



Executive Order 25-15  
Implementation Report:  
**Child Care Licensing  
Rule Review**

*September 1, 2025*

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# BACKGROUND AND EXECUTIVE SUMMARY

In January 2025, Governor Mike Kehoe issued Executive Order 25-15 directing the Missouri Department of Elementary and Secondary Education (DESE) to review and revise the state's child care licensing rules. The goal is twofold:

- Cut unnecessary burdensome, duplicative, or outdated rules by at least 10% without compromising the health and safety of children.
- Make licensing more practical and accessible to expand the availability of licensed child care and reduce reliance on unlicensed care.

DESE is well underway with conducting the most comprehensive child care rule review in Missouri's history.

## How We Engaged Stakeholders

DESE ensured broad and meaningful input by:

- Hosting 14 statewide listening sessions while simultaneously accepting written comments.
- Forming a 35-member stakeholder task force representing providers, families, and experts.
- Collecting feedback through a plain language survey completed by nearly 1,000 stakeholders.
- Analyzing rules, inspection data, and real-life provider experiences.

## What We Learned

Stakeholders told us that child care rules should:

- Not compromise the health and safety of children.
- Be clear, direct, and written in plain language.
- Be organized into small, manageable sections.
- Focus on essential requirements, without overwhelming lists.
- Reflect real-world child care practices.

- Explain why rules exist to improve understanding.
- Remove duplicative or outdated requirements.

## Key Findings

From this work, DESE identified:

- Over 10% of rules for family homes, group homes, and centers (177 total) are outdated, duplicative, or unnecessary and should be removed.
- More than 50% of rules are the same across licensed family homes, group homes, and centers. Based on this, DESE plans to:
  - Combine these rules into a single, unified book that details the general requirements that apply to all and distinguish rules that only apply to specific provider types.
  - Create a separate set of rules for school-age only programs, which operate differently.

## What's Next

The next phase of this unprecedented effort to revise the state's child care licensing rules is the formal rule rewrite process.

- The revision process has already started and is expected to take about two years to complete.
- DESE will explore alternative pathways to speed up the rulemaking process where legally possible.
- As new rules are drafted, DESE will:
  - Use tested plain-language approaches.
  - Set clear timelines and engage stakeholders.
  - Provide training and updated materials for providers and families.
  - Monitor rules long-term to ensure clarity and relevance.

This review lays the groundwork for a modern, efficient child care licensing system – one that reduces red tape, supports providers, and puts children's health, safety, and development first.

# Missouri's Regulations – History and Current State

Missouri has regulated child care for more than 70 years. Over time, responsibility for enforcing child care laws and rules has shifted across state agencies based on evolving priorities and structures within state government. Initially, the Department of Health's Bureau of Child Care Safety and Licensure was responsible for enforcement. The function later moved to the Department of Social Services, then back to the Department of Health, and subsequently to the Department of Health and Senior Services under the Section for Child Care Regulation.

In 2021, oversight of child care regulation and enforcement was transferred to DESE, where it remains today, under the Office of Childhood's Child Care Compliance and Regulations sections.

Several major legal and regulatory changes have shaped Missouri's child care system over the years:

- **1955:** Missouri enacted a child care law requiring licensure for anyone caring for more than four unrelated children.
- **1982:** A major rule revision introduced “social service” based changes, including the establishment of director qualification requirements.
- **1991:** Another significant revision introduced many of the rules still in effect today. New components included the classification of group homes, a 12-clock-hour annual training requirement, and compliance with the newly enacted Americans with Disabilities Act (ADA).
- **1993:** Missouri law authorized the inspection of religious license-exempt programs and introduced the concept of statutory variances. Regulatory authority moved back to the Department of Health, with an increased focus on health and sanitation.
- **1998:** Sanitation inspections became mandatory for licensed family child care homes.
- **1999:** Fire safety rules were revised to align with the national Life Safety Code standard.
- **2001:** Criminal record checks were added as a staff requirement, and the Family Care Safety Registry was established by statute.
- **2011:** New rules were adopted covering safe sleep practices (“back to sleep”), first aid and CPR certification, emergency preparedness planning, and tuberculosis risk assessment.
- **2015:** Senate Bill 341 required updates to safe sleep rules based on recommendations from the American Academy of Pediatrics. Providers were also required to notify parents, upon request, if any enrolled children had immunization exemptions.

- **2018:** Missouri implemented federally required comprehensive background screenings for staff and volunteers. A 30-day grace period for immunization records was also added for children experiencing homelessness or in foster care.
- **2019:** House Bill 397 (“Nathan’s Law”) significantly changed licensing thresholds. Licensure became required for programs caring for more than six children or more than three children under age two, including related children (excluding school-age children living in the home). Several new rules were also adopted this year.
- **2020:** The Section for Child Care Regulation began issuing non-expiring licenses.
- **2022:** Senate Bill 683 updated licensing provisions for family child care homes, allowing providers to care for two additional related children age five or older under certain legal relationships (e.g., court-appointed guardianship or legal custody)
- **2024:** Rules were updated to allow 16- and 17-year-old Junior Aides to count in staff-to-child ratios in centers. Group size limits were added, and school-age-only programs were exempted from fire safety, sanitation, and building compliance requirements.

While each of these changes contributed to stronger health and safety protections for children in care, the piecemeal development of regulations across decades and agencies has introduced redundancy, inconsistency, and structural complexity. These changes occurred over a long period during which social norms, regulatory philosophies, and our understanding of early childhood development evolved significantly. As a result, some concepts and terminology may conflict with contemporary best practices in rule formation, making the current regulations difficult for providers to interpret and apply in everyday practice.

## Regulatory Reform: Executive Order 25-15

On January 28, 2025, Governor Mike Kehoe signed Executive Order 25-15 to improve Missouri’s child care licensing system while maintaining essential health and safety standards. The Order recognizes that accessible, affordable, and high-quality child care is critical for Missouri’s families, communities, and economy. It also acknowledges that current and prospective child care providers have described the regulatory system as complex and burdensome, which can discourage people from entering or staying in the field.

Executive Order 25-15 directed DESE to identify, evaluate, and carry out reforms that will:

- Reduce unnecessary regulatory burdens while keeping children safe and healthy.
- Eliminate or update rules that are duplicative, outdated, or unnecessarily burdensome, with the goal of reducing child care licensing requirements by at least 10%.



