
**Rules of
Department of Health
Division 30—Division of Health Standards and Licensure
Chapter 60—License-Exempt Child Care
Facilities**

Title	Page
19 CSR 30-60.010 Definitions Relating to Child Care Facilities	3
19 CSR 30-60.020 Application for Annual Fire Safety and Health and Sanitation Inspections and Inspection Procedures	3
19 CSR 30-60.030 Local Inspections	3
19 CSR 30-60.040 Variance Requests	4
19 CSR 30-60.050 Staffing Requirements.....	4
19 CSR 30-60.060 Health Requirements	5
19 CSR 30-60.070 Responsibilities of Caregivers	9
19 CSR 30-60.080 Fire Safety Requirements.....	9
19 CSR 30-60.090 Sanitation Requirements.....	10
19 CSR 30-60.100 Physical Plant, Space, Supplies and Equipment	11
19 CSR 30-60.110 Transportation and Field Trip Requirements	13
19 CSR 30-60.120 Admission Procedures and Required Reports and Records	13

**Title 19—DEPARTMENT OF
HEALTH**

**Division 30—Division of Health Standards
and Licensure**

**Chapter 60—License-Exempt Child Care
Facilities**

**19 CSR 30-60.010 Definitions Relating to
Child Care Facilities**

PURPOSE: This rule defines the terms used throughout this chapter.

(1) The following definitions shall be used in interpreting the rules of this chapter:

(A) Adult is an individual eighteen (18) years of age or older;

(B) Bureau is the Bureau of Child Care Safety and Licensure of the Department of Health responsible for enforcement of child care rules and laws;

(C) Caregiver is the facility director or other child care staff whether they are paid or volunteering;

(D) Child care is care of a child away from his/her own home for any part of the day or night;

(E) Department is the Missouri Department of Health;

(F) Infant is a child less than twelve (12) months of age;

(G) Kindergarten is a children's educational program offered to prepare children for the first grade;

(H) License-exempt facility or facility is a nursery school not operated by a religious organization or a child care operation run by a religious organization;

(I) Local health department is an entity that enforces local public health codes and ordinances and provides other services related to public health;

(J) Nursery school is a program for preschool children that is operated for no more than four (4) hours per child per day;

(K) Premises is a house(s), dwelling(s) or building(s) and the adjoining land of a license-exempt facility;

(L) Preschool child is a child between two and five (2-5) years of age not enrolled in kindergarten;

(M) Registered professional nurse or registered nurse is one licensed under the provisions of sections 335.011-335.096, RSMo to engage in the practice of professional nursing;

(N) Religious organization academic preschool is a child care program provided exclusively for four (4)- and five (5)-year-old children that is operated by a religious organization;

(O) Sanitarian is a person employed by a state or local health department that conducts sanitation inspections for license-exempt child care facilities;

(P) School-age child is a child four (4) years of age or older who is enrolled in kindergarten or elementary school;

(Q) Staff/child ratio is the number of caregivers required for the number of children in care;

(R) Toddler is a child between twelve (12) and twenty-four (24) months of age; and

(S) Variance is approval by the department for a provider not to be required to meet a specific requirement of the rules of this chapter.

AUTHORITY: sections 210.221.1(3) and 210.252.5, RSMo Supp. 1999. This rule was previously filed as 19 CSR 40-60.010. Original rule filed Dec. 1, 1994, effective July 30, 1995. Changed to 19 CSR 30-60.010 July 30, 1998. Emergency amendment filed March 1, 2000, effective March 11, 2000, expired Sept. 6, 2000. Amended: Filed March 1, 2000, effective Aug. 30, 2000.*

**Original authority: 210.221, RSMo 1949, amended 1955, 1987, 1993, 1995, 1999; 210.252, RSMo 1993, amended 1999.*

**19 CSR 30-60.020 Application for Annual
Fire Safety and Health and Sanitation
Inspections and Inspection Procedures**

PURPOSE: This rule establishes how a facility director may apply for annual fire safety and health and sanitation inspections and how the inspections are conducted.

(1) The director of each facility shall apply to the Department of Health for an annual fire safety inspection by the state fire marshal, his/her designee or officials of a local fire district, and for a health and sanitation inspection by the department or officials of a local health department. Religious organization academic preschools are not required to apply for annual fire and safety inspections or the health and sanitation inspections.

(2) Facility inspections shall be conducted during normal business hours and may be unannounced. The facility director shall be given a copy of the completed inspection form.

(3) The agency, organization or person that owns the facility and the person delegated as director of the facility shall be identified on the application for a fire safety and a health and sanitation inspection.

(4) When a facility is incorporated, the chairperson of the board of directors, or the person delegated as director of the facility, shall sign the application for a fire safety and a health and sanitation inspection.

(5) The facility director shall request a child abuse/neglect screening from the Department of Social Services for each employee who may come into contact with children during child care hours. The request shall be made within ten (10) days of employment. The results of the screenings shall be maintained in the facility's files.

(6) If there is a change of ownership of the facility, the new owner(s) or the facility director shall request a fire safety inspection and a health and sanitation inspection.

(7) Inspections of child care facilities operated by religious organizations and nursery schools not operated by religious organizations will be phased in over a one (1)-year period following the effective date of this rule. During the phase-in period, necessary action will be taken by the Department of Health in any situations posing a threat of imminent bodily harm to children.

AUTHORITY: sections 210.221.1(3) and 210.252.5, RSMo Supp. 1999. This rule was previously filed as 19 CSR 40-60.020. Original rule filed Dec. 1, 1994, effective July 30, 1995. Changed to 19 CSR 30-60.020 July 30, 1998. Emergency amendment filed March 1, 2000, effective March 11, 2000, expired Sept. 6, 2000. Amended: Filed March 1, 2000, effective Aug. 30, 2000.*

**Original authority: 210.221, RSMo 1949, amended 1955, 1987, 1993, 1995, 1999; 210.252, RSMo 1993, amended 1999.*

19 CSR 30-60.030 Local Inspections

PURPOSE: This rule establishes criteria for local health departments to conduct health and safety inspections and for local fire districts to conduct fire safety inspections of license-exempt child care facilities.

(1) Sanitation inspections of license-exempt facilities may be delegated to local health departments if the standards employed for inspections are substantially equivalent to 19 CSR 40-60.090 Sanitation Requirements. Fees, as provided for in section 192.300, RSMo, may be charged at the option of the local health department.

