

NEW YORK STATE
OFFICE OF CHILDREN AND FAMILY SERVICES

**INSTRUCTIONS FOR ENROLLMENT FORM FOR PROVIDER OF LEGALLY-EXEMPT IN-HOME CHILD CARE AND
LEGALLY- EXEMPT FAMILY CHILD CARE**

Child care providers who are not required by New York State law to be licensed or registered to operate a child day care program use this form to enroll with a legally-exempt caregiver enrollment agency to provide subsidized in-home or family child care in a residence. Enrollment as a legally-exempt child care provider is required for families eligible to receive child care assistance.

All legally-exempt informal child care regulations can be found in 18 NYCRR 415.

This enrollment form is used only to apply for Legally-Exempt In-Home and Legally-Exempt Family Child Care.

ENROLLING AS A LEGALLY-EXEMPT CHILD CARE PROVIDER

- You can complete and submit your enrollment form the same day you receive it.
- You can submit your enrollment form in person or by mail.
- All applicable sections of the enrollment form must be complete. Both the provider and the parent/caretaker must complete all applicable sections, review and sign the enrollment form.

HOW TO COMPLETE THE ENROLLMENT FORM

- COMPLETE each section that corresponds with your type of legally-exempt provider in the **Child Care Provider chart on the first page.**
- Please PRINT clearly.
- Attach additional sheets if more space is needed.
- Please use pen. Do not use pencil.

WHERE TO TURN IN YOUR ENROLLMENT FORM

- Submit the completed form to the enrollment agency that serves the location where the child care is being provided.

Child Care Provided	
<i>*The number of children you are allowed to care for is based on the type of child care you provide. This information can be found in 18 NYCRR 415.</i>	
Relative-Only In-Home:	If you are related to all children as a grandparent/great-grandparent, sibling living in a separate residence, an aunt or an uncle, and you provide care in the home of every child in care, you are a <i>relative-only in-home</i> provider. A person related to the child's stepparent does apply as the stepparent is related by marriage to the child. A foster parent does not apply unless the foster parent is also related to the child. <i>Relative-only in-home</i> providers are required to attest to child welfare and criminal history, but will not have to complete a comprehensive background clearance.
In-Home Child Care	If you are <u>not related</u> to all children as a grandparent/great-grandparent, sibling living in a separate residence, an aunt or an uncle, <u>and</u> you provide care in the home of every child in care, you are an <i>in-home child care</i> provider. You and any employee or volunteer must complete a comprehensive background clearance.
Relative-Only Family Child Care	If you are related to all children as a grandparent/great-grandparent, sibling living in a separate residence, an aunt or an uncle, and you provide care in a location other than the home of every child in care, you are a <i>relative-only family child care</i> provider. A person related to the child's stepparent does apply as the stepparent is related by marriage to the child. A foster parent does not apply unless the foster parent is also related to the child. <i>Relative-only family child care</i> providers are required to attest to child welfare and criminal history, but will not have to complete a comprehensive background clearance.
Family Child Care:	If you are <u>not related</u> to all children as a grandparent/great-grandparent, sibling living in a separate residence, an aunt or an uncle, <u>and</u> care is provided at a location other than the home of every child in care, you are a <i>family child care</i> provider. You and, any employee, volunteer, or adult household member must complete a comprehensive background clearance <u>except</u> for a household member related, in any way, to all children in care.

Section 1: Provider Information
<i>Provider Completes Section 1</i>
<p>Complete with your information.</p> <ul style="list-style-type: none"> • Social Security Number: The Social Security number is required when the local social services district issues child care subsidy payments directly to a child care provider. The Social Security number of the provider is optional when the local social services district issues child care subsidy checks to the subsidy recipient (parent/caretaker). If you provide your Social Security number, federal, state, and local agencies may use it for federal reporting, to prevent the duplication of services and to prevent fraud. • Email Address: If you can be reached by email, print your email address. If you provide your email address, the enrollment agency may use it to contact you.
Section 2: Parent/Caretaker Information
<i>Parent/Caretaker Completes Section 2</i>
<p>Complete with your information.</p> <ul style="list-style-type: none"> • Email Address: If you can be reached by email, print your email address. If you provide your email address, the enrollment agency may use it to contact you.

Section 3: Children Receiving Subsidy

Complete with your child's information.