- Improve the readability and usability of child care licensing regulations so providers can navigate requirements more easily.
- Gather input from a wide range of stakeholders, including rural and urban providers, child care home and facility providers, child care staff, advocacy organizations, legislators, and families.

The Order directed DESE's Office of Childhood to submit a comprehensive report to the Governor by September 1, 2025, detailing findings, planned or completed actions, and proposed changes to Missouri's child care licensing regulations because of this Order.

# Methodology for Rule Review: What We Did

## Maximize Efficiency through Existing Resources

DESE was already working with the National Association for Regulatory Administration (NARA) to determine which child care licensing rules posed the greatest risk to children if violated when the Order was signed. As part of this work, a survey was conducted asking stakeholders to assign a numerical score, or "weight," to each rule on a scale from 1 to 10, where 1 indicated no or low risk, and 10 indicated certain risk. This survey gathered feedback from over 500 stakeholders, allowing DESE to identify which rules the stakeholder community viewed as most and least serious.

To ensure the survey was accessible to all participants, each rule was presented in plain language. This approach not only supported informed stakeholder participation but also demonstrated the benefits of using clear, direct language in regulatory materials.

DESE was able to apply the risk ratings to the rule revision process, identifying rules that could be considered for removal due to low perceived risk, and rules that should be retained because of their high importance to child safety. This also provided valuable insights into how plain language could be used to clarify rules and support compliance.

Additionally, a new method called Thematic Content Analysis was applied to study how regulators were citing rules that require child care centers and homes to be "safe and suitable." This process involved extracting violation descriptions from real inspection citations, sorting them into different themes, and measuring how often each theme appeared. Building on this foundation, DESE expanded and refined the technique to capture and analyze all stakeholder feedback gathered during the rule review process, whether shared orally during listening sessions or submitted in writing.

This approach allowed DESE to maximize efficiency by repurposing existing work and tools, ensuring the rule revision process was informed by data, grounded in stakeholder perspectives, and aligned with the goals of improving the clarity and effectiveness of Missouri's child care licensing system.

## Establishing a Stakeholder Task Force

In accordance with Executive Order 25-15, DESE established a stakeholder task force to ensure deeper dialogue, sustained input, and practical insight from the child care community. This decision was based on early assumptions drawn from similar orders at other agencies and a recognition that stakeholder engagement would be more meaningful with an interactive working group.

The task force functioned as a representative body capable of holding detailed discussions that could not occur through surveys or listening sessions alone. Members were able to review early drafts, test tools such as the statewide survey, and debate the structure, language, and impact of specific rules. Task force members also helped promote participation in listening sessions and encouraged others in their communities to provide input.

The task force provided a unique space to review feedback gathered through other methods, consider opposing viewpoints, and surface nuanced concerns - such as the separation of school-age and younger children, safe sleep consolidation, and return-to-care guidance. The open discussion clarified key areas of agreement and divergence, helping to guide the rule revision process.

Task force members were selected based on their prior engagement with DESE and their willingness to provide honest, constructive input. Many were known to DESE staff through prior work and were identified as trusted voices within the field. In some cases, specific individuals were invited to ensure that a range of perspectives would be represented.

The final task force consisted of 35 confirmed participants representing a diverse cross-section of Missouri's child care environment, including:

- Center-based, group home, and family home child care providers (urban, rural, and mixed regions)
- Parents of children enrolled in licensed programs
- Child care staff members, including Head Start and classroom teachers
- Child welfare and early childhood advocacy organizations (e.g., Child Care Aware of Missouri, Kids Win Missouri, Missouri Afterschool Network, United WE)
- State legislators and elected officials with a known focus on child care
- Representatives from school-age programs

DESE hopes to maintain the task force throughout the actual rule revision process given their experience with the rules and the work to date. Members who wish to remain engaged will have opportunities to review draft rule language before it is finalized, ensuring that the voices that helped shape this process continue to be heard as the rule revision process moves forward.



## Listening Sessions and Written Feedback

DESE gathered input from people across the state through listening sessions and written comments to understand how licensing rules work in practice. Between March and April 2025, DESE hosted 14 listening sessions, both in-person and virtual, across diverse regions and times to ensure a wide range of voices could be heard. Providers, parents, and other stakeholders shared firsthand experiences with current rules, offering suggestions about what should be kept, clarified, or changed. Stakeholders could also provide written comments during these sessions or submit them directly to DESE. Some comments focused on specific rules, while others raised broader concerns about how the system operates.

Together, the listening sessions and written comments provided a strong foundation for understanding how rules are experienced in real settings and where stakeholders believe improvements are needed. To convert this feedback into practical, real-world actions, refined thematic content analysis was used to group open feedback into themes and link them to specific licensing rules. High-frequency terms, recurring concerns, and shared challenges were flagged, allowing DESE to distinguish widely shared issues from one-off suggestions.

This approach ensured that feedback directly informed Missouri's rule revision efforts, focusing on clarity, reducing unnecessary burden, and preserving what works to support a system that is clear, usable, and centered on children's safety and provider capacity.

## The Rule Revision Survey

To build on what was learned from listening sessions and written feedback, a statewide online survey was conducted from May 19 to June 20, 2025. The survey was designed to gather informed input from stakeholders across Missouri's child care system to guide the rule revision process.

This was not a general satisfaction survey. It focused on how stakeholders interpret rule language, which terms create confusion, and whether alternative formats and wording would improve understanding. Questions covered terminology, rule clarity, formatting, required forms, and operational challenges, and also included examples of rewritten rules to test for clearer, more practical language.

The survey received 992 responses from a wide range of stakeholders, including child care center directors, group home providers, family child care home providers, staff, parents, state licensing staff, and advocates. These statistically significant results told us that the feedback obtained was representative of all stakeholder perspectives across Missouri.

Responses were analyzed by location using the methodology the federal government uses to identify urban, suburban, small towns, and rural areas, ensuring that feedback reflected the needs of providers in all parts of the state.