(2) Fire safety inspections of license-exempt facilities may be delegated to local fire districts if the standards employed for inspections are equivalent to 19 CSR 40-60.080 Fire Safety Requirements.

AUTHORITY: sections 210.221.1(3) and 210.252.5, RSMo Supp. 1999. This rule was previously filed as 19 CSR 40-60.030. Original rule filed Dec. 1, 1994, effective July 30, 1995. Changed to 19 CSR 30-60.030 July 30, 1998. Emergency amendment filed March 1, 2000, effective March 11, 2000, expired Sept. 6, 2000. Amended: Filed March 1, 2000, effective Aug. 30, 2000.*

**Original authority: 210.221, RSMo 1949, amended 1955, 1987, 1993, 1995, 1999; 210.252, RSMo 1993, amended 1999.*

19 CSR 30-60.040 Variance Requests

PURPOSE: This rule establishes the procedure for a facility director to request a variance from any portion of the rules of this chapter.

(1) Any facility director may request a variance from any portion of the rules of this chapter. The request for a variance shall be made in writing to the department and shall include the reasons for requesting the variance. The department shall approve any variance request that does not endanger the health or safety of the children served by the facility. Local inspectors may grant a variance, subject to approval by the department.

(2) If a variance request is not recommended by the bureau, the facility owner or director shall be advised in writing of the basis for the recommendation. If the owner or facility director does not agree with the recommendation to deny the variance, s/he may request the department to make a final decision regarding the denial.

AUTHORITY: sections 210.221.1(3) and 210.252.5, RSMo Supp. 1999. This rule was previously filed as 19 CSR 40-60.040. Original rule filed Dec. 1, 1994, effective July 30, 1995. Changed to 19 CSR 30-60.040 July 30, 1998. Emergency amendment filed March 1, 2000, effective March 11, 2000, expired Sept. 6, 2000. Amended: Filed March 1, 2000, effective Aug. 30, 2000.*

**Original authority: 210.221, RSMo 1949, amended 1955, 1987, 1993, 1995, 1999; 210.252, RSMo 1993, amended 1999.*

19 CSR 30-60.050 Staffing Requirements

PURPOSE: This rule establishes staffing requirements for license-exempt facilities.

(1) Supervision and basic care shall be provided at all license-exempt facilities.

(A) Caregivers shall provide care conducive to the health and safety of children and shall be capable of handling emergencies;

(B) Caregivers and other personnel, including volunteers, shall not be under the influence of alcohol or illegal drugs while on the premises and shall not be impaired by the use of medications;

(C) Prior to starting work, all caregivers shall read the rules of this chapter and sign a statement that they have read the rules. The statements shall be maintained on file at the facility;

(D) No person shall be present during child care hours who is a threat to the health or safety of children; and

(E) A caregiver shall be in charge at all times child care is provided.

(2) Nursery schools not operated by religious organizations shall meet the following requirements for staff/child ratios:

(A) Staff/child ratios in subsections (2)(B)–(H) of this rule shall be maintained at all times;

(B) Groups composed of mixed ages birth through two (2) years shall have no less than one (1) adult caregiver to four (4) children;

(C) Groups composed solely of two (2)-year-old children shall have no less than one (1) adult caregiver to eight (8) children;

(D) Groups composed solely of three (3)- and four (4)-year-old children shall have no less than one (1) adult caregiver to ten (10) children;

(E) Groups composed solely of five (5)-year-old children and older shall have no less than one (1) adult caregiver to sixteen (16) children;

(F) Groups composed of mixed ages of children two (2) years of age and older shall have no less than one (1) adult caregiver to ten (10) children with a maximum of four (4) two- (2) year-olds. Groups composed of more than four (4) two (2) year-old children in a mixed group shall have no less than one (1) adult caregiver to eight (8) children;

(G) If a facility has an attendance of more than fifty (50) children, the caregiver in charge shall not be included in staff/child ratios except during naptime; and

(H) Caregivers shall be eighteen (18) years of age or older in order to be counted in meeting staff/child ratios. Persons sixteen (16) and seventeen (17) years of age who assist with children may be counted in staff/child ratios only if they are physically supervised by an adult who is present with the children.

(3) Nursery schools not operated by religious organizations shall meet the following requirements for facility directors:

(A) The facility director shall be responsible for planning, monitoring and managing the daily program;

(B) Directors shall have a high school diploma or General Education Development (GED) certificate, and directors shall have at least thirty (30) college semester hours with six (6) college semester hours in child-related courses; or twelve months' (12) experience with six (6) college semester hours in child-related courses; or a child development associate (CDA) credential; and

(C) All experience counted toward director qualifications shall be responsible, supervised, full-time (a minimum of thirty-five (35) hours per week) paid experience working with children in a child care setting. Part-time experience may be prorated to a full-time equivalent. Each month of full-time experience may be substituted for two (2) college semester hours in unspecified courses, but not for the required child-related courses.

(4) Nursery schools not operated by religious organizations shall meet the following requirements for child care-related training:

(A) The director and other caregivers counted in staff/child ratios shall obtain at least twelve (12) clock hours of child care-related training during each year of employment in training approved by the department in health, safety, nutrition, guidance and discipline, appropriate activities and learning experiences for children, positive communication and interaction with parents, planning and setting up an appropriate environment for children, professional and administrative practices, or other child-related areas; and

(B) All training shall be documented with the dates, the number of hours of training completed, the subject and the name of the person(s) who conducted the training. This information shall be on file at the facility and available for review.

AUTHORITY: sections 210.221.1(3) and 210.252.5, RSMo Supp. 1999. This rule was previously filed as 19 CSR 40-60.050. Original rule filed Dec. 1, 1994, effective July 30, 1995. Changed to 19 CSR 30-60.050 July 30, 1998. Emergency amendment filed March 1, 2000, effective March 11, 2000, expired Sept. 6, 2000. Amended: Filed March 1, 2000, effective Aug. 30, 2000.*

**Original authority: 210.221, RSMo 1949, amended 1955, 1987, 1993, 1995, 1999; 210.252, RSMo 1993, amended 1999.*

19 CSR 30-60.060 Health Requirements

PURPOSE: This rule establishes health requirements for child care providers and children in license-exempt child care facilities.