Who will be responsible for administering medication: Check to indicate whether the provider or parent is responsible for the medication administration. Please read below for requirements for medication administration prior to selecting.

Administration of Medication

New York State law restricts the right to administer medication other than over-the-counter topical ointments, sunscreen, and topically applied insect repellent, and emergency treatments as provided for in regulation, to specific medical professionals who are authorized by New York State to administer medication (physician, physician assistant, registered nurse, nurse practitioner, licensed practical nurse, and advanced emergency medical technician). Some individuals are exempt from this requirement based on their relationship to the child, family, or household, and are permitted to administer medications, including the following:

- *The child's parent/caretaker, stepparent, legal custodian, legal guardian, or member of the child's household.*
- *A child care provider employed by the parent/caretaker to provide child care in the child's own home.*
- *Family members who are related within the third degree of consanguinity to the child's parent or stepparent. This includes the child's grandparent, great-grandparent, great-great grandparent, aunt/uncle (and spouse), great-aunt/uncle (and spouse), first cousin (and spouse), and brother/sister.*
- *Child care providers who are trained and authorized by the New York State Office of Children and Family Services (OCFS) under the Health Care for Administration of Medication who have been approved by a qualified health care consultant and who are*
 - *operating in compliance with the New York State regulations, which includes receiving training on medication administration;*
 - *authorized by the child's parent/caretaker, stepparent, legal guardian, or legal custodian to administer medication; and*
 - *administering medication to subsidized children in care.*

*To receive OCFS's authorization to administer medication, a child care provider must be at least 18 years of age and literate in the language in which the parental permissions and health care provider's instructions will be given. Any person who is **not authorized** by New York State law or **not exempt** from this legal requirement may administer **only** over-the-counter topical ointments, sunscreen, and topical insect repellent and emergency treatments as provided for in regulation. Examples of medication they **may not administer** include, but are not limited to: Tylenol, Ritalin, insulin, antibiotics, and ear, eye, or nose drops.*

Section 4: Other Children in Care

Complete with the information of any other children at your child care.

- **Child's First Name:** For any other child also receiving care who is not receiving subsidy, print first name ONLY.
- **How many of the provider's own children are at the child care site during child care hours?** Fill in the number of the provider's own children, as well as their ages, who will be at the child care site.

Note: Any changes in the number of children for which you provide care, the hours you provide care, and the location where you provide care may affect your eligibility as a legally-exempt child care provider and/or require that you become licensed or registered to operate a day care program. Such changes must be reported to the enrollment agency immediately.

Section 5: Provider Formal Child Care History

*Note: A child **day care** program includes licensed or registered day care centers, family day care homes, group family day care homes, small day care centers, and/or school-age child care programs.*

All providers are advised that the enrollment agency will check the New York State Child Care Facility System to determine whether they have ever been denied a child day care license or registration, or had a child day care license or registration suspended, limited, or revoked. If the provider answers YES to having an application for licensure or registration to operate a child day care program denied, revoked, limited, or suspended, you must complete the relevant, corresponding questions in Section 11 and provide true and accurate information regarding the circumstances surrounding the denial, revocation, limitation, or suspension.

Section 6: Relative-Only Provider Child Abuse/Maltreatment and Criminal History Disclosure

If the provider answers **YES** to any of these questions, the provider must provide true and accurate information to the child's parent/caretaker and will be required to provide the same true and accurate information to the enrollment agency regarding the reasons for the removal or loss of parental rights and the nature of the crime including penalties imposed as a result of the conviction and the length of time elapsed since conviction. With regard to indicated reports of child abuse and maltreatment, the provider must provide to the parent/caretaker only a written description of the incident leading to indication including the date of indication and any other relevant information. When the provider answers **YES** to any of these questions, you must complete the relevant, corresponding questions in Section 11 and provide the required true and accurate information.

All relative providers are advised that the local social services district will check its child welfare database for history of any court ordered removal of a child under Family Court Act (FCA) Article 10 and any termination of parental rights. Additionally, the relative providers are advised that the enrollment agency will check the New York State Sex Offender Registry to determine if the relative provider is listed on the registry.

