

**Sec. 19a-79-5a. Record keeping**

(a) The operator of a child day care center or group day care home is responsible for maintaining on the licensed premises a current record for each child enrolled. A copy of the record shall be available and provided upon request to the department, the child's parent(s) and the local health director. It shall include, but not necessarily be limited to:

(1) enrollment information and permission forms signed and dated by the parent(s) that shall include, but not necessarily be limited to:

(A) the child's name, address, date of birth and date enrolled;

(B) the residence, business address(es) and telephone number(s) of the parent(s);

(C) the name and telephone number of the child's physician or other primary health care provider;

(D) specific written permission forms signed by the parent(s) authorizing:

(i) the operator to use previously selected emergency policies as described in section 19a-79-3a(d)(4) of the Regulations of Connecticut State Agencies, which shall accompany the child on trips away from the premises;

(ii) the name and telephone number of one responsible person other than the parent(s) who can remove the child from the child day care center or group day care home;

(iii) any activity away from the premises;

(iv) transportation services;

(2) a health record that shall include, but not necessarily be limited to:

(A) date of birth;

(B) except as provided in subsection (b) of this section, a physical examination form signed by a physician, physician assistant or advanced practice registered nurse documenting an examination completed within one (1) year prior to enrollment, and yearly from the date of the initial physical examination thereafter, with a thirty-day allowance, which form shall provide:

(i) a statement about the child's general health and the presence of any known medical or emotional illness or disorder that would currently pose a risk to other children or which would currently affect this child's functional ability to participate safely in a day care setting; and

(ii) a statement that the child has been screened for risk factors for tuberculosis, as defined by the American Academy of Pediatrics, and for those children with identified risk factors, evidence that the child has been screened for latent tuberculosis infection and if infected, whether they have been treated for such infection;

(C) an immunization record that includes the month, day and year of each immunization required for admission as specified in subdivision (1) of subsection (d) of section 19a-79-6a of the Regulations of Connecticut State Agencies and such documentation as is required to confirm age appropriate immunization, immunization in progress or exemption to immunization as defined in subdivision (3) of subsection (d) of section 19a-79-6a of the Regulations of Connecticut State Agencies. The immunization record and said documentation of immunizations shall be submitted to the department upon request;

(D) copies of the health records acceptable to the local education authority and the local director of health, where children of school age are enrolled; and

(E) information regarding disabilities or special health care needs such as, allergies,

special dietary needs, dental problems, hearing or visual impairments, chronic illness, developmental variations or history of contagious disease, and an individual plan of care for a child with special health care needs or disabilities, developed with the child's parent(s) and health care provider and updated, as necessary. Such plan shall include appropriate care of the child in the event of a medical or other emergency and shall be signed by the parent(s) and staff responsible for the care of the child.

(3) Injury, illness and accident reports:

(A) The facility shall produce and maintain on the premises, for a period of not less than two years, a written record of all injuries or accidents that result in an injury to a child or illness of a child enrolled at the facility that occur on or off site as part of the child day care program. The report shall include a description of the injury, illness or accident, the date, time of occurrence and location and any action taken by the facility including, but not limited to, whether the child was transported to a hospital emergency room, doctor's office or other medical facility. The written report for an individual child shall be available to the department and a copy shall be provided to the child's parent(s) no later than the next business day.

(B) The licensee shall notify the department no later than the next business day of:

(i) the death of a child enrolled at the facility, if the child died while at the facility, or at a facility sponsored event; and

(ii) any injury of a child that occurs while the child is at the facility, or at a facility sponsored event, that results in the child's admission to a hospital.

(C) The licensee of a child day care center or group day care home shall report each case occurring at the facility of any disease listed on the commissioner's list of reportable diseases and laboratory findings issued pursuant to section 19a-2a of the Connecticut General Statutes to local health officials and the department in accordance with sections 19a-36-A3 and 19a-36-A4 of the Regulations of Connecticut State Agencies.

(b) The physical examination requirements of section 19a-59-5a (a)(2)(B) shall be waived when such examination is contrary to the religious beliefs and practices of the child or the parent(s) of such child, or when a child has been displaced from their place of residence due to a declared state of emergency by a state or federal official who has the authority to make such declaration, and existing physical examination records are inaccessible for a period not to exceed six (6) months, unless an extension is approved by the department. A statement requesting such waiver shall be submitted and shall be maintained in the child's health record. Such statement shall be signed by the parent(s). The parent(s) shall certify that he or she accepts complete responsibility for the health of the child and that, to the best of the parent's knowledge, the child is in good health.

(Effective July 27, 1993; Amended August 8, 1995; Amended August 29, 1996; Amended March 8, 2004; Amended November 6, 2008)