(1) Facility staff shall meet the following health requirements:

(A) The director or other caregiver shall report to the local health department when any child in a facility is suspected of having a reportable communicable disease listed in 19 CSR 20-20.020(1)–(5). In the event of an unusual outbreak of a reportable communicable disease, caregivers shall implement control measures recommended by the department or local health department;

(B) Caregivers shall use proper handwashing techniques with soap and warm, running water after toileting, after assisting a child with toileting, after diapering a child, and at other times as needed. Good hygiene practices shall be followed during food preparation. These practices include, but are not limited to, washing hands properly after smoking, eating, drinking, using the restroom, after touching raw food products and before preparing and serving food. Hands shall be dried with single-service towels. Caregivers shall teach and see that children wash their hands at appropriate times: before eating, after toileting and as needed when hands are soiled;

(C) Caregivers shall not work when ill and likely to transmit an illness that might endanger the health or well-being of children. This may include symptoms such as fever, coughing, upper respiratory infection, vomiting or diarrhea;

(D) All caregivers working in a facility during child care hours shall be in good health. They shall have a physical assessment, including a tuberculosis status assessment by a licensed physician or registered professional nurse. A physical assessment report, signed by a licensed physician or registered professional nurse, shall be on file at the time of employment or within thirty (30) days following employment.

1. Physical assessment reports shall be completed not more than twelve (12) months before beginning work in the facility. The reports may be transferred to another facility for future employment.

2. The facility may use the department's physical assessment form, MO 580-1879 (6-94), or the facility may use its own form if it contains all the information on the department's form.

3. After the initial physical assessment, all caregivers working in a facility during

child care hours shall be tested for tuberculosis at least every two (2) years. Caregivers with previously positive tuberculin tests shall be under the management of a physician; and

(E) No person shall smoke or use tobacco products in any area of a child care facility while children are in care.

(2) Within thirty (30) days following the admission of an infant, toddler or preschool child, a physical assessment report signed by a licensed physician or registered professional nurse shall be on file at the facility. The facility may use the department's physical assessment form, MO 580-1878 (6-94), or the facility may use its own form if it contains all the information on the department's form. The report shall have been completed not more than twelve (12) months before admission.

(3) Child care facilities shall meet immunization requirements for children as defined by section 210.003, RSMo.

(4) A parent of a school-age child shall provide a statement at the time of enrollment indicating the child's health history, any current health problems and any restrictions necessary for the child's care.

(5) Each child shall be observed for contagious diseases and other signs of illness on arrival and throughout each day.

(6) A parent or guardian shall be contacted when signs of illness are observed.

(7) When a child exhibits any of the following in subsections (7)(A)–(O) of this rule, the parent(s) shall be contacted and the child shall be sent home. Parental contact shall be recorded and filed in the child's records. Symptoms that require parental contact and sending a child home are—

(A) More than one (1) abnormally loose stool;

(B) Red or blue in the face or makes high-pitched croupy or whooping sounds after coughing;

(C) Difficult or rapid breathing—especially important in infants under six (6) months of age;

(D) Yellowish skin or eyes;

(E) Tears, redness of eyelid lining or irritation, followed by swelling or discharge of pus;

(F) Unusual spots or rashes;

(G) Sore throat or swallowing difficulty;

(H) An infected skin patch—crusty, bright yellow, dry or gummy areas of the skin;

(I) Unusually dark, tea-colored urine;

(J) Gray or white stool;

(K) Fever over one hundred one degrees Fahrenheit (101°F) by mouth or one hundred degrees Fahrenheit (100°F) under the arm;

(L) Headache and stiff neck;

(M) Vomiting more than once;

(N) A child is in the contagious period of a disease; or

(O) Severe itching of the body or scalp or scratching of the scalp which may be symptoms of lice or scabies.

(8) An ill child shall be kept isolated from the other children and a caregiver shall be in close proximity to the child until a parent arrives. Close proximity means that a caregiver is close enough to hear any sounds a child might make that indicate a need for assistance.

(9) A parent of each child shall be notified when any reportable communicable disease in 19 CSR 20-20.020(1)–(5) occurs in the facility.

(10) Providers are not required to administer medication, but may if they choose.

(A) All medication shall be given to a child only with the dated, written permission of a parent, stating the length of time the medication may be given.

(B) Prescription and nonprescription medication shall be in the original container and labeled with the child's name, instructions for administration, including the times and amounts for dosages, and the physician's name. Sample medication provided by a physician may be used.

(C) All medication shall be stored out of reach of children or in a locked container.

(D) Medication shall be returned to storage immediately after use.

(E) Medication needing refrigeration shall be kept in the refrigerator in a container separate from food.

(F) Unused medication shall be returned to the parent or disposed of immediately after it is no longer needed.

(G) The date and time(s) of administration, the name of the individual giving the medication and the quantity of medication given shall be recorded promptly after administration. This form shall be filed in the child's record after the medication is no longer necessary.

(11) In case of an accident or injury to a child, the provider shall notify a parent immediately. If a child requires emergency medical care, a parent's prior written instructions shall be followed. A form shall be completed indicating the circumstances and the date and time of the injury. The form shall be



signed by the caregiver and his/her supervisor. A copy of the form shall be given to the parent the day of the accident or injury and necessary explanations shall be given. The form shall be filed in the child's record.

AUTHORITY: sections 210.221.1(3) and 210.252.5, RSMo Supp. 1999. This rule was previously filed as 19 CSR 40-60.060. Original rule filed Dec. 1, 1994, effective July 30, 1995. Changed to 19 CSR 30-60.060 July 30, 1998. Emergency amendment filed March 1, 2000, effective March 11, 2000, expired Sept. 6, 2000. Amended: Filed March 1, 2000, effective August 30, 2000.*

**Original authority: 210.221, RSMo 1949, amended 1955, 1987, 1993, 1995, 1999; 210.252, RSMo 1993, amended 1999.*



**MISSOURI DEPARTMENT OF HEALTH
BUREAU OF CHILD CARE SAFETY & LICENSURE
MEDICAL EXAMINATION REPORT (INFANT/TODDLER & PRESCHOOL-AGE CHILD)**

I. IDENTIFYING INFORMATION	
PATIENT'S NAME	BIRTHDATE

II. CURRENT STATE OF HEALTH
I HAVE EXAMINED THE ABOVE-NAMED CHILD AND VERIFY THAT THIS CHILD'S MEDICAL HISTORY AND CURRENT STATE OF HEALTH
<input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT SATISFACTORY FOR PARTICIPATION IN A DAY CARE PROGRAM.
DOES THIS CHILD REQUIRE ANY SPECIALIZED CARE? <input type="checkbox"/> YES <input type="checkbox"/> NO
IF YES, EXPLAIN IN SECTION IV.