## What We Learned

When analyzing all this feedback collectively, we found several clear, recurring messages that stood out above the rest. Providers, parents, and stakeholders were consistent in identifying which rules support safety, which create unnecessary burden, and how Missouri's child care regulations can be clearer, more practical, and easier to follow without compromising the well-being of children in care:

- Stakeholders support safe sleep and health practices but requested updates to align with current pediatric guidance and family preferences.
- Illness-related rules could benefit from clearer, plain-language guidance to support consistent decisions about sending children home and allowing them to return to care.
- Providers emphasized the need for practical flexibility in staff-to-child ratios during short transitions, like helping a child or answering the door, while still ensuring proper supervision and safety.
- Training requirements are seen as confusing and duplicative, with providers requesting simplified, consolidated expectations that maintain quality while fitting the realities of small programs.
- Documentation and recordkeeping requirements are often excessive, duplicative, and unclear, leading providers to request shorter, consolidated forms, clear lists of required documents, and the ability to use fillable, digital formats.
- Requirements around crib spacing, square footage, indoor temperature, and lighting standards often feel outdated or impractical, with requests for updates that prioritize safe, practical operations.
- Providers support outdoor play rules focused on safety but seek clearer guidance on acceptable surfaces, fencing, and shared space without overly prescriptive requirements.
- Stakeholders support background checks for safety but reported delays, duplicative processes, and inconsistent guidance, recommending a streamlined, centralized system to reduce burden while maintaining safety.
- Stakeholders overwhelmingly favor plain, direct language in rules and the removal of vague terms like “immediately” and “readily accessible.” They expressed that expectations should be interpreted based on context and reasonable safety practices, preferring language such as “as soon as possible once children are safe” rather than rigid deadlines like “within 60 seconds,” allowing providers to make practical decisions while maintaining safety.

- Feedback on director qualifications showed that while many believe the current requirements balance preparation and flexibility, a significant number find them too restrictive and prefer prioritizing hands-on experience and practical training over formal education.
- Many supported creating specific, flexible rules for substitute staff that maintain safety standards while recognizing the different role and frequency of substitutes.
- Respondents were split on whether Missouri should combine its two separate rulebooks for child care centers and family child care homes into one document; many indicated openness if the combined format improves clarity and usability.
- Many providers participate in the federal Child and Adult Care Food Program (CACFP), which reimburses meals that meet specific nutritional standards. Stakeholders supported aligning Missouri's nutrition rules with CACFP guidelines to reduce confusion and duplicative requirements.
- Providers favored allowing parent-requested milk substitutes, such as oat or soy milk, without requiring formal medical documentation, to accommodate dietary and cultural preferences while maintaining nutrition.
- Stakeholders broadly supported allowing sound machines during infant sleep as long as caregivers can still see and hear the infant, emphasizing the need for clear guidance on safe use.
- Feedback on DESE forms highlighted a need to reduce duplicating the same information on multiple forms, allow digital completion and submission, and clarify form instructions to support ease of use.

Overall, we learned Missouri should write child care rules that:

- Use plain, direct language accessible to all.
- Break down complex rules into organized, smaller parts.
- Provide specificity where needed while avoiding overwhelming lists.
- Align rules with real-world practice in child care settings.
- Use scannable formats (bullets, lists) to support compliance.
- Clarify the “why” behind rules to build understanding.
- Eliminate redundancy while maintaining essential safety requirements.

# Recommended Changes

While reducing licensing rules is a part of the executive order, we heard from stakeholders that their top priority is making the rules easier to read, understand, and use.

## Readability and Usability of Rules

- **Expedite Licensing Process:** Provide better support to child care providers making it easier to achieve licensure without compromising the health and safety of children.
- **Simplify language:** Rules will be rewritten using plain language. Technical or legal terms will be defined clearly or replaced with simple, everyday words when possible.
- **Improve Organization and Layout:** Regulations will be organized in a way that follows logical flow – grouped by topic or task (e.g., physical environment, safe sleep, documentation).
- **Consolidate rulebooks:** During the stakeholder engagement process, opinions were divided on whether to combine or separate the rulebooks for licensed family homes, group homes, and centers. However, this regulatory review found that over 50% of these requirements across program types are the same. Based on this finding, DESE is tentatively planning to consolidate these rules into a single rulebook. A separate rulebook will be developed for licensed programs that serve only school-age children, as these programs have unique operational characteristics and regulatory needs.

## Reduction in Rules

As noted above, Executive Order 25-15 set a goal of reducing child care licensing requirements by at least 10%. Under the current rulebooks, family child care homes are subject to 681 requirements and child care centers are subject to 805 requirements. Using information obtained from the listening sessions, written comments, and rule revision survey, and by working closely with the stakeholder task force, DESE was able to identify rules that could be removed without compromising children's health and safety. **Seventy-nine** rules in the family child care home rulebook were flagged as duplicative, outdated, or unnecessary. **Ninety-eight** rules in the child care center rulebook were flagged as duplicative, outdated, or unnecessary. If these rules were to be removed, the family child care home requirements would be reduced by **11.60%** and the child care center requirements would be reduced by **12.17%**.

Requirements flagged for removal include:

- Duplicative policies and procedures that appear in multiple rules or are already covered under broader or more current provisions.

- Fire safety and emergency preparedness rules that overlap across sections or are already addressed through other regulatory requirements.
- Background screening and medical documentation requirements that are repeated in other, more centralized rules.
- Rules requiring providers to maintain or submit identical documentation - such as equipment lists, sample forms, menus, or program descriptions - in more than one place.
- Outdated or unnecessary provisions, including references to repealed statutes, requirements that no longer reflect current best practices, or practices that are no longer cited in inspections.
- Hard-to-enforce expectations, such as requiring providers to describe child care practices and concepts.
- Prescriptive requirements for school-age programming, including mandatory quiet time or study spaces, that are outdated or rarely cited.
- Rules that impose administrative burdens without contributing to child safety, such as requiring job descriptions for all staff or specific posting locations for emergency contacts.

# Revising the Rules – What Happens Next?

## Foundations for Rule Revision

DESE has followed a structured methodology rooted in national best practice to prepare for the rule revision process. The foundation for this process is the Rule Formulation Process outlined in the *NARA Licensing Curriculum*, which emphasizes legal authority, stakeholder participation, evidence-informed decision-making, and transparency. Missouri's approach has not only met these standards, it has also operationalized them through applied research, collaborative engagement, and an intentional focus on clarity and usability.

Several core elements of the rule formulation process have already been completed or significantly advanced:

- **Legal Authority:** DESE has clear authority to promulgate child care licensing regulations under Missouri statutes. Throughout this process, DESE has coordinated closely with legal counsel to ensure alignment with statutory requirements and to safeguard the integrity of the final regulations.