*All providers and other individuals who are required to complete a comprehensive background clearance **do not** answer the questions in this section.*

Section 7: Provider Training Requirements

Provider Preservice Training

Providers are required to complete health and safety training, approved by OCFS (see below) prior to enrollment, unless the provider is a *relative-only in-home* or *relative-only family* child care provider. **Preservice training is only required once and remains valid through reenrollment or other enrollment periods.**

Preservice Training Options

- 1.) **Online "E-Learning" Foundations in Health and Safety:** This training is available online at the following website: www.ecetp.pdp.albany.edu
- 2.) **Classroom training Health and Safety Training for Legally-Exempt Providers:** This training may be offered by local enrollment agencies, the United Federation of Teachers in the New York City area, and the Civil Service Employees Association, Inc. in upstate New York.

Enhanced Rate Training

Providers may be eligible to receive an enhanced rate of reimbursement if they have completed 10 hours of training within the past 12 months in the areas specified in Social Services Law 390-a, and they submit satisfactory documentation of the training to the enrollment agency.

Training specified in Social Services Law 390-a are

- *principles of childhood development, focusing on the developmental stages of the age groups for which the program provides care;*
- *nutrition and health needs of infants and children;*
- *child day care program development;*
- *safety and security procedures;*
- *business record maintenance and management;*
- *child abuse and maltreatment identification and prevention;*
- *statutes and regulations pertaining to child day care;*
- *statutes and regulations pertaining to child abuse and maltreatment; and*
- *for operators, program directors, employees and assistants of family day care homes, group family day care homes and child day care centers, education and information on the identification, diagnosis and prevention of shaken baby syndrome.*

Annual Training

All providers who are **reenrolling** must have completed five hours of training within the past 12 months in the areas specified in Social Services Law 390-a, unless the child care provider is *relative-only in-home* or *relative-only family*. If you are reenrolling, you must provide certificates of completion as proof you have completed your annual five hours of training.

Section 8: Employees, Volunteers, and Family Child Care Household Members

ONLY COMPLETE THIS SECTION IF YOU HAVE EMPLOYEES, VOLUNTEERS, OR HOUSEHOLD MEMBERS AGE 18 OR OLDER.

THIS SECTION DOES NOT APPLY TO HOUSEHOLD MEMBERS FOR IN-HOME CHILD CARE.

List all employees and volunteers.

For *family child care* only, list all persons age 18 and older residing in the home where family child care is provided.

The word **employee** also means staff, and both employee and staff are meant to include all personnel, including directors, temporary personnel, teachers, aides, paraprofessionals, cooks, custodians, administrative staff, and any other person(s) employed by the legally-exempt child care provider.

The word **volunteer** means any unpaid person who is present for the purpose of assisting with the care of children or operation of the child care program, and who has the potential for either unsupervised contact or regular and substantial contact with the children in care.

Family child care **household member** is a person living in the residence where family child care or relative-only family child care is provided.

Section 9: Employee, Volunteers, and Household Members Relevant History

Only complete this section if you are relative-only in-home child care and have employees or volunteers, OR if you are relative-only family child care and have employees, volunteers, or household members over the age of 18 residing in your home.

**If you select yes in this section, you must also complete the relevant, corresponding questions in Section 11 and provide the required true and accurate information.*

Additionally, the provider must advise the employee, volunteer, or household member applicable in this section that the enrollment agency will check the New York State Sex Offender Registry to determine if the employee, volunteer, or household member are listed on the registry.

Section 10: Employee and Volunteer Training Requirements

Employee and Volunteer Preservice Training

All employees and volunteers are required to complete health and safety training, approved by OCFS prior to enrollment, unless the provider is related to all the children in care as a grandparent, great-grandparent, sibling (living in a separate residence), aunt or uncle. **Preservice training is only required once and remains valid through reenrollment or other enrollment periods.** Note that preservice training certificates for all employees and volunteers must be maintained on-site. This documentation will be requested during inspection.

Preservice Training Options

- 3.) **Online “E-Learning” Foundations in Health and Safety:** This training is available online at the following website: www.ecetp.pdp.albany.edu
- 4.) **Classroom training Health and Safety Training for Legally-Exempt Providers:** This training may be offered by local enrollment agencies, the United Federation of Teachers in the New York City area, and the Civil Service Employees Association, Inc. in upstate New York

Employee and Volunteer Annual Training

All employees and volunteers are required to complete an additional five hours of training, approved by OCFS annually, unless the provider is related to all the children in care as a grandparent, great-grandparent, sibling (living in a separate residence), aunt or uncle. Note that providers must maintain copies of training certificates for all staff. This documentation may be requested during inspection.