III. IMMUNIZATION HISTORY						
OUR RECORDS INDICATE THAT THIS CHILD HAS THE FOLLOWING IMMUNIZATIONS:						
IMMUNIZATIONS	DATES GIVEN					
	Dose No. 1	Dose No. 2	Dose No. 3	Dose No. 4	Dose No. 5	Dose No. 6
_____ DPT/DT						
_____ Polio						
_____ Hib						
_____ MMR						
_____ Hepatitis B						

IV. COMMENTS/RECOMMENDATIONS
(SPECIAL DIETS, ALLERGIES, EAR INFECTIONS, CONVULSIONS, DIABETES, EMOTIONAL PROBLEMS)

SIGNATURE OF PHYSICIAN OR REGISTERED NURSE UNDER THE SUPERVISION OF A PHYSICIAN	DATE	PHYSICIAN'S OR NURSE'S NAME (PLEASE PRINT)
NAME OF CLINIC, GROUP PRACTICE, OTHER		IF NURSE IS SUPERVISED BY PHYSICIAN, INDICATE PHYSICIAN'S NAME
ADDRESS (STREET, CITY, STATE, ZIP CODE)		TELEPHONE NUMBER ()



MISSOURI DEPARTMENT OF HEALTH
BUREAU OF CHILD CARE SAFETY & LICENSURE
MEDICAL EXAMINATION REPORT FOR CHILD CARE PROVIDER/STAFF

I. IDENTIFYING INFORMATION (TO BE COMPLETED BY PATIENT)		
NAME		BIRTHDATE
ADDRESS (STREET, CITY, STATE, ZIP CODE)		TELEPHONE NUMBER ()
NAME OF CHILD CARE FACILITY WHERE EMPLOYED		
II. TO BE COMPLETED BY A LICENSED PHYSICIAN OR REGISTERED NURSE UNDER THE SUPERVISION OF A LICENSED PHYSICIAN		
<p>This individual will be in contact with children, infant through school-age, receiving child care outside their own homes. S/he may be responsible for the physical care and social development of young children during daytime and/or nighttime hours. Some lifting of young children may be required.</p> <p>On _____ (date) I examined this patient and certify —</p> <p>A. That s/he is in good physical and emotional health and free of contagious disease;</p> <p>B. To the best of my knowledge s/he is free of impairment due to the use of medication;</p> <p>C. To the best of my knowledge s/he is free of a current drug or alcohol dependency; and</p> <p>D. That s/he is free of active tuberculosis as established by a tuberculin skin test, a chest x-ray, or appropriate follow-up of a previous examination. (If chest x-ray is contra-indicated, please comment on follow-up indicating if this person will pose a hazard to other persons).</p> <p>TB testing, chest x-ray, or follow-up examination was completed on _____ (date).</p>	YES	NO
Does patient have any physical or mental conditions which might endanger the health of children or that might prevent him/her from providing adequate care for children? If yes, explain below.		
Are there any restrictions on children's ages, numbers of children or hours of care? If yes, explain below.		
Remarks/Restrictions, if any:		
SIGNATURE OF PHYSICIAN OR REGISTERED NURSE UNDER THE SUPERVISION OF A PHYSICIAN	DATE	PHYSICIAN'S OR NURSE'S NAME (PLEASE PRINT)
NAME OF CLINIC, GROUP PRACTICE, OTHER	IF NURSE IS SUPERVISED BY A PHYSICIAN, INDICATE PHYSICIAN'S NAME	
ADDRESS (STREET, CITY, STATE, ZIP CODE)	TELEPHONE NUMBER ()	

19 CSR 30-60.070 Responsibilities of Caregivers

PURPOSE: This rule establishes the responsibilities of caregivers in license-exempt facilities.

(1) The responsibilities of caregivers are—

(A) Children shall not be left without adult supervision.

1. A caregiver shall personally admit each child upon arrival and personally dismiss each child upon departure. Children shall be dismissed only to a parent, guardian, legal custodian, or to individuals approved by a parent, guardian or legal custodian.

2. A caregiver shall remain in the room with infants, preschool and school-age children while the children are napping and shall be able to see and hear the children if they have difficulty during napping or when they awaken.

3. Caregivers shall be alert to various needs of each child such as thirst, hunger, diaper change, aggression by other children and need for attention;

(B) Facility directors, with the exception of directors in facilities operated by religious organizations, shall establish a written discipline plan that includes simple, understandable rules for children's behavior.

1. Expectations for a child's behavior shall be appropriate for the developmental level of the child and explained to the child.

2. Only constructive, age-appropriate methods of discipline that help children develop self-control and assume responsibility for their own actions shall be used.

3. Physical punishment including, but not limited to, spanking, slapping, shaking, biting or pulling hair is prohibited.

4. Any discipline technique that is humiliating, threatening or frightening to children is prohibited. Children shall not be shamed, ridiculed or spoken to harshly, abusively or with profanity.

5. Punishment or threat of punishment shall not be associated with food, rest, toileting accidents or toilet training.

6. Children shall not be placed in a closet, a locked or unlighted room, or any other frightening place.

7. Children shall not be permitted to intimidate or harm others, harm themselves or destroy property;

(C) Facility directors, with the exception of directors in facilities operated by religious organizations, shall establish a daily schedule of activities for all children in care. The schedule shall include the following:

1. A total of at least one (1) hour of outdoor play for children in full-day attendance,

unless prevented by weather extremes or medical reasons;

2. Toileting and handwashing times;

3. Regular snack and meal times, with infants being fed according to the individualized feeding schedule established by a parent; and

4. A supervised nap or rest period for preschool children after the noon meal, with infants allowed to remain in bed a maximum of thirty (30) minutes after awakening. Toddlers shall be taken out of bed for other activities when they awaken;

(D) Facility directors shall not allow animals which may pose a threat to the health or safety of children on the premises or the animals shall be penned securely in an area that is inaccessible to children;

(E) A caregiver shall supervise children in the bathroom;

(F) Caregivers shall meet the following requirements regarding diapering areas:

1. A safe, waterproof and washable diapering surface shall be used for changing diapers. The diapering area shall be located within or adjacent to the infant/toddler group so the caregiver using the diapering surface can maintain supervision of his/her group of children at all times;

2. One (1) diapering surface shall be provided for every group of eight (8) infants/toddlers and one (1) diapering surface shall be provided for every group of sixteen (16) two (2)-year-old children in the infant/toddler unit;