- **Research and Analysis:** Missouri undertook one of the most comprehensive regulatory review efforts in the state’s child care history. This included historical rule tracking, citation pattern analysis, and the use of a stakeholder-informed risk-weighting tool. The process was further enhanced by the *Missouri Child Care Licensing Alignment Study* (2023), which compared Missouri’s licensing standards with those of surrounding states and with the *Stepping Stones to Caring for Our Children* national benchmarks. The study identified 29 regulatory categories needing improvement and provided actionable recommendations to strengthen child protections while reducing ambiguity and administrative burden.
- **Stakeholder Engagement:** DESE engaged the stakeholder community through surveys, listening sessions, and a 35-member stakeholder task force. These mechanisms allowed providers, families, advocates, and other key stakeholders to share feedback on specific rule content and identify structural and operational barriers to compliance.
- **Drafting and Refinement:** Plain language versions of licensing rules were tested during the statewide survey to evaluate clarity and usability. This real-time testing provided valuable insights into how changes in rule structure and terminology impact provider understanding.

With this groundwork in place, DESE can now move into the formal rule development phase, following a clear and deliberate process based on NARA’s recommended structure.

## Timeline for Action

While specific dates will be determined as the process unfolds, DESE recognizes that the full rule revision effort will extend beyond one year, unless directed by the Governor to expedite the process. The estimated timeframes below reflect the complexity of the work, Missouri’s rulemaking requirements - including legal review, public comment, and hearings - and the need for stakeholder engagement at every stage.

### 1. Internal Review and Prioritization of Rules for Revision

#### **Estimated Duration: 1–2 months**

DESE will identify which rules to address first based on risk, redundancy, and alignment with best practices.

### 2. Preliminary Drafting of Revised Rules

#### **Estimated Duration: 4–6 months**

A single drafting specialist will prepare initial rule revisions to ensure consistency in tone and format. This “one voice” approach reduces confusion and improves readability.

### 3. Stakeholder Review of Draft Language

#### **Estimated Duration: 1–2 months**

The stakeholder task force will be re-engaged to review draft rule content and provide detailed feedback. Adjustments to task force membership may be made to ensure full representation.



#### 4. Revisions Based on Stakeholder Feedback

##### Estimated Duration: 1–2 months

DESE will revise rule drafts in response to stakeholder input, ensuring practicality and clarity.

#### 5. Formal Internal Review and Approval Processes

##### Estimated Duration: 1–2 months

Draft rules will undergo internal legal and policy review prior to publication.

#### 6. Public Notice, Comment, Hearings, and Finalization

##### Estimated Duration: 8–10 months

In accordance with Missouri’s Administrative Procedures Act (Chapter 536), DESE will publish proposed rules for public comment, analyze all feedback, conduct public hearings as needed, and make final revisions prior to submission for adoption.

## Ongoing Review and Continuous Improvement

Improving Missouri’s child care licensing system is not a one-time event. DESE will implement a structured, ongoing review process to ensure that licensing rules remain relevant, clear, and responsive to evolving needs.

Key components of this process include:

- **Scheduled Rule Review Cycles:** Every five years, DESE will formally review all child care licensing rules, using a mix of research and real-world input to identify provisions that are outdated or in need of revision.
- **Stakeholder Feedback Channels:** DESE will maintain open and accessible channels for providers, parents, and advocates to submit concerns or suggestions. Feedback may be collected through online forms, periodic regional sessions, or targeted surveys.
- **Variance and Noncompliance Data Review:** DESE will analyze variance requests and noncompliance data on an annual basis to identify recurring issues and assess whether certain rules are unclear, outdated, or overly burdensome.
- **Task Force Engagement:** The existing stakeholder task force will continue as an advisory group to support ongoing review efforts. This continuity will allow the group’s institutional knowledge to inform future changes.
- **Pre-Review Listening Sessions:** In the year prior to each scheduled review cycle, DESE will hold focused listening sessions to gather direct feedback on rule implementation and effectiveness.
- **Post-Implementation Monitoring:** After new rules are adopted, DESE will monitor inspection results and compliance trends to assess whether the revised rules are achieving their intended goals.

Through these mechanisms, DESE will maintain a responsive and data-driven approach to child care regulation that evolves alongside the needs of providers, families, and children.

## Training, Communication, and Support Materials

To ensure a smooth transition from old to new regulations, DESE is developing a statewide rollout plan that will include training, reference materials, and a centralized communication strategy.

### Orientation and Training for Providers

Providers will have access to multiple formats of training, including:

- Live and recorded webinars
- Self-paced online learning modules
- In-person regional training sessions (as needed)

### Training for Licensing Staff

Internal licensing staff will receive updated training and tools to ensure consistency in interpretation and enforcement. This will include:

- Internal training workshops
- Updated desk guides and field reference tools

### Updated Reference Materials and Forms

DESE will revise and distribute all relevant forms and support documents, including:

- Licensing checklists
- Sample compliance policies
- Updated guidance for documentation and recordkeeping

### Website Updates

A dedicated webpage will serve as the central hub for revised rules, training resources, FAQs, and compliance materials. This will ensure that providers and staff can easily access up-to-date information.

### Ongoing Communication

Throughout the rollout period, DESE will maintain consistent communication with providers and stakeholders through:

- Email announcements
- Newsletters
- Updates shared via advocacy and partner organizations

This coordinated effort will help ensure that all stakeholders understand the changes, know how to comply, and feel supported throughout the transition.

# CONCLUSION



Missouri is rolling up its sleeves to make child care rules simpler, safer, and stronger. We're cutting through the clutter so providers can focus on what matters the most - caring for children. Executive Order 25-15 is about more than rules on paper; it's about giving families peace of mind, opening doors to child care, and making sure every child has the chance to thrive. In 2027, we'll have a child care system that works for everybody - clear rules, safe spaces, and bright futures.