Section 11: History/Background Acknowledgements

If you selected yes to questions listed in Section 5, 6, and/or 9, more detailed information must be provided for the relevant, corresponding questions this section.

Complete the corresponding section.

Section 12: Provider Certification

It is your responsibility to ensure that all information provided on the form is true and complete. Review the entire form AND the Health and Safety Requirements listed below before signing. By signing, you are certifying that all information is true and complete and that you are agreeing to the Provider Attestations and Agreements in Section 14 and the Parent/Caretaker Attestations and Agreements in Section 15.

Section 13: Parent/Caretaker Certification

It is your responsibility to ensure that all information provided on the form is true and complete. Review the entire form AND the Health and Safety Requirements listed below before signing. By signing, you are certifying that all information is true and complete, and that you are agreeing to the Provider Attestations and Agreements in Section 14 and the Parent/Caretaker Attestations and Agreements in Section 15.

Section 14: Provider Attestations and Agreements

The provider reviews this section, and by signing the enrollment form the provider agrees and understands all conditions outlined in the list. The provider may detach this section of the enrollment form to retain for their own records.

Sections 15: Parent/Caretaker Attestations and Agreements

The parent/caretaker reviews this section, and by signing the enrollment form the parent/caretaker agrees and understands all conditions outlined in the list. The parent/caretaker may detach this section of the enrollment form to retain for their own records.

Health and Safety Requirements

All legally-exempt providers must meet and continue to meet basic health and safety requirements per 18 NYCRR 415. This section is a complete list of all health and safety requirements per regulatory standards. The provider and parent/caretaker inspect the child care location for compliance with these standards together, and by signing the enrollment form they agree that these standards are, and will continue to be, met.

KEEP this section of the instructions to retain for their own records.

Building and Equipment

- There must be two separate and remote ways to escape in an emergency.
- Rooms for children must be well-lighted and well-ventilated. Heat, ventilating, and lighting equipment must be adequate for the protection of the health of the children.
- Adequate and safe water supply and sewage facilities must be provided and comply with state and local laws. Hot and cold running water must be available and accessible at all times.
- Paint and plaster must be in good repair, and there must be no danger of children putting paint or plaster chips in their mouths or of it getting into their food.
- Stairs, railings, porches, decks, and balconies must be in good repair.
- Buildings, systems, and equipment must be kept in good repair and operate as designed.

Fire Protection

- Evacuation drills must be conducted at least monthly with the children during the hours that children are in care. The provider must maintain a written record of the evacuation drills on-site.
- For informal child care providers, there must be a minimum of one operating smoke detector on each floor of the home and a minimum of one operating carbon monoxide detector. Such detectors must be checked regularly to verify proper operation.

Supervision

- Children must never be left unsupervised or in the care of persons who are not authorized to supervise the children.
- For informal child care, the enrolled provider is the sole person authorized to supervise the children.
- Electronic monitoring devices may not be used as a substitute for supervision of children who are awake
- Electronic monitoring devices may be used to transmit images of children in common rooms, hallways, and play areas only.
- Bathrooms and changing areas must remain private and free of electronic monitoring devices.
- The child's caretaker and each employee and volunteer of the provider must be informed if electronic monitoring devices are used.
- For Informal child care providers, sleeping and napping arrangements must be made in writing between the parent and the program. Such arrangements shall include: where the child will nap or sleep; whether the child will nap or sleep on a cot, mat, bed, or a crib; and how the child will be supervised, including whether electronic monitors can be used, and how often the provider is required to check on the child.

