to July 1, 2025 are prohibited from adding a new ornamental pond or natural pond to the child care outdoor activity area.
- ~~(12)~~ **(13)** A provider must keep the home free of insects, rodents, and other pests.
- (a) Automatic insecticides dispensers, vaporizers, or fumigants must not be used.
  - (b) Pest control products must not be applied or used when child care children are present. After their application, child care children must not enter the area until indicated by the manufacturer's instructions.
- ~~(13)~~ **(14)** A provider must take precautions to protect children from vehicular traffic:
- (a) Require drop off and pick up only at the curb or at an off-street location protected from traffic; and
  - (b) Assure that any caregiver who supervises drop-off and loading can see and assure that children are clear of the perimeter of all vehicles before any vehicle moves.

**OAR 414-360-0920**

### **RULE TITLE: Outdoor Play Area**

- (1) A provider must provide an outdoor play area that:
  - (a) Children can reach safely; and
  - (b) Is no less than 75 square feet for each child using the space at one time.
- (2) If an outdoor play area is not connected to or in direct control of the provider, such as a public park or school, the provider must have a written plan, approved by CCLD, that describes how caregivers will maintain the safety of the children in care. The written plan must include the following:
  - (a) Distance the alternate outdoor play area is located from the home;
  - (b) Detailed description of how the children, including infants and toddlers, will reach the alternate area;
  - (c) Neighborhood and outdoor play area circumstances, hazards, and risks;
  - (d) Availability of appropriate equipment with fall zones and protective surfacing;
  - (e) Verification that parents have been made aware that their children will be using an alternate outside play area and its location;



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- (f) Safeguards the certified family child care will be taking in order to ensure children are properly supervised while traveling to and from and while using the space;
  - (g) Nature of other activities and persons who may be sharing the space;
  - (h) Availability of restroom facilities; and
  - (i) Ability to obtain assistance if needed when injury or illness occurs.
- (3) A provider must keep outdoor play areas free of litter, animal waste, solid waste and refuse, ditches, or other conditions presenting a potential hazard.
- (4) The outdoor play area must be enclosed by a building, wall or fence that is intended to prevent children from exiting and discourages climbing.
- (a) The wall or fence must begin at ground level, be at least 4 feet high, and maintained in a stable, secure, and upright condition. Certified family child care homes with certification in effect on September 15, 2002, must comply with a barrier at least three feet high until such time as the existing barrier is replaced.
  - (b) The openings in the fence and gates must be no larger than 3½ inches. Homes with certification in effect on June 30, 2025, must comply with no more than 4 inches of open spacing in fences until the existing fence is replaced.
  - (c) Barriers such as plastic contractor's fencing may be used on a temporary basis to prevent children from accessing an immediate hazard. If this type of fencing is used, it must be supported with wood or metal fence posts.
  - (d) Fences must meet applicable local codes.
- (5) A provider must ensure that use zones in which a child falling or exiting from play equipment are:
- (a) A minimum of 6 feet of clearance from walkways, buildings and the external perimeter of equipment;
  - (b) Free of obstacles, other than the equipment itself, that a child could run into or fall on;
  - (c) Arranged to prevent hazards from conflicting activities;
  - (d) Extended at least 6 feet in all directions from the equipment perimeter unless the fall potential in that direction is minimal, such as play equipment with guardrails or barriers or the sides of swings;
  - (e) Allowing for single-axis swings that move forward and backward, to extend a minimum distance of twice the vertical distance from the pivot point to the protective surface to the front and rear of the swing midpoint;
  - (f) Allowing for bucket swings and swings secured by a bar or strap and used by 2-year olds or younger, with the use zone extending at least 6 feet forward and backward from the swing midpoint; and
  - (g) Allowing for multi-axis swings, such as tire swings that move in a circle, to extend 6 feet plus the distance of the height of the top of the swing set to the bottom on the swing's seat in every direction from the midpoint. At least a 30-inch clearance between a fully extended tire swing seat and the support structure is required.
- (6) For all outdoor equipment 18 inches or higher, a provider must always maintain protective surfacing in use zones under and around the equipment. Acceptable materials include wood mulch,



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double shredded bark mulch, shredded or recycled rubber, uniform wood chips, sand, pea gravel, rubber mats or poured in place rubber manufactured for such use. Hog fuel is not permitted.

(a) Rubber mats and poured in place rubber must:

(A) Be tested to ASTM F1292;

(B) Be installed and maintained according to manufacturer's specifications; and

(C) Not have rips, tears, loose seams, or other conditions that may pose a hazard.

