

**DIRECTOR ORIENTATION REVIEW**

Welcome New Director!!! It is required that all Directors complete a Department-approved director orientation. In order to meet that requirement, you must read the regulations that pertain to your program and complete this review. Submit this review with the application packet. Keep a copy for your records.

You will be contacted by the assigned Child Care Inspection Specialist who will address questions you may have and provide additional information. After this contact you will be issued a Director Orientation certificate to keep with your records.

**Step 1. Review the Regulation Book Provided that pertains to your program** (included)

\_\_ Title 391, Chapter 3, Regulations Governing Licensure of Child Care Centers (CCC 3-001)

\_\_ Title 391, Chapter 4, Regulations Governing Licensure of School Age Only Centers (SAOC 4-001)

\_\_ Title 391, Chapter 5, Regulations Governing Licensure of Preschools (PRE 5-001)

You may also find the regulations electronically at:

<http://dhhs.ne.gov/licensure/pages/child-care-licensing.aspx>

**Step 2. Read each statement and check “yes” or “no”.** If you do not understand a regulation please feel free to check ‘no’. If you check ‘no’, use the space provided or add additional sheets to write down what you don’t understand or any questions you may have. Your statements/questions will help you remember what was unclear and will be helpful later when clarification can be provided by your assigned Child Care Inspection Specialist. The Child Care Inspection Specialist will be in contact with you once complete and accurate information is submitted and reviewed. Being knowledgeable of and how to apply the regulations are keys to being a successful director. All parties want you to be successful!

It is important for you to know that depending on your situation, as the Director; there may be some regulations where compliance IS NOT your direct responsibility. Therefore, it is very important for you to be familiar with all the regulations in order for you to know to whom in your organization you will rely for compliance.

If you are a new director of a facility that has not yet been licensed, we encourage you to utilize the resources we have provided to begin establishing a budget, fee contract, parent handbook as well as employee files, policies, and procedures. There are also many resources on line to help you get started. Enclosed is a listing of several websites directors have found necessary and helpful.

If you are a new director of an existing facility, we encourage you to review your staff files, your parent handbook, your staff policies and procedures, and your children’s records to ensure everything is complete, up to date and meets all licensing requirements. We also encourage you to take a “walk through” of your facility and ensure it meets all the required regulations pertaining to materials, equipment, and physical plant standards.



NAME OF PROGRAM \_\_\_\_\_

NAME OF DIRECTOR \_\_\_\_\_

(PLEASE TYPE OR PRINT)

## DIRECTOR ORIENTATION REVIEW: STATEMENTS OF UNDERSTANDING

(Child Care Center – CCC; School Age Only Center – SAOC; Preschool – Pre) The numbers after the acronyms reference the sections of the regulations to review for understanding.

1. I understand the licensing definitions listed in the regulation book- pages 2 through 6.

CCC 3-002, SAOC 4-002, PRE 5-002

\_\_\_\_ Yes \_\_\_\_ No Questions:

2. I understand licensing requirements and procedures.

CCC 3-003 to 3-004.05E, SAOC 4-003 to 4-004.05E, PRE 5-003 to 5-003 to 5-004.05E

\_\_\_\_ Yes \_\_\_\_ No Questions:

3. I understand notification of changes.

CCC 3-004.06 to 3-004.06C, SAOC 4-004.06 to 4-004.06C, PRE 5-004.06 to 5-004.06C

\_\_\_\_ Yes \_\_\_\_ No Questions:

4. I understand the different types of inspections that can be conducted.

CCC 3-005 to 3-005.09B, SAOC 4-005 to 4-005.09B, PRE 5-005 to 5-005.09A

\_\_\_\_ Yes \_\_\_\_ No Questions:

5. I understand the Licensee and the Director Requirements and how a facility maintains compliance with those requirements.

CCC 3-006.01 to 3-006.02, SAOC 4-006.01 to 4-006.02, PRE 5-006.01 to 5-006.02

\_\_\_\_ Yes \_\_\_\_ No Questions:

6. I understand the required Background Checks and Reports needed for the licensee, myself, all staff, (and household members if applicable), when they need to be conducted/updated, and that a negative result may lead to a disqualification of an individual to work directly with children or be on the premises.

CCC 3-006.03 to 3-006.03F, SAOC 4-006.03 to 4-006.03F, PRE 5-006.03 to 5-006.03F

Yes  No Questions:

7. I understand all the required qualifications needed for staff.

CCC 3-006.04 to 3-006.06, SAOC 4-006.04 to 4-006.06, PRE 5-006.04 to 5-006.06

Yes  No Questions:

8. I understand the required training needed for staff, how often, how many hours, and the needed documentation.

CCC 3-006.08 to 3-006.10E, SAOC 4-006.07 to 4-006.09E, PRE 5-006.05 to 5-006.09D

Yes  No Questions:

9. I understand the Employee Records Requirements.

CCC 3-006.11 to 3-006.11C, SAOC 4-006.10 to 4-006.10C, PRE 5-006.10 to 5-006.10C

Yes  No Questions:

10. I understand what a Child's Enrollment Record is required to include and that receipts of the Department of Health and Human Services (DHHS) Parent Information Brochures are obtained and kept on file.

CCC 3-006.12 to 3-006.13, SAOC 4-006.11 to 4-006.12, PRE 5-006.11 to 5-006.12

Yes  No Questions:

11. I understand that all parents and staff receive a copy of the required facility's description of services, required policies and procedures, and a signed and dated receipt is obtained and kept on file.

