This rule was initially drafted by DEL staff with input from stakeholders. The tracked changes show revisions made to language and weights through negotiations by early learning providers (centers, Head Start/ECEAP, and family homes), parents, and DEL Licensing staff. These rules are still in development/negotiation and your comments will be given to negotiators.

Key to edits and terms:
- **example** = deleted
- **example** = inserted
- **example** = rewritten by DEL at request of negotiators
- consensus reached = negotiators agree to the draft rule language & weight
- in queue for consensus = negotiated by subset of negotiators, scheduled to be reviewed by all
- tabled = negotiators reviewed, did not reach agreement, and are contemplating next steps

### 170-300-0475- **Subgroup Negotiated/In queue for Consensus**

**Duty to protect children and report incidents.**

1. **When aware,** an early learning provider must protect enrolled children from child abuse, neglect, maltreatment, or exploitation as defined in chapter 26.44 RCW while in care. **Weight #8**

2. An early learning provider must report by phone upon knowledge of the following to:
   - (a) DSHS children’s administration intake (Child Protective Services) or law enforcement at the first opportunity, but in no case longer than 48 hours, pursuant to RCW 26.44.030 and .040, and to the department:
     - (i) The death of a child while in the early learning program’s care or the death from injury or illness that may have occurred while the child was in care;
     - (ii) A child’s attempted suicide or talk about attempting suicide;
     - (iii) Any suspected physical, sexual or emotional child abuse;
     - (iv) Any suspected child neglect, child endangerment, or child exploitation;
     - (v) A child’s disclosure of sexual or physical abuse; or
     - (vi) Inappropriate sexual contact between two or more children.
   - (b) Emergency Services (911) immediately, and to the department within 24 hours:
     - (i) A child is missing from care, as soon as staff realize the child is missing;
     - (ii) Medical emergency (injury or illness) that requires immediate professional medical care;
     - (iii) A child is given too much of any oral, inhaled or injected medication, or a child took or received another child’s
(c) Washington Poison Center immediately after calling 911, and to the department within 24 hours:
(i) A poisoning or suspected poisoning;
(ii) child was given too much of an oral, inhaled, or injected medication or a child has taken or received another child’s medication.
(iii) The provider must follow any directions provided by Washington Poison Center.

(d) Local health jurisdiction or DOH immediately, and to the department within 24 hours:
(i) An occurrence of food poisoning or reportable contagious disease as defined in chapter 246-101 WAC;
(ii) person excluded from the early learning program by the health department or local health officer on the basis of a diagnosis may not return to the early learning program until approved to do so by the local health officer.

(e) The department at the first opportunity, but in no case longer than 24 hours, upon knowledge of any person required by chapter 170-06 WAC to have a change in their background check history due to:
(i) A pending charge or conviction for a crime listed in WAC 170-06;
(ii) allegation or finding of child abuse, neglect, maltreatment or exploitation under chapter 26.44 RCW or chapter 388-15 WAC;
(iii) allegation or finding of abuse or neglect of a vulnerable adult under chapter 74.34 RCW; or
(iv) pending charge or conviction from outside Washington state consistent with or the same crime listed in the Director’s List in chapter 170-06 WAC, or “negative action” as defined in RCW 43.215.010

(f) The department who the next responsible and qualified person is for the operation of the early learning program if the primary person has an emergency absence, serious illness, or incapacity. Weight #8

(3) In addition to reporting to the department by phone or e-mail and submit a written incident report on a department form (found at https://del.wa.gov/providers-educators/publications-forms-and-research/licensing-forms-and-documents-providers) within 24 hours, an early learning provider must also submit a written incident report on a department form (found at https://del.wa.gov/providers-educators/publications-forms-and-research/licensing-forms-and-documents-providers) within 48 hours for:

(a) Situations that required an emergency response from Emergency Services (911), Washington Poison Center, or DOH;

(b) Situations that occur while children are in care that may put children at risk including, but not limited to, inappropriate sexual touching, neglect, physical abuse, maltreatment, or exploitation; and

(c) A serious injury to a child in care. “Serious injury” means:
(i) Injuries resulting in overnight hospital stay;
(ii) Severe neck or head injury;
(iii) Choking/unexpected breathing problems;
(iv) Severe bleeding;
(v) Shock or acute confused state;
(vi) Unconsciousness;
(vii) Chemicals in eyes, on skin, or ingested in the mouth;
(viii) Near-drowning;
(ix) Broken bone;
(x) Severe burn requiring professional medical care;
(xi) Poisoning; and
(xii) Medication overdose. **Weight #7**

(4) An early learning provider must immediately report to the parent or guardian of a child:
   (a) That child’s death, serious injury, need for emergency or poison services;
   (b) An incident involving that child which was reported to the local health district or DOH;
   (c) If the provider fails to give that child authorized medication; or
   (d) If that child has an allergic reaction, pursuant to WAC 170-300-0186. **Weight #6**