(b) Loose-fill materials must:

(A) For equipment less than 4 feet high, have a minimum depth of 6 inches;

(B) For equipment over 4 feet high, have a minimum depth of 9 inches **if using loose-fill material other than shredded/recycled rubber or 6 inches if using shredded/recycled rubber;**

(C) Remain loose at the required depth by replacing, leveling, or raking the material; and

(D) Not be installed over concrete or asphalt.

(7) A provider must securely anchor any non-portable piece of climbing or swinging equipment according to manufacturer's instructions.

(8) A provider must provide a shaded area accessible to children in the outdoor play areas. Shade may be provided by trees, buildings, or shade structures.

(9) Trampolines, other than rebounders, are prohibited.

(a) Rebounders are permitted only when used according to the manufacturer's instructions.

(b) If a trampoline is in the child care activity area, a provider must ensure that child care children cannot access the trampoline.

(10) Inflatable equipment such as: bounce houses, moon walkers, and giant slides, etc., are permitted when used according to manufacturer's instructions. Caregivers must be present and physically positioned to respond if needed.

(11) A provider must provide outdoor gross motor equipment that addresses a variety of skills (for example, climbing, balancing, throwing, catching, pedaling, and steering).

(12) A provider must encourage the use of helmets and have them available for children while using a bicycle, tricycle, balance bike, kick scooter, skateboard, roller or in-line skates.

(13) A provider must comply with Oregon bicycle laws while child care children are riding on public paths or roadways.

### OAR 414-360-1030

#### RULE TITLE: Medications

(1) Before a provider gives a child any prescription or non-prescription medication, including, but not limited to, pain relievers, cough syrup, and nose drops, the provider must:

(a) Have a signed, dated, written authorization by the parent(s) on file (also see OAR 414-360-0230, Parental Permissions);



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- (A) For chronic medical conditions, a certified family child care may obtain permission for 12 months or less with specific instructions including when administration is needed, such as inhalers.
- (B) Parental authorization over the phone is permitted for single dose administration of non-prescription medication. The date and time of the consent must be documented and signed by the parent upon picking up their child.
- (b) Ensure that the original container is labeled with the name of the medication, dosage, and directions for administration and storage.
  - (A) For prescription medication, the label must include the child's name, the date the prescription was filled, the prescribing physician's name, and length of time to give the medication.
  - (B) If parent instructions differ from the container instructions, a certified family child care must have a licensed physician's written instructions for that medication.
  - (C) Medication must not be administered after the expiration date.
  - (D) Any medication provided by the parents must be labeled with the child's name.
- (c) Ensure that cleaned and sanitized medication measuring devices are used when providing medication to a child care child, if applicable.
- (2) A provider must immediately document any medication administered, listing the name of the child, type of medication, date, time, and dosage given, any side effects exhibited by the child, and the signature of the person administering the medication.
- (3) A provider must inform parent(s) daily of all medications administered to their child.
- (4) If medication is provided by the parent, a certified family child care must administer medication only to the child for whom it is intended, and follow the directions on the label.
- (5) A provider must ensure that medication is stored through one of the following methods:
  - (a) Under a child safety device or child safety lock; or
  - (b) In a locked room.
  - (c) Emergency medicine may be placed in an unlocked container that is kept out of reach of children while inside the home.
- (6) Emergency medication may either be inaccessible to children as defined in OAR 414-360-0100(21) or kept with a caregiver.
- (7) A provider must keep medications requiring refrigeration in a separate tightly-covered, leakproof container clearly marked "medication" and inaccessible to children.**
- ~~(7)~~ **(8)** The application of sunscreen and diaper cream does not need to be documented, but a provider must:
  - (a) Have annual written parental authorization;
  - (b) Use only as needed and according to manufacturer's instructions;
  - (c) Inform parents of the type of sunscreen used if provided by the certified family child care;
  - (d) Label the item with the child's name if provided by the parent, and use only for that child; and



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(e) Allow children to apply sunscreen to themselves with direct caregiver supervision and written parental approval.