3. A diapering surface shall be available in the preschool unit if children who are not toilet trained are accepted;

4. Children shall be attended at all times while on the diapering surface;

5. No effort shall be made to toilet train a child until the parent and caregiver agree on when to begin; and

6. Extra clothing shall be available for children in case they accidentally soil themselves;

(G) If meals are served, the facility director is responsible for assuring that the children's diets are planned according to recognized nutrition standards;

(H) In facilities providing care for less than four (4) hours per day or less than twenty (20) hours per week, children may bring sack lunches; and

(I) Caregivers shall meet the following requirements for kitchens:

1. Kitchens shall not be used for children's play activities unless the activities are part of a learning program and the children are supervised by adults;

2. Kitchens shall not be used for napping or as passageways for children;

3. Kitchens shall be separated from all other areas by walls or partitions at least thirty-six inches (36") high; and

4. Animals which may pose a threat to children shall not be permitted on the premises or shall be located in an area that is inaccessible to the children. Animals shall not be permitted in food preparation and storage areas.

AUTHORITY: sections 210.221.1(3) and 210.252.5, RSMo Supp. 1999. This rule was previously filed as 19 CSR 40-60.070. Original rule filed Dec. 1, 1994, effective July 30, 1995. Changed to 19 CSR 30-60.070 July 30, 1998. Emergency amendment filed March 1, 2000, effective March 11, 2000, expired Sept. 6, 2000. Amended: Filed March 1, 2000, effective Aug. 30, 2000.*

**Original authority: 210.221, RSMo 1949, amended 1955, 1987, 1993, 1995, 1999; 210.252, RSMo 1993, amended 1999.*

19 CSR 30-60.080 Fire Safety Requirements

PURPOSE: This rule establishes the fire safety requirements for all license-exempt child care facilities.

(1) These general fire safety requirements shall be followed at all facilities:

(A) At least one (1) portable, operable flashlight shall be accessible to staff;

(B) All flammable materials shall be stored properly and accessible only to authorized persons;

(C) House numbers shall be plainly visible from the street, or the location of the facility shall be made known to the local fire department;

(D) If child care is provided after dark, emergency lighting with a battery back-up shall be required;

(E) Facilities beginning operation after the effective date of these rules shall have a minimum ceiling height of seven feet (7') in all areas used for child care; and

(F) Providers shall notify the nearest fire department when the facility begins operation.

(2) These requirements for exits and doors shall be followed at all facilities:

(A) Each floor occupied by children shall have no less than two (2) exits remote from each other. Exit doors shall swing in the direction of exit travel and shall lead directly, or through an enclosed fire-resistant stairway, to the outside. This includes basement areas;

(B) Children shall not be permitted to sleep above the second floor;

(C) Doors in a means of egress shall swing in the direction of exit travel. This does not apply to facilities caring for ten (10) or less children;

(D) Outside doors shall not be locked to prevent exit while the building is occupied;

(E) Every bathroom door lock or bathroom stall door shall be designed to permit opening from the outside in an emergency. All closet latches shall allow children to open the doors from the inside; and

(F) Facilities shall have smokestop partitions with a one (1)-hour fire resistant rating between each floor. All doors providing separation between floors shall have a forty-five (45) minute fire resistant rating with an attached self-closing device. This does not apply to facilities caring for ten (10) or fewer children.

(3) These requirements for detection and extinguishment systems shall be followed at all facilities:

(A) Each facility caring for more than ten (10), but less than fifty (50) children at one (1) time shall have—

1. Manual pull stations by every exit or where designated by the fire inspector. They shall be connected to an alarm that is audible throughout the facility. One (1)-room facilities that exit directly to the outside are not subject to this requirement; and

2. At least one (1) Underwriter's Laboratory (UL) or Factory Mutual (FM)-approved individual home-type detector shall be located on each floor and in each hazardous area. The number and location of detectors shall be determined by the fire inspector. Detectors shall be tested monthly and batteries changed as needed. A record shall be kept of the dates of testing and changing of batteries;

(B) Facilities caring for fifty (50) or more children at one (1) time shall have a full-coverage electrical fire alarm system with battery back-up, smoke detectors, heat sensors and pull stations. All equipment shall be UL- or FM-certified;

(C) Facilities caring for more than one hundred (100) children at one (1) time shall have a fire alarm that is transmitted to the local fire department or official authority;

(D) Commercial stoves, commercial cooking ranges and deep fryers shall be equipped with a range hood and extinguishing system with an automatic cutoff of fuel supply, and an exhaust system;

(E) A portable five (5) pound, 2A10BC fire extinguisher shall be located near the kitchen. The location shall be at the discre-

tion of the fire inspector. Additional extinguishers may be required by the fire inspector; and

(F) Janitor closets, maintenance shops and boiler or furnace rooms in child care space shall be separated from other parts of the building with construction having at least a one (1)-hour fire resistant rating. The opening shall have solid core doors to close off the area.

(4) Heating equipment shall be installed with permanent connections and proper ventilation.

(A) Space heaters, floor furnaces, wood burning stoves and fireplaces shall have a noncombustible guard or partition to prevent children from touching or tampering with them.

(B) Unvented gas and oil heaters shall not be used.

(C) All gas and electrical heating equipment shall be equipped with thermostatic controls. All hot water heaters shall have a temperature/pressure relief valve, be vented properly and equipped with thermostatic controls. The drain line on the pressure relief valve shall extend to approximately six inches (6") above the floor.

(D) Only commercially manufactured heating equipment shall be used.

(5) Fire and tornado drills shall be conducted at least every three (3) months and shall include all children in care. Unscheduled drills shall be held at the discretion of the state fire marshal or department. Each fire drill shall include a complete evacuation of all persons from the building.

(A) An emergency plan for fires and tornadoes shall be posted conspicuously and shall include the route for the drills and special instructions for nonambulatory infants and children.

(B) A written record shall be kept of the dates and types of drills conducted.

AUTHORITY: sections 210.221.1(3) and 210.252.5, RSMo Supp. 1999. This rule was previously filed as 19 CSR 40-60.080. Original rule filed Dec. 1, 1994, effective July 30, 1995. Changed to 19 CSR 30-60.080 July 30, 1998. Emergency amendment filed March 1, 2000, effective March 11, 2000, expired Sept. 6, 2000. Amended: Filed March 1, 2000, effective Aug. 30, 2000.*

**Original authority: 210.221, RSMo 1949, amended 1955, 1987, 1993, 1995, 1999; 210.252, RSMo 1993, amended 1999.*

19 CSR 30-60.090 Sanitation Requirements

PURPOSE: This rule establishes the requirements for maintaining proper sanitation in license-exempt child care facilities.