# APPENDIX: Recommended Rules for Removal

## Licensing Rules for Family Child Care Homes

RULE CITATION	RULE LANGUAGE
5 CSR 25-400.025 (1)	Each family child care home shall be organized according to written policies and procedures which clearly establish job responsibilities and lines of administrative authority.
5 CSR 25-400.025 (5)	When a nonreligious organization having as its principal purpose the provision of child care services enters into an arrangement with a religious organization to provide continuing assistance in the maintenance or operation of a child care facility, the facility is not under the exclusive control of the religious organization and does not qualify for exemption from licensure under section 210.211.1(17), RSMo.
5 CSR 25-400.025 (6)	If the person(s) operating the facility claims exemption from licensure, s/he shall file all information requested by the department to make a determination of exemption prior to opening. Facilities may waive the right to apply for exemption and request voluntary licensure. These facilities shall comply with all licensing rules.
5 CSR 25-400.045 (10)	Enrollment information for each child shall be on file at the home as required by 5 CSR 25-400.135 Admission Policies and Procedures.
5 CSR 25-400.045 (3)	The licensing process shall include an inspection of the entire premises of the child care home by the licensing representative.
5 CSR 25-400.045 (4)(C)	Written policies provided to parents shall include:
5 CSR 25-400.045 (4)(C)1.	Program goals;
5 CSR 25-400.045 (4)(C)2.	Admission, care, and discharge of children;
5 CSR 25-400.045 (4)(C)3.	Narrative description of child care practices and concepts; and
5 CSR 25-400.045 (4)(C)4.	Discipline and guidance policies;
5 CSR 25-400.045 (4)(D)	A schedule of daily activities for children;
5 CSR 25-400.045 (4)(E)	A sample weekly menu;
5 CSR 25-400.045 (4)(F)	An itemized list of available materials and equipment to be used by children;
5 CSR 25-400.045 (4)(I)	Sample forms used, other than those supplied by the department;
5 CSR 25-400.045 (4)(L)	Required information for assistants;
5 CSR 25-400.045 (4)(M)	A written disaster and emergency plan;
5 CSR 25-400.045 (4)(N)	A written safe sleep policy, if licensed to care for children under twelve (12) months of age;
5 CSR 25-400.045 (5)	Prior to the granting of a license, the provider shall meet the requirements of 5 CSR 25-400.086 Fire Safety.
5 CSR 25-400.045 (6)	The child care provider and child care staff members, as defined by 5 CSR 25-600.010 Definitions, shall have qualifying background screening results on file as required by 5 CSR 25-600.020 General Requirements, prior to initial issuance of the license.
5 CSR 25-400.045 (7)	Background screening information received by the provider shall be retained in the individual's file in a confidential manner and available for review.
5 CSR 25-400.045 (8)	Medical examination reports for the provider and child care assistant(s) as required by 5 CSR 25-400.125 Medical Examination Reports, shall be on file at the home and available for review.
5 CSR 25-400.045 (9)	Medical examination reports shall be on file at the home within thirty (30) days following the admission of each infant, toddler, or preschool child as required by 5 CSR 25-400.125 Medical Examination Reports. A health report for school-age children shall be on file as required by 5 CSR 25-400.125.
5 CSR 25-400.055 (1)(B)	A current list of available equipment;
5 CSR 25-400.055 (2)(A)	Evidence of compliance with a fire and safety inspection as conducted by the State Fire Marshal or his/her designee;
5 CSR 25-400.055 (2)(C)	The child care provider shall conduct a Family Care Safety Registry check for all child care staff members within thirty (30) days prior to the anniversary date as printed on the license; and
5 CSR 25-400.085 (1)(I)	Heaters, floor furnaces, radiators, hot water heaters or other equipment which poses a threat to children shall meet the requirements of 19 CSR 30-61.086 Fire Safety.
5 CSR 25-400.085 (2)(A)1.	Any floor of a home used for child care shall be approved by the State Fire Marshal or his/her designee.
5 CSR 25-400.085 (2)(A)11.	Telephone numbers for the police, fire department, ambulance and other emergency telephone numbers shall be posted near the telephone.
5 CSR 25-400.085 (2)(A)3.	Clear glass doors shall be marked plainly at varying heights to avoid impact.
5 CSR 25-400.085 (2)(C)1.E.	Bathrooms shall be clean and odor free.
5 CSR 25-400.085 (3)(A)9.	Concrete, asphalt, carpet or bare soil is not an acceptable surface under outdoor equipment from which children might fall and be injured.
5 CSR 25-400.086 (12)(M)3.	Furnaces shall be equipped with an electrical fused switch to protect the unit from electrical overloading and to disconnect the electrical supply.
5 CSR 25-400.086 (2)(C)3.	An evacuation/emergency plan for fires and tornadoes that is approved by the fire inspector shall be posted in the home in a central location and be visible to all occupants. The plan shall include special instructions for infants and nonambulatory children.
5 CSR 25-400.086 (2)(D)	Children shall have no access to areas of the building that do not meet fire safety requirements.
5 CSR 25-400.086 (2)(E)	All flammable or combustible liquids, matches, lighters, or other hazardous items shall be stored so they are inaccessible to the children.
5 CSR 25-400.086 (2)(G)	Housekeeping practices that ensure fire safety shall be maintained daily.
5 CSR 25-400.086 (2)(L)X	Mobile homes manufactured after November 27, 1973, shall comply with the Missouri Public Service Commission, regulations for mobile home tie-down systems. Manufactured homes shall comply with section 700.070, RSMo 1994, regarding tie down systems.
5 CSR 25-400.086 (2)(N)	When the licensed capacity increases, hours of care change, alterations are completed, or other changes occur that affect fire safety, the provider shall meet all the requirements of this rule unless otherwise excepted by the Division of Fire Safety.
5 CSR 25-400.090 (1)(B)	When developing disaster emergency plans, the facility shall consider-
5 CSR 25-400.090 (1)(B)1.	The age and physical and mental abilities of the children;
5 CSR 25-400.090 (1)(B)2.	The types of services offered, including whether the facility provides care for nonambulatory children or overnight care;
5 CSR 25-400.090 (1)(B)3.	The types of disasters likely to affect the area;