CCC 3-006.14 to 3-006.14B, SAOC 4-006.13 to 4-006.13B, PRE 5-006.13 to 5-006.13B

Yes  No Questions:

12. I understand the license capacity, staff requirements, and how to calculate staff to child ratio.

CCC 3-006.15 to 3-006.15C, SAOC 4-006.14 to 4-006.14C, PRE 5-006.14 to 5-006.14C

\_\_\_\_ Yes \_\_\_\_ No Questions:

13. I understand the requirements of reporting a diagnosed Communicable Disease.

CCC 3-006.16 to 3-006.17, SAOC 4-006.15 to 4-006.15C, PRE 5-006.15 to 5-006.15C

\_\_\_\_ Yes \_\_\_\_ No Questions:

14. I have a written illness exclusion policy for children and it is available to parents.

CCC 3-006.17. SAOC 4-006.16, PRE 4-006.16

\_\_\_\_ Yes \_\_\_\_ No Questions:

15. I understand the children's immunization requirements.

CCC 3-006.18 to 3-006.18A. SAOC 4-006.17, PRE 5-006.17 to 5-006.17A

\_\_\_\_ Yes \_\_\_\_ No Questions:

16. I understand required supervision of children on and off the premises.

CCC 3-006.19 to 3-006.19B, SAOC 4-006.18 to 4-006.18B, PRE 5-006.18 to 5-006.18A

\_\_\_\_ Yes \_\_\_\_ No Questions:

17. I understand all regulations pertaining to Discipline, Physical Holds, Restraints, and what children must not be exposed to.

CCC 3-006.20 to 3-006.21, SAOC 4-006.19 to 4-006.20, PRE 5-006.19 to 5-006.20

\_\_\_\_ Yes \_\_\_\_ No Questions:

18. I understand what needs to be included in the written Child Development Program description available to parents.

CCC 3-006.22, SAOC 4-006.21, PRE 5-006.21

Yes  No Questions:

19. I understand what toys, equipment, and materials are required.

CCC 3-006.22A, SAOC 4-006.21A, PRE 5.00621A

Yes  No Questions:

20. If children will be napping or resting, I understand what beds, cribs, and sleeping surfaces are required.

CCC 3-006.22B, SAOC 4-006.21B, PRE No Regulation

Yes  Does not apply to this program  No Questions:

21. IF THERE ARE INFANTS AND TODDLERS IN CARE, I understand the requirements for Infant/Toddler Care, Infant Care Rooms, and Diapering and Toileting.

CCC 3-006.23, No SAOC or PRE regulation

Yes  Does not apply to this program  No Questions:

22. IF OVERNIGHT CARE IS PROVIDED, I understand the overnight care requirements.

CCC 3-006.24, No SAOC or PRE regulation

Yes  Does not apply to this program  No Questions:

23. I understand the requirements for wading and swimming activities, permissions required for these activities, and staff to child ratio requirements.

CCC 3-006.25 to 3-006.25H, SAOC 4-006.22 to 4-006.22H, PRE 5-006.22 to 5-006.22H

Yes  Does not apply to this program  No Questions:

24. I understand the requirements for transportation of children.

CCC 3-006.26, SAOC 4-006.23, PRE 5-006.23

Yes  Does not apply to this program  No Questions:

24a. I understand the transportation training requirements for all staff transporting children.

CCC 3-006.10C, SAOC 4-006.09C, PRE 5-006.09B

Yes  Does not apply to this program  No Questions:

25. I understand the requirements for medication administration.

CCC 3-006.27 to 3-006.27H, SAOC 4-006.24 to 4-006.24I, 5-006.24 to 5-006.24H

Yes  Does not apply to this program  No Questions:

26. I understand the food service and food safety requirements.

CCC 3-006.28 to 3-006.29, 4-006.25 to 4-006.26, No PRE regulation

Yes  Does not apply to this program  No Questions:

26a. I understand the nutrition and food safety and food service training requirements.

CCC 3-006.10B, SAOC 4-006.09B, No PRE regulation

Yes  Does not apply to this program  No Questions:

27. I understand the emergency preparedness requirements and the first aid kit requirements.

CCC 3-006.30 to 3-006.30F, SAOC 4-006.27 to 4-006.27F, PRE 5-006.25 to 5-006.25F

Yes  No Questions:

28. I understand the environmental services and safety requirements.

CCC 3-006.31 to 3-006.32E, SAOC 4-006.28 to 4-006.29E, PRE 5-006.26 to 5-006.27E

\_\_\_\_ Yes    \_\_\_\_ No    Questions:

29. I understand the physical plant standards.

CCC 3-007 to 3-007.06, SAOC 4-007 to 4-007.06, PRE 5-007 to 5-007.05

\_\_\_\_ Yes    \_\_\_\_ No    Questions:

30. I understand grounds or reasons for denial and disciplinary actions that can be taken against a license.

CCC 3-008.01 to 3-008.05, 4-008 to 4-008.05, PRE 5-008 to 5-008.05

\_\_\_\_ Yes    \_\_\_\_ No    Questions:

Any additional questions:

**Director's Statement:**

**I certify that all information I provided to the Department of Health and Human Services, Division of Public Health is, to the best of my knowledge true and correct.**

\_\_\_\_\_  
**Signature of Director**

\_\_\_\_\_  
**Date**