(1) The premises of facilities shall be clean and free of unsanitary conditions and observable insects, spiders and rodents.

(A) Floors in bathrooms and kitchens shall be clean. Carpet shall not be used in bathrooms.

(B) Infant and toddler toys shall be kept clean and shall be sanitized after any contact with body fluids.

(C) Sanitizers shall be used in appropriate concentrations.

(D) If toothbrushes, combs, hairbrushes or other personal care items are used, they shall be individually air-dried and labeled with each child's name.

(2) Bathrooms shall meet the following requirements:

(A) Toilets, urinals and handwashing sinks shall be clean and odor free;

(B) Toilet and handwashing facilities shall be in working order and convenient for the children's use;

(C) Paper towels or a hot-air dryer that is installed and maintained properly, soap and toilet paper shall be provided and accessible so the children can reach them without assistance;

(D) Potty chairs shall be located in the bathroom and shall be emptied, cleaned and sanitized after each use; and

(E) Bathrooms shall be enclosed with full walls and solid doors.

(3) Diapering areas shall meet the following requirements:

(A) Diapering supplies and a handwashing sink with warm, running water shall be in a location that allows the caregiver to maintain supervision of the children in care at all times;

(B) Disposable tissues or wipes shall be used to clean the child at each time of diapering. Any diapering creams, powders or other products applied at the time of diapering shall be approved or provided by the parent(s) and labeled with the child's name;

(C) The diapering surface, after each use, shall be cleaned and sanitized with a sanitizer approved by the department;

(D) Diapers and wet clothing shall be changed promptly;

(E) Wet or soiled disposable diapers shall be placed in an airtight disposal container located in the diaper change area and discarded daily. If cloth diapers are used, they

shall be stored in airtight plastic bags and removed from the building daily; and

(F) The diapering and handwashing areas shall be separate from food service areas and food-related materials.

(4) Kitchens and meals shall meet the following requirements:

(A) A kitchen shall be required for meal preparation if a provider serves meals, unless meals are catered from a source approved by a state or local health department;

(B) A kitchen used for meal preparation shall have sufficient equipment to serve the number of children in care. Equipment shall include a stove, sink, hot and cold running water, a refrigerator, and storage space for food, dishes and cooking utensils;

(C) If meals are catered, a sink with hot and cold running water, a refrigerator and storage space shall be provided; and

(D) Floors shall be a hard, smooth surface, easily cleanable and in good repair. Facilities caring for ten (10) or less children may use carpet.

(5) Food equipment and utensils shall meet the following requirements:

(A) All food equipment, utensils and food preparation surfaces shall be cleaned properly and sanitized with a sanitizer approved by the department;

(B) Kitchen equipment that produces excessive heat and moisture shall be vented properly;

(C) If a mechanical dishwasher is used, it shall have the capacity to sanitize all dishes and utensils used in meal preparation;

(D) Facilities caring for more than twenty (20) children shall use a three (3)-vat sink; single-service utensils, cups and plates in conjunction with the sink; or a commercial dishwasher. Facilities caring for twenty (20) children or less may use a two (2)-vat sink and a container large enough to sanitize the largest utensil used;

(E) Sinks shall be equipped with hot and cold running water and an area for draining dishes. Approved dishwashing methods shall be used;

(F) Facilities caring for more than twenty (20) children shall have separate handwashing sinks in food preparation areas equipped with hot and cold running water, hand cleanser and paper towels;

(G) Food preparation areas shall have adequate lighting;

(H) An accurate thermometer shall be located in each refrigerator. Each refrigerator shall be maintained at a temperature of forty-one degrees Fahrenheit (41°F) or less;

(I) Freezers shall keep foods in a frozen solid state; and

(J) A metal stem bayonet-type thermometer for checking food temperatures shall be used to check temperatures.

(6) Nonpublic water systems shall meet the requirements of section 256.600, RSMo.

(A) Public water systems shall meet the requirements of sections 640.010 and 640.140, RSMo.

(B) All water systems shall be free of cross-connections and threaded faucets shall have a backflow preventive device.

(7) Sewage systems shall be designed for the capacity of the facility, operate properly, be nuisance free and meet applicable laws and rules of the department and the Department of Natural Resources.

(8) Adequate refuse disposal and storage shall be provided. A sufficient number of nonabsorbent containers and lids shall be available.

(9) Providers shall observe the following food protection practices:

(A) Cross-contamination of raw and cooked foods is prohibited. Hands shall not be washed in equipment washing vats;

(B) Home-canned foods shall not be used;

(C) All food shall be from an approved and inspected source, except fresh or frozen fruits and vegetables;

(D) All food shall be in sound condition;

(E) Catered food shall be from a caterer that is inspected and approved by a state or local health department and shall be received at the facility meeting all temperature requirements;

(F) Adequate equipment shall be provided for on-site storing and serving of food;

(G) Food items shall be covered properly or packaged and protected from contamination;

(H) Food placed on the table family style shall be discarded if not eaten;

(I) Food shall be thawed properly; and

(J) Food shall be cooked, stored and served at safe temperatures. Foods requiring hot storage shall have an internal temperature of one hundred forty degrees Fahrenheit (140°F) or above. Cool foods requiring refrigeration after preparation shall have an internal temperature of forty-one degrees Fahrenheit (41°F) or below.

AUTHORITY: sections 210.221.1(3) and 210.252.5, RSMo Supp. 1999. This rule was previously filed as 19 CSR 40-60.090. Original rule filed Dec. 1, 1994, effective July 30, 1995. Changed to 19 CSR 30-60.090 July 30, 1998. Emergency amendment filed*

March 1, 2000, effective March 11, 2000, expired Sept. 6, 2000. Amended: Filed March 1, 2000, effective Aug. 30, 2000.

**Original authority: 210.221, RSMo 1949, amended 1955, 1987, 1993, 1995, 1999; 210.252, RSMo 1993, amended 1999.*

19 CSR 30-60.100 Physical Plant, Space, Supplies and Equipment

PURPOSE: This rule sets forth the requirements for the physical plant, indoor and outdoor space, supplies and equipment for license-exempt child care facilities.

(1) The premises of all facilities shall be safe and suitable for the care of children.

(A) Children shall have no access to areas not approved for child care.