Physical Environment and Safety

- Suitable precautions must be taken to eliminate all conditions in areas accessible to children that pose a safety or health hazard
- All potentially hazardous materials, which include, but are not limited to, matches, lighters, medicines, drugs, alcohol, cleaning materials, detergents, aerosol cans, and other poisonous or toxic materials must be
 - inaccessible to children in care and stored in their original containers; and
 - used in a way that they will not contaminate play surfaces, food or food preparation areas, or constitute a hazard to children.
- Barriers must be used to restrict children from unsafe areas. Such areas include, but are not limited to, swimming pools, bodies of water, open drainage ditches, wells, holes, wood and coal burning stoves, fireplaces, and permanently installed gas space heaters.
- Where child care is provided on floors above the first floor, windows on floors above the first floor must be protected by barriers or locking devices to prevent children from falling out of the windows.
- Protective caps, covers, or permanently installed obstructive devices must be used on all electrical outlets that are accessible to young children.
- Firearms and ammunition must be securely stored and inaccessible to children while care is being provided.
- There must be either a working telephone or immediate access to one. Emergency telephone numbers for the fire department, local or State Police or sheriff's department, poison control center, and ambulance service must be posted conspicuously or are readily accessible.
- The use of, or being under the influence of, alcohol or drugs is prohibited while children are in care. Children must not be exposed to persons using drugs or alcohol while in care. The use of, or being under the influence of, a controlled substance is prohibited while children are in care, unless the controlled substance is prescribed by a health care provider, is being taken as directed, and does not interfere with the person's ability to provide child care services.
- Smoking and vaping are prohibited in indoor areas while children are in care or in vehicles while children are being transported. Children must not be exposed to smoke or vapors from vaping in outdoor areas.
- The child care site must be free of vermin.
- Exposure or access to any materials that are developmentally inappropriate for the age of the children in care is prohibited. Such materials include, but are not limited to, sexually and illicitly graphic materials, drug paraphernalia, and other printed or digital materials or content.
- Sleeping arrangements for infants through 12 months of age require that the infant be placed flat on his or her back to sleep, unless medical information from the child's health care provider is presented to the program by the parent that shows that arrangement is inappropriate for that child.
- Cribs, bassinets, and other sleeping areas for infants through 12 months of age must include appropriately sized fitted sheets, and must not have bumper pads, toys, stuffed animals, blankets, pillows, wedges or infant positioners. Wedges or infant positioners will be permitted with medical documentation from the child's health care provider.
- Providers and staff must take steps to prevent a child's exposure to the foods to which the child is allergic.

Transportation

- A child must never be left unattended in any motor vehicle or other form of transportation.
- Each child must board or leave a vehicle from the curb side of the street.
- All children must be secured in child safety seats properly installed per manufacturer's recommendations, or with safety belts, as appropriate for the age of the child in accordance with the requirements of the New York State Vehicle and Traffic Law.
- Drivers transporting children must be 18 years of age or older and hold a current valid license to drive the class of vehicle they are operating.
- Any motor vehicle, other than a public form of transportation, used to transport children must have a valid registration and inspection sticker.
- Children in care may not be transported in a vehicle built to hold more than 10 passengers, including the driver, unless the vehicle: meets the National Highway Traffic Safety Administration definition of a school bus or a multifunction school activity bus; complies with the National Highway Traffic Safety Administration Federal Motor Vehicle Safety Standards applicable to a school bus or multifunction school activity bus; and is inspected per New York State Department of Transportation rules and regulations.

Behavior Management

- Safe, suitable care to children that is supportive of the children's physical, intellectual, emotional, and social well-being must be provided.
- Acceptable techniques and approaches must be used to discipline children and to manage children's behavior.

- The use of corporal punishment is prohibited. The term corporal punishment means punishment inflicted directly on the body including, but not limited to, physical restraint, spanking, biting, shaking, slapping, twisting or squeezing; demanding excessive physical exercise, prolonged lack of movement or motion, or strenuous or bizarre postures; and compelling a child to eat or have in the child's mouth soap, hot spices, irritants or the like.
- Methods of discipline, interaction, or toilet training that frighten, demean, or humiliate children are prohibited.

Health and Infection Control

- The following health requirements must be met:
 - An informal child care provider, employees, and volunteers must be physically fit to provide child care and free of any psychiatric and emotional disorder that would preclude such person from providing care.
 - An informal child care provider, employees and volunteers, and each family child care household member must be free of any communicable disease unless the applicable person's health care provider has indicated that the presence of a communicable disease does not pose a risk to the health and safety of the children in care.
 - For an informal child care provider and employees or volunteers of the informal child care provider, a medical statement may be requested by the enrollment agency when an event or condition reasonably calls into question the ability of such person to provide safe and/or suitable child care and/or if there is reasonable cause to suspect the information provided is inaccurate.
- With the exception of children enrolled in kindergarten or a higher grade in a public or private school, child care shall not be provided to any child unless the provider has been furnished with a statement signed by a physician or other authorized individual who specifies that the child has received age appropriate immunizations in accordance with the requirements of New York Public Health Law. A provider may provide child care to any child not yet immunized provided the child's immunizations are in process and the caretaker gives the program specific appointment dates for required immunizations in accordance with the requirements of New York Public Health Law. Any child who is missing one or more of the required immunizations may be provided care if a physician, licensed to practice medicine in New York State furnishes the program with a signed, completed medical exemption form issued by the New York State Department of Health or New York City Department of Education. The medical exemption must be reissued annually.
- A portable first aid kit must be accessible for emergency treatment. The first aid kit must be stocked to treat a broad range of injuries and situations and restocked as necessary. The first aid kit and any other first aid supplies must be kept in a clean container or cabinet not accessible to children.
- Safety precautions relating to blood and other bodily fluids must be observed.
- All legally-exempt providers must have procedures in place to reduce the risk of infection.