### **OAR 414-360-1100**

#### **RULE TITLE: Food and Food Service**

- (1) A provider must ensure that all food and beverages are selected, stored, prepared and served in a sanitary manner.
- (2) Children must not be in the kitchen or food preparation areas when foods are being prepared unless a caregiver is present and children are protected from hazards such as hot foods, sharp utensils, etc.
- (3) A provider must ensure that all equipment and utensils used for food service, such as counters, shelves, tables, refrigerators, sinks, drain boards, cutting boards are:
  - (a) Maintained in a clean and sanitary condition; and
  - (b) Durable and in good repair.
- (4) The cleaning and sanitizing of tableware and kitchenware must be accomplished by:
  - (a) A dishwasher that is operated according to manufacturer's instructions; or
  - (b) A three-step manual process as follows:
    - (A) Washing in the first compartment with soap and water;
    - (B) Rinsing in the second compartment with clean water; and
    - (C) Sanitizing in a third compartment large enough to fully immerse the largest equipment and utensils. Submerge all tableware and kitchenware as long as required under the manufacturer's instructions.
- (5) A provider must provide accurate thermometers designed to measure cold storage temperature in refrigerators and freezers. These thermometers must be clearly visible and easy to read. Refrigerators must maintain a temperature of 41°F or below, and freezers must maintain a temperature of 0°F or below.
- (6) Single service items such as paper plates, cups and napkins, and plastic utensils may be used only once and must be discarded after use.
- (7) A provider's food service must include the following:
  - (a) Children in care for more than 3 ½ consecutive hours must be served a meal or snack every 3 ½ hours;
  - (b) Children arriving after school are served a snack;
  - (c) Children scheduled to attend prior to 7:00 a.m. or after 6:30 p.m. are offered breakfast or dinner; and
  - (d) If applicable, children in night care are provided meals and snacks in accordance with OAR 414-360-1500, Night Care).



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- (8) A provider must provide an eating environment that supports safe and sanitary eating and allows socialization to occur.
- (9) If a provider serves family style meals, where food is brought to the table in larger quantities and served to the plates from the table, the certified family child care must have a written plan, approved by CCLD and available for review by the environmental health specialist, which includes at least the following elements:
- (a) Separate serving portions for each table;
  - (b) Serving utensils distinct from eating utensils;
  - (c) Caregiver oversight to ensure sanitary practices; and
  - (d) Provision for serving mildly ill children to prevent the spread of the illness.
- (10) A provider may serve a child food provided by the parent of the child only when:
- (a) Food is brought on a daily basis and is ready to eat, requiring no preparation;
  - (b) All food and beverage containers are labeled with the child's name;
  - (c) Each child's food is monitored daily by a staff member to ensure that the food meets nutritional requirements as specified in OAR 414-360-1100(12); and
  - (d) There must be sufficient food available to supplement any meal or snack that does not meet nutritional requirements as specified in OAR 414-360-1100(12).
- (11) Meals and snacks for children must be:
- (a) Prepared on site;
  - (b) Obtained from an approved source as specified in OAR 333-150-0000; or
  - (c) Provided by parents.
- (12) A provider must ensure that all meals, snacks and beverages follow the current USDA Child and Adult Care Food Program (USDA-CACFP) meal pattern requirements, including portion sizes.
- (13) A provider must develop weekly or monthly written menus that show all foods to be served during that period and make the menus available to parents.
- (a) Substitutions that meet nutritional requirements are permitted but must be recorded and made available to parents.
  - (b) Menus may be rotated if there is a record of which menu was used for each date.
- (14) A provider must select and serve food that is safe and has nutritional value.
- (a) Foods of minimal nutritional value, such as gelatin or desserts, may only be served occasionally and cannot replace nutritious foods.
  - (b) A provider must serve beverages consisting only of water, milk or nutritionally equivalent milk substitute, and fruit or vegetable juice.
    - (A) Fruit and vegetable juice must be pasteurized 100 percent juice.
    - (B) Milk must be Grade A pasteurized and fortified milk.
    - (C) Pasteurized powdered milk and evaporated milk must only be used in cooking.
    - (D) A parent may request that their child not be served milk. A provider must obtain written parental permission to not serve milk to a specific child. This must be at the parent's request, on a case-by-case basis, and not a program-wide policy.





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(c) A provider must not serve foods that are ~~associated with young children's choking incidents~~ **recognized as common choking hazards** to children under 3 years of age. **Prohibited foods include, but are not limited to:** hard candy, gum, nuts, peanuts, popcorn, rice cakes, chips, gel candies, and marshmallows. ~~Children older than 3 years of age may be served these food provided that the foods are cut in such a way as to minimize choking hazards.~~

(d) **The following foods may be served to children under 3 years of age only when prepared in a manner that prevents choking, such as cutting into small pieces, mashing, shredding, or cooking to soften:**

**(A) Whole grapes, cherry tomatoes, or other small round foods;**

**(B) Hot dogs, which must be cut lengthwise and into small pieces;**

**(C) Firm raw vegetables such as carrots or celery; and**

**(D) Large chunks of meat, cheese, or fruit.**

(e) **Children older than 3 years of age may be served these foods provided that the foods are cut in such a way as to minimize choking hazards.**

~~(d)~~ **(f)** Nutrient concentrates and supplements (protein powders, liquid proteins, vitamins, minerals, and other nonfood substances) must not be served to a child without a written statement of parental consent and written instructions from a medical practitioner.

~~(e)~~ **(g)** Special diets, not including vegetarian diets, may only be served to a child with written instructions from a registered dietician or medical practitioner and written parental consent.

(15) Drinking water must be freely available to child care children.