5 CSR 25-400.090 (1)(B)4.	The requirements of the Division of Fire Safety and the Department of Health and Senior Services' The ABC's of Emergency Preparedness Ready in 3 Program (2006), which is incorporated by reference and is published by the Department of Health and Senior Services, Center for Emergency Response and Terrorism, PO Box 570, Jefferson City, MO 65102-0570, telephone number 573-526- 4768, and is available at www.health.mo.gov, and advice from the Red Cross or other health and emergency professionals. This rule does not include any later amendments or additions; and
5 CSR 25-400.090 (1)(B)5.	The need for ongoing communication and data sharing with other types of agencies providing services to children and with state and local emergency management agencies.
5 CSR 25-400.090 (3)(B)	In addition to fire safety requirements found in 19 CSR 30-61.086, a review of the following disaster drill procedures with the staff and children shall be conducted:
5 CSR 25-400.095 (3)(C)	Children shall be instructed in the safe use of outdoor equipment.
5 CSR 25-400.105 (1)(M)	The provider shall request the results of a criminal background check for child care staff members as required by 5 CSR 25-600.020 General Requirements.
5 CSR 25-400.105 (1)(N)	Child care staff members shall have qualifying background screening results on file as required by 5 CSR 25-600.020 General Requirements.
5 CSR 25-400.105 (1)(O)	Child care staff members with disqualifying background screening results as defined in 5 CSR 25-600.040 Background Screening Findings shall be prohibited from being present on the premises of the facility during child care hours.
5 CSR 25-400.105 (1)(P)	The child care provider shall conduct a Family Care Safety Registry screening prior to employment for any newly hired child care staff member who has a qualifying criminal background check result.
5 CSR 25-400.115 (2)	The financial resources of the family shall be sufficient to maintain minimum standards of care as set forth by the department.
5 CSR 25-400.115 (4)	The provider shall notify the department of any new household members.
5 CSR 25-400.135 (2)(A)1.	The policy shall list the licensee's expectations regarding how and when caregivers are to be trained on safe sleep;
5 CSR 25-400.135 (2)(B)4.	Shall prohibit smoking in the child care home during the hours children are in care; and
5 CSR 25-400.135 (3)	The provider shall have available a copy of the Licensing Rules for Family Day Care Homes in Missouri and shall advise the parent(s) at the time of enrollment of his/her child of the availability of the rules for review.
5 CSR 25-400.135 (5)	The provider shall assess his/her ability to provide care for the special needs child while also meeting the needs of the other children.
5 CSR 25-400.135 (6)(E)1.	All information required by 19 CSR 30-61.210 Records and Reports;
5 CSR 25-400.135 (6)(E)4.	Information indicating that the child has completed age-appropriate immunizations, is in the process of completing immunizations, or is exempt from immunization requirements as defined by 19 CSR 30-61.185 Health Care;
5 CSR 25-400.135 (6)(E)5.	Permission for field trips, transportation to and from school, and other transportation;
5 CSR 25-400.135 (8)	If a provider enrolls children for irregular or intermittent care, all procedures for admitting children shall be followed. Children enrolled on an irregular or intermittent basis shall be accepted only by appointment and shall not cause the home to exceed its licensed capacity.
5 CSR 25-400.145 (1)	If nighttime care is to be offered on a regular basis, rules shall be met as set forth for nighttime care and the home shall be specifically licensed to include nighttime care.
5 CSR 25-400.145 (2)(B)	As parents will be calling for children at various hours during nighttime care, room arrangements shall take into consideration the child's need for undisturbed sleep;
5 CSR 25-400.145 (2)(D)	Night-lights shall be located in areas as required by individual children's needs;
5 CSR 25-400.175 (1)(B)	Fire and Tornado Drills.
5 CSR 25-400.175 (1)(B)1.	Fire, tornado, and other disaster drills shall meet the requirements of 19 CSR 30- 61.086 Fire Safety.
5 CSR 25-400.175 (1)(E)10.	The routine for toilet training shall be discussed with the parent(s) so the same method will be used at the family day care home and the child's home.
5 CSR 25-400.175 (2)(B)8.	A quiet time for school-age children after the noon meal with a cot or bed available for those who wish to nap or rest; and
5 CSR 25-400.175 (2)(B)9.	A study time for school-age children who choose to do homework, with a separate, quiet work space.
5 CSR 25-400.175 (2)(C)3.	Supervised "tummy time" for children under one (1) year of age to promote healthy development;
5 CSR 25-400.190 (1)(K)	Menus shall be available to parents upon request.
5 CSR 25-400.200 (1)(D)	Short, unscheduled walks may be taken without parental notification. These unscheduled outings shall be discussed with the parent(s) at the time of enrollment.
5 CSR 25-400.210 (2)(D)	Name and phone number of the family physician, or hospital, or both, to be used in an emergency;
5 CSR 25-400.210 (2)(F)	Field trip and transportation authorization.
5 CSR 25-400.210 (3)	Health information shall be retained in each child's individual file and shall include:
5 CSR 25-400.210 (3)(A)	A medical examination report for each infant, toddler, or preschool child or a health report for each school-age child as required by 5 CSR 25-400.125 Medical Examination Reports;
5 CSR 25-400.210 (3)(B)	Written parental authorization for medications and a record of medications administered;
5 CSR 25-400.210 (3)(C)	Information concerning any accident or injury to the child while at the family child care home or any emergency medical care; and
5 CSR 25-400.210 (3)(D)	Any significant information learned from observing the child.
5 CSR 25-400.210 (8)	A copy of qualifying background screening results shall be kept on file for child care staff members, as required by 5 CSR 25-600.020 General Requirements.

#### Licensing Rules for Group Child Care Homes and Centers

RULE CITATION	RULE LANGUAGE
5 CSR 25-500.032(1)	Each child care facility shall be organized according to written policies and procedures which clearly establish job responsibilities and lines of administrative authority.
5 CSR 25-500.032(5)	When a nonreligious organization, having as its principal purpose the provision of child care services, enters into an arrangement with a well-known religious order to provide continuing assistance in the maintenance or operation of a child care facility, the facility is not under the exclusive control of the well-known religious order and does not qualify for exemption from licensure under section 210.211.1(17), RSMo.
5 CSR 25-500.032(6)	If the person(s) operating the facility claims exemption from licensure, s/he shall file all information requested by the department to make a determination of exemption prior to opening. Facilities may waive the right to apply for exemption and request voluntary licensure. These facilities shall comply with all licensing rules.
5 CSR 25-500.042(10)	Background screening information received by the provider shall be retained in the individual's file in a confidential manner and available for review.
5 CSR 25-500.042(3)	The licensing process shall include an inspection of the entire premises of the facility by the licensing representative.
5 CSR 25-500.042(4)(C)	Written policies provided to parents shall include:
5 CSR 25-500.042(4)(C)1.	Program goals;
5 CSR 25-500.042(4)(C)2.	Admission, care, and discharge of children;
5 CSR 25-500.042(4)(C)3.	Narrative description of child care practices and concepts; and
5 CSR 25-500.042(4)(C)4.	Discipline and guidance policies;
5 CSR 25-500.042(4)(D)	A schedule of daily activities for each age group in care (infant/toddler, preschool, and school-age) ;
5 CSR 25-500.042(4)(E)	A sample weekly menu;