(B) Porches, decks, stairwells or other areas in approved child care space shall have protective handrails and guardrails if there is a drop-off of more than twenty-four inches (24") from which children might fall and be injured. Guardrails shall be at least thirty-six inches (36") high, and shall have bars placed at intervals of no more than three and one-half inches (3 1/2"), or have protective material to prevent a three and one-half inch (3 1/2") sphere from passing through the bars.

(C) Approved safety gates at stairways and doors shall be provided as needed.

(D) Hazardous materials such as cleaning supplies, poisonous materials, medicines, alcoholic beverages or hazardous personal care items shall be inaccessible to children and stored to prevent cross-contamination of food and food-related materials.

(E) Ammunition, guns, hunting knives, bows and arrows, or other weapons shall not be on the premises unless stored in a locked cabinet or closet.

(F) Walls, ceilings, floors and equipment shall be finished with materials that can be cleaned easily and shall be free of splinters, cracks and chipped paint. Floor covering shall be in good condition. The facility shall be free of all lead hazards and asbestos that is friable or dangerous.

(2) Indoor space requirements shall include:

(A) Adequate artificial or natural lighting throughout each room used for child care;

(B) Room temperatures that are no less than sixty-eight degrees Fahrenheit (68°F) and no more than eighty-five degrees Fahrenheit (85°F) measured two feet (2') from the floor;

(C) A telephone in working order available for incoming and outgoing calls;

(D) Police, fire department, poison control, ambulance and other emergency numbers posted near the telephone;

(E) At least thirty-five (35) square feet of usable floor space for each preschool and school-age child, and at least forty-five (45) square feet of usable floor space for each infant/toddler.

1. Floor space shall be measured wall-to-wall from the inside walls of areas used for children's activities.

2. Floor space shall not include kitchens, bathrooms, closets, staff lounges, office space, hallways used exclusively as passageways and floor space occupied by furniture or shelving not used for children or their activities.

3. In a facility located in an owner's permanent residence, the area used for child care, including play space and bathrooms, shall be separate from the family living quarters unless the facility is providing care for ten (10) or fewer children; and

(F) Facilities providing infant and toddler care shall meet the following requirements:

1. The floor shall be covered with material that can be cleaned. Carpets or rugs shall be spot-cleaned when soiled. They shall be sanitized with an approved sanitizer when contaminated with body fluids;

2. A facility with a capacity of more than twenty (20) children or more than four (4) infants and toddlers shall have infant and toddler space separate from the older children. The space shall be separated by floor-to-ceiling walls with separate play, sleeping and bathroom space;

3. No more than twenty-four (24) infants/toddlers shall be in a single room. A room is an area separated from other parts of the building by floor to ceiling walls. Stable partitions, a minimum of four feet (4') in height, shall be used to separate the infant/toddler and two (2)-year old groups within a room; and

4. No more than eight (8) infant/toddlers or sixteen (16) two (2) year olds shall be in a group.

(3) General requirements for bathrooms shall include:

(A) One (1) flush toilet and one (1) adjacent handwashing facility with running water available for every twenty (20) children. Urinals may be substituted for up to one-half (1/2) the required number of toilets, with a minimum of one (1) toilet per bathroom;

(B) Water temperatures at handwashing facilities accessible to children shall not exceed one hundred twenty degrees Fahrenheit (120°F);

(C) Locks or latches shall not be used on bathroom or bathroom stall doors used by children below the first grade;

(D) If a facility provides care for more than fifty (50) children, a separate bathroom or bathroom stall shall be available for caregivers;

(E) When a facility offers care for more than twenty (20) children, including school-age children in first grade or above, bathrooms shall be provided as follows:

1. Separate girls' and boys' bathrooms; or

2. If twenty (20) or fewer school-age children are in care, one (1) bathroom may be designated for school-age children only; and

(F) For infants, toddlers and children not toilet trained, one (1) flush toilet and one (1) adjacent handwashing facility with running water shall be available for every twenty-four (24) children in an infant/toddler unit. One (1) potty chair, junior commode or toilet with an adapter seat shall be provided for every four (4) children being toilet trained.

(4) Outdoor space requirements shall include:

(A) An outdoor play area available on or adjoining the child care property. Facilities with a capacity of more than ten (10) children shall have a fenced play area. Play areas in facilities with a capacity of ten (10) or fewer children shall be fenced when necessary for the protection of children from traffic, water or other hazards. Fences shall be at least forty-two inches (42") high. Openings in fences shall be no greater than three and one-half inches (3 1/2");

(B) A minimum of seventy-five (75) square feet per child of outdoor play area. A sufficient area shall be available to accommodate one-third (1/3) the capacity of the facility at one (1) time with a minimum of seven hundred fifty (750) square feet;

(C) The play area shall be safe for children's activities. It shall be well-maintained and free of hazards such as poisonous plants, broken glass, barbed wire, open wells, rocks and other debris, and shall have good drainage;

(D) The fall-zone area under and around outdoor equipment over twenty-four inches (24") high covered with impact-absorbing materials that will effectively cushion the fall of a child. Materials may include sand, pea gravel, tanbark, shredded tires, wood chips, rubber matting or other approved resilient material;

(E) Outdoor play space for infants and toddlers separate from that used for older children, or the same space used at different times. This does not apply to facilities caring for a maximum of twenty (20) children,

including no more than four (4) infant/toddlers;

(F) Swimming and wading pools used by children that are constructed, maintained and used in a manner that protects the health and safety of children.

1. Swimming and wading pools shall be enclosed by a fence at least forty-two inches (42") high with a locked gate.

2. Swimming and wading pools shall have a water filtration system. The water shall be treated, cleaned and maintained in a manner approved by a state or local health authority;

(G) Outdoor equipment shall be safely constructed, in good condition, and free of sharp, loose or pointed parts. Stationary equipment such as swings, slides and climbers shall be anchored securely; and

(H) Any part of outdoor equipment from which children might fall shall not exceed six feet (6') in height.

(5) When children are napped on the premises, indoor equipment requirements shall include:

(A) An individual mat, cot or bed with an individually assigned sheet and blanket provided for each child who naps or sleeps. Upper levels of bunk beds shall not be used. If mats are used they shall have nonabsorbent, cleanable coverings and shall not be placed directly on concrete, linoleum, hardwood, or tile floors when children are resting or napping. They shall be used only over carpeting and shall be long enough so the child's head or feet do not rest off the mat. Mats shall be washed and sanitized at least weekly, or more often as needed, and shall be cleaned and sanitized before use by another child;

(B) Clean bedding with sheets laundered at least once a week or when soiled. Once bedding has been used by a child, it shall not be used by another child until it is laundered;

(C) Sleeping equipment arranged to provide at least a two foot (2') aisle on one (1) long side of the equipment; and

(D) An individually assigned crib, portable crib or playpen for each infant. Stack cribs shall not be used. Cots or mats may be used for napping for toddlers twelve (12) months and older with parental consent. Infants shall not use mats for napping.

