



GOVERNMENT OF BERMUDA
Department of Health

NEW LICENCING APPLICATION V.5

Day Care Centre Regulations, 1999

Please complete this application and email to the:
Child Care Regulation Programme
childcare@gov.bm

New Day Care Centre Health and Safety Checklist

The following items are sourced from Regulations 4, 11, 16, and 17, Day Care Centre Regulations 1999.
For full requirements for Day Care Centre's please read the Day Care Centre Regulations 1999.

<input type="checkbox"/>	Space has a valid fire certificate.
<input type="checkbox"/>	25 sq. ft of activity space per