5 CSR 25-500.042(4)(F)	An itemized list of available materials and equipment to be used by children;
5 CSR 25-500.042(4)(H)	A written disaster and emergency plan;
5 CSR 25-500.042(4)(J)	Sample forms used, other than those supplied by the department;
5 CSR 25-500.042(4)(K)	Evidence of compliance with local or state, or both, sanitation requirements;
5 CSR 25-500.042(4)(N)	Written policies and procedures which clearly establish job responsibilities for the director or group home provider;
5 CSR 25-500.042(4)(O)	Official verification of the center director or group child care home provider's education and experience;
5 CSR 25-500.042(4)(P)	A written safe sleep policy, if the facility's application includes children under twelve (12) months of age in the requested age range; and
5 CSR 25-500.042(5)	Prior to the granting of a license, the provider shall meet the requirements of 5 CSR 25-500.087 Fire Safety.
5 CSR 25-500.042(6)	Medical examination reports for all adults working in the facility, as required by 5 CSR 25-500.122 Medical Examination Reports, shall be on file at the facility and available for review.
5 CSR 25-500.042(7)	Medical examination reports shall be on file at the facility within thirty (30) days following the admission of each infant, toddler, or preschool child as required by 5 CSR 25-500.122 Medical Examination Reports. A health report for school-age children shall be on file as required by 5 CSR 25-500.122.
5 CSR 25-500.042(8)	Enrollment information for each child shall be on file at the facility as required by 5 CSR 25-500.132 Admission Policies and Procedures.
5 CSR 25-500.042(9)	The child care provider and child care staff members, as defined by 5 CSR 25-600.010 Definitions, shall have qualifying background screening results on file as required by 5 CSR 25-600.020 General Requirements, prior to initial issuance of the license.
5 CSR 25-500.052(1)(C)	A current list of available equipment; and
5 CSR 25-500.052(2)(A)	Evidence of compliance with a fire and safety inspection as conducted by the State Fire Marshal or his/her designee;
5 CSR 25-500.052(2)(B)	Evidence of compliance with local, state, or both, sanitation requirements;
5 CSR 25-500.052(2)(C)	The child care provider shall conduct a Family Care Safety Registry check for all child care staff members within thirty (30) days prior to the anniversary date as printed on the license; and
5 CSR 25-500.082(1)(D)	Stairways in approved child care space shall be well-lighted and free of obstructions. Stairways in approved child care space having more than three (3) steps shall have a handrail the children can reach.
5 CSR 25-500.082(1)(H)	Heaters, floor furnaces, radiators, hot water heaters or other equipment which pose a threat to children shall meet the requirements of 19 CSR 30-62.087 Fire Safety.
5 CSR 25-500.082(2)(A)1.	Any floor of a building used for child care shall be approved by the State Fire Marshal or his/her designee.
5 CSR 25-500.082(2)(A)11.	Telephone numbers for the police, fire department, ambulance and other emergency telephone numbers shall be posted near the telephone.
5 CSR 25-500.082(2)(A)3.	Clear glass doors shall be marked plainly at varying heights to avoid impact.
5 CSR 25-500.082(2)(B)1.K.	If school-age children are in care, there shall be space apart from the preschool program equipped for their use.
5 CSR 25-500.082(2)(B)2.B.(IV)	No more than eight (8) infant/toddlers or sixteen (16) two (2) -year olds shall be in a group;
5 CSR 25-500.082(3)(A)7.	Bathrooms shall be clean and odor free.
5 CSR 25-500.082(5)(D)	Kitchens shall be maintained in compliance with state or local rules, or both, governing food service sanitation.
5 CSR 25-500.082(6)(A)8.	Concrete, asphalt, carpet, grass or bare soil is not an acceptable surface under outdoor equipment from which children might fall and be injured.
5 CSR 25-500.087(13)(H)	Furnaces shall be equipped with an electrical fused switch to protect the unit from electrical overloading and to disconnect the electrical supply.
5 CSR 25-500.087(14)(B)	Protective covers or inserts for electrical receptacles shall be installed in all areas occupied by children.
5 CSR 25-500.087(2)(E)	The evacuation/emergency plan for fires and tornadoes shall be posted conspicuously and shall include the route for the drills and special instructions for infants and non-ambulatory children.
5 CSR 25-500.087(2)(G)	Children shall have no access to areas of the building that do not meet fire safety requirements.
5 CSR 25-500.087(2)(H)	All flammable or combustible liquids, matches, lighters, or other hazardous items shall be stored so they are inaccessible to the children.
5 CSR 25-500.087(2)(J)	Housekeeping practices that ensure fire safety shall be maintained daily.
5 CSR 25-500.087(2)(Q)	Mobile homes manufactured after November 27, 1973, shall comply with the Missouri Public Service Commission, regulations for mobile home tie-down systems. Manufactured homes shall comply with section 700.070, RSMo 1994, regarding tie-down systems.
5 CSR 25-500.087(2)(R)	All facilities shall comply with all local building codes, fire codes, and ordinances.
5 CSR 25-500.087(2)(T)	When the licensed capacity increases, hours of care change, alterations are completed, or other changes occur that affect fire safety, the provider shall meet all the requirements of this rule unless otherwise excepted by the Division of Fire Safety.
5 CSR 25-500.090(1)(B)	When developing disaster and emergency plans, the facility shall consider-
5 CSR 25-500.090(1)(B)1.	The age and physical and mental abilities of the children;
5 CSR 25-500.090(1)(B)2.	The types of services offered, including whether the facility provides care for non-ambulatory children or overnight care;
5 CSR 25-500.090(1)(B)3.	The types of disasters or emergencies likely to affect the area;
5 CSR 25-500.090(1)(B)4.	The requirements of the Division of Fire Safety and the Department of Health and Senior Services' The ABC's of Emergency Preparedness Ready in 3 Program (2006) , which is incorporated by reference and is published by the Department of Health and Senior Services, Center for Emergency Response and Terrorism, PO Box 570, Jefferson City, MO 65102-0570, telephone number 573-526-4768, and is available at <a href="http://www.health.mo.gov">www.health.mo.gov</a> , and advice from the Red Cross or other health and emergency professionals. This rule does not include any later amendments or additions; and
5 CSR 25-500.090(1)(B)5.	The need for ongoing communication and data sharing with other types of agencies providing services to children and with state and local disaster emergency management agencies.
5 CSR 25-500.090(3)(B)	In addition to fire safety requirements found in 19 CSR 30-62.087, a review of the following disaster drill procedures with the staff and children shall be conducted:
5 CSR 25-500.092(1)(B)1.C.	If two- (2-) year olds are in care, they shall be napped in an area separate from the other children so they can sleep undisturbed longer than the older children.
5 CSR 25-500.092(1)(B)2.B.	With written parental consent on file, cots may be used for napping or sleeping for toddlers twelve (12) months and older.
5 CSR 25-500.092(3)(C)	Children shall be instructed in the safe use of outdoor equipment.
5 CSR 25-500.102(1)(M)	The provider shall request the results of a criminal background check for child care staff members as required by 5 CSR 25-600.020 General Requirements.
5 CSR 25-500.102(1)(N)	Child care staff members shall have qualifying background screening results on file as required by 5 CSR 25-600.020 General Requirements.
5 CSR 25-500.102(1)(O)	Child care staff members with disqualifying background screenings results, as defined in 5 CSR 25-600.040 Background Screening Findings, shall be prohibited from being present on the premises of the facility.