Nutrition

- Each child must receive meals and snacks in accordance with the plan developed jointly by the child care provider and the child's caretaker.
- Perishable food, milk, and formula must be kept refrigerated.
- Heating infant formula, breast milk, and other food items for infants in a microwave oven is prohibited.

Management and Administration

- The child care provider must permit a child's caretaker to have: unlimited and on-demand access to such child; the right to inspect, on demand and at any time during the hours of operation of the home or facility, all parts of such home or facility used for child care or which could present a hazard to the health or safety of a child; unlimited and on-demand access to the provider(s) caring for such child whenever such child is in care and during the normal hours of operation; and, unlimited and on-demand access to written records concerning such child except where access to such records is otherwise restricted by law.
- The indoor and outdoor areas of the home or the facility where children are in care must not be used for any other business or social purpose when the children are present, such that attention is diverted from the care of the children.
- Informal child care providers, employees, and volunteers must be of good character and habits.
- The provider or program must take suitable precautions to prevent
 - serious injury of a child while in care at the program or being transported by the program; and
 - death of a child while in care at the program or being transported by the program.
- The provider or program must immediately notify the enrollment agency and the caretakers of children in care upon learning of the following events involving a child, which occurred while the child was in care at the program or was being transported by the program:
 - Death

- Serious Incident
- Serious Injury
- Serious Condition
- Communicable Disease
- Transportation to a hospital
- The enrollment agency must be notified immediately by a *family* child care provider or a *relative-only family* child care provider of any new person living in the household.
- The provider or program must immediately call 911 for children who require emergency medical care and notify the caretaker.
- The provider or program must submit to the enrollment agency a written attestation and certification stating whether the program is operating under the auspices of another federal, state, tribal, or local government agency which includes the name of the agency.

Emergency Preparedness

- With the exception of in-home child care, each legally-exempt child care provider must have on site a variety of supplies including food, water, first aid, and other safety equipment to allow for the protection of the health and safety of children in the event caretakers are unable to pick up their children due to a local disaster.
- Each legally-exempt child care provider must have a written emergency plan that places primary emphasis on the safe and timely evacuation and relocation of children. The plan must account for the variety of needs of children, including those with disabilities, and contain the following components:
 - How children and adults will be made aware of an emergency
 - A designation of primary and secondary evacuation routes
 - Methods of evacuation, including where children and adults will meet after evacuating the building, and how attendance will be taken
 - A plan for the safe evacuation of children from the premises for each shift of care provided (day, evening, night)
 - The designation of primary and secondary emergency relocation sites to be used in the case of an emergency that prohibits reentry to the child care site, and how the health, safety, and emotional needs of children will be met in the event it becomes necessary to evacuate to another location
 - A strategy for sheltering in place, and how the health, safety, and emotional needs of children will be met in the event it becomes necessary to shelter-in-place
 - Methods of notifying authorities and the children's caretakers
 - Roles of providers, employees and volunteers during an emergency
 - Procedures related to the reunification of children and caretakers
- Two shelter-in-place drills must be conducted annually during which procedures and supplies are reviewed. The children's caretakers must be made aware of the drills in advance.
- A record of each shelter-in-place and evacuation drill conducted, using forms provided by OCFS or equivalents, must be maintained on-site.
- The children's caretakers must be notified of the primary and secondary relocation sites and any changes to the plan in advance. In the case that a provider is directed to a different location by emergency services, the provider must notify the caretakers and the enrollment agency as soon as possible. In the event that relocation is required, a written notice must be placed on the main entry to the child care space unless an immediate threat precludes the provider from doing so.