1. Cribs and playpens shall have side and end rail spokes not more than two and three-eighths inches (2 3/8") apart.

2. The crib mattress or playpen pad shall be sized correctly to the crib or playpen. The pad shall be in good condition, waterproof, clean and dry. Sheets and covers shall be changed when soiled or wet.

(6) Individual seating and table space shall be available for children twelve (12) months of age and older.

(A) Facilities shall have one (1) piece of mealtime feeding equipment for every four (4) infants/toddlers.

(B) Equipment shall allow children to sit comfortably and securely while being fed. Appropriate restraints shall be used and infants shall not be left unattended.

(C) Walkers shall not be used.

(7) Indoor play equipment and materials shall be provided and shall be clean and in good condition with all parts intact. Infants and toddlers shall have safe toys. Toys, parts of toys or other materials small enough to be swallowed shall not be used.

*AUTHORITY: sections 210.221.1(3) and 210.252.5, RSMo Supp. 1999. * This rule was previously filed as 19 CSR 40-60.100. Original rule filed Dec. 1, 1994, effective July 30, 1995. Changed to 19 CSR 30-60.100 July 30, 1998. Emergency amendment filed March 1, 2000, effective March 11, 2000, expired Sept. 6, 2000. Amended: Filed March 1, 2000, effective Aug. 30, 2000.*

**Original authority: 210.221, RSMo 1949, amended 1955, 1987, 1993, 1995, 1999; 210.252, RSMo 1993, amended 1999..*

19 CSR 30-60.110 Transportation and Field Trip Requirements

PURPOSE: This rule identifies the requirements the provider in a license-exempt child care facility is responsible for when transporting children and taking field trips.

(1) The caregiver shall ensure the care, safety and supervision of children when children are transported away from the premises.

(A) Written parental consent shall be on file for field trips and transportation, and the facility director shall have a procedure on file for handling emergencies.

(B) Parents shall be informed when field trips are planned.

(C) Short, unscheduled walks may be taken without parent notification. Unscheduled outings shall be discussed with a parent at the time of enrollment.

(D) All children shall be seated in a stationary seat in the vehicle and restrained by seat belts or child restraint devices as required by Missouri law.

(E) Identifying information, including the name and address of the facility, the names of the children and the name, addresses and telephone number of each child's parent(s)

shall be carried in the vehicle and available to staff members responsible for the children.

(F) Children shall remain seated while the vehicle is in motion and doors shall be locked when the vehicle is moving.

(G) Children shall be assisted when necessary while entering or leaving the vehicle and shall enter and leave the vehicle from the curbside unless the vehicle is in a protected area or driveway. Children shall not be left unattended in a vehicle at any time.

(H) Caregivers shall have a procedure for taking head counts before leaving the facility, during field trips and when back at the facility.

(2) The driver of any vehicle used to transport children shall be no less than eighteen (18) years of age and shall have a valid driver's license.

(3) All vehicles used to transport children shall be licensed. Children shall not be transported in campers, trailers or the back of trucks.

*AUTHORITY: sections 210.221.1(3) and 210.252.5, RSMo Supp. 1999. * This rule was previously filed as 19 CSR 40-60.110. Original rule filed Dec. 1, 1994, effective July 30, 1995. Changed to 19 CSR 30-60.110 July 30, 1998. Emergency amendment filed March 1, 2000, effective March 11, 2000, expired Sept. 6, 2000. Amended: Filed March 1, 2000, effective Aug. 30, 2000.*

**Original authority: 210.221, RSMo 1949, amended 1955, 1987, 1993, 1995, 1999; 210.252, RSMo 1993, amended 1999.*

19 CSR 30-60.120 Admission Procedures and Required Reports and Records

PURPOSE: This rule establishes admission procedures, records and reports facility directors are required to keep for children and caregivers.

(1) The facility director shall have an admitting procedure for each child in care that includes a plan for caring for the child if s/he becomes ill or needs emergency medical treatment. The director shall maintain an individual file on each child in order to communicate with the parent(s), guardian or legal custodian. The director shall have a plan for any child with special health needs, identified through a physical assessment by a licensed physician or an advance practice nurse, to ensure that those needs are met during care.

(2) The facility director shall obtain and file the following written information on each child:

(A) The child's full name, address, birthdate and the date care begins and ends;

(B) The full name of the parent(s), guardian or legal custodian, home address, work schedule, home and work telephone numbers, and employer's name and address;

(C) Full name, address and phone number of a friend or relative who might be reached in an emergency when a parent, guardian or legal custodian can not be reached;

(D) Name and phone number of a physician and preferred hospital to be used in an emergency;

(E) The name of the individual(s) authorized to take the child from the premises; and

(F) Information concerning any accident or injury to a child while in care or any emergency medical care given.

(3) Individual records of a child shall be retained for one (1) year after the child discontinues attendance.

(4) Facility directors, shall obtain and file the following acknowledgments by a parent of each child:

(A) S/he has been informed of the required health and safety inspections and that the inspection forms are available for review; and

(B) S/he understands and agrees that the child may not be accepted for care when ill.

(5) A copy of the completed application for child abuse/neglect screening shall be on file in each employee's record.

(6) All enrollment records, physical assessment reports and attendance records shall be filed in a place known to caregivers and shall be accessible during normal visiting hours for inspection by the department. Records shall not be in a locked area or removed from the premises during operating hours.

*AUTHORITY: sections 210.221.1(3) and 210.252.5, RSMo Supp. 1999. * This rule was previously filed as 19 CSR 40-60.120. Original rule filed Dec. 1, 1994, effective July 30, 1995. Changed to 19 CSR 30-60.120 July 30, 1998. Emergency amendment filed March 1, 2000, effective March 11, 2000, expired Sept. 6, 2000. Amended: Filed March 1, 2000, effective Aug. 30, 2000.*

**Original authority: 210.221, RSMo 1949, amended 1955, 1987, 1993, 1995, 1999; 210.252, RSMo 1993, amended 1999.*