5 CSR 25-500.102(1)(P)	The child care provider shall conduct a Family Care Safety Registry screening prior to employment for any newly hired child care staff member who has a qualifying criminal background check result.
5 CSR 25-500.102(1)(R)	Any person present at the facility during the hours in which child care is provided shall not present a threat to the health, safety, or welfare of the children.
5 CSR 25-500.102(2)(A)4.	The duties and responsibilities of the center director or group child care home provider shall be defined clearly in writing.
5 CSR 25-500.132(10)	If a provider enrolls children for irregular or intermittent care, all procedures for admitting children shall be followed. Children enrolled on an irregular or intermittent basis shall be accepted only by appointment and shall not cause the facility to exceed its licensed capacity.
5 CSR 25-500.132(2)(A)1.	The policy shall list the licensee's expectations regarding how and when caregivers are to be trained on safe sleep;
5 CSR 25-500.132(2)(B)4.	Shall prohibit smoking in the child care home during the hours children are in care; and
5 CSR 25-500.132(3)	The provider shall have available a copy of the Licensing Rules for Group Day Care Homes and Child Day Care Centers in Missouri and shall advise the parent(s) at the time of enrollment of his/her child of the availability of the rules for review.
5 CSR 25-500.132(4)	Only children two (2) years of age and older shall be accepted for care unless the facility has been specifically licensed to include infant/toddler care.
5 CSR 25-500.132(7)	The provider shall assess his/her ability to provide care for the special needs child while also meeting the needs of the other children.
5 CSR 25-500.132(8)(E)1.	All information required by 19 CSR 30-62. 222 Records and Reports;
5 CSR 25-500.132(8)(E)3.	A diet plan for each infant/toddler signed by the parent(s) ;
5 CSR 25-500.132(8)(E)5.	Information indicating that the child has completed age-appropriate immunizations, is in the process of completing immunizations, or is exempt from immunization requirements as defined by 19 CSR 30 62. 192 Health Care;
5 CSR 25-500.132(8)(E)6.	Permission for field trips, transportation to and from school, and other transportation;
5 CSR 25-500.132(9)	If care is provided for children related to the center owner(s) or group day care home provider, the parent(s) shall complete and sign a form which is supplied by the department (see 19 CSR 30-61. 135) . The form shall be on file at the facility before children related to the center owner(s) or group day care home provider are accepted for care, and shall contain the following identifying information:
5 CSR 25-500.132(9)(A)	Each child's name, address, birthdate, and date of admission;
5 CSR 25-500.132(9)(B)	Each child's relationship to the center owner(s) or group day care home provider; and
5 CSR 25-500.132(9)(C)	The parent's(s') name(s) , address(es) , and telephone number(s) .
5 CSR 25-500.142(1)	If nighttime care is to be offered on a regular basis, rules shall be met as set forth for nighttime care and the facility shall be specifically licensed to include nighttime care.
5 CSR 25-500.142(2)(B)	As parents will be calling for children at various hours during nighttime care, room arrangements shall take into consideration the child's need for undisturbed sleep;
5 CSR 25-500.142(2)(D)	Night-lights shall be located in areas as required by individual children's needs;
5 CSR 25-500.142(2)(G)	Adults on the premises shall be limited to staff, parents or authorized individuals.
5 CSR 25-500.182(1)(B)	Fire and Tornado Drills.
5 CSR 25-500.182(1)(B)1.	Fire, tornado, and other disaster drills shall meet the requirements of 19 CSR 30-62. 087 Fire Safety.
5 CSR 25-500.182(1)(D)2.	Children shall be cared for by the same caregiver on a regular basis.
5 CSR 25-500.182(1)(E)9.	The routine for toilet training shall be discussed with the parent(s) so the same method will be used at the facility and the child's home.
5 CSR 25-500.182(2)(B)8.	A quiet time for school-age children after the noon meal with a cot or bed available for those who wish to nap or rest; and
5 CSR 25-500.182(2)(B)9.	A study time for school-age children who choose to do homework, with a separate, quiet work space.
5 CSR 25-500.182(2)(C)3.	Supervised "tummy time" for children under one (1) year of age to promote healthy development;
5 CSR 25-500.202(1)(K)	Menus shall be available to parents upon request.
5 CSR 25-500.212(1)(D)	Short, unscheduled walks may be taken without parent notification. These unscheduled outings shall be discussed with the parent(s) at the time of enrollment.
5 CSR 25-500.222(2)(D)	Name and phone number of the family physician, hospital, or both, to be used in an emergency;
5 CSR 25-500.222(2)(F)	Field trip and transportation authorization.
5 CSR 25-500.222(3)	Health information shall be retained in each child's individual file and shall include:
5 CSR 25-500.222(3)(A)	A medical examination report for each infant, toddler, or preschool child or a health report for each school-age child as required by 5 CSR 25-500.122 Medical Examination Reports;
5 CSR 25-500.222(3)(B)	Written parental authorization for medications and a record of medications administered;
5 CSR 25-500.222(3)(C)	Information concerning any accident or injury to the child while at the facility or any emergency medical care; and
5 CSR 25-500.222(3)(D)	Any significant information learned from observing the child.
5 CSR 25-500.222(8)	A copy of qualifying background screening results shall be kept on file for child care staff members, as required by 5 CSR 25-600.020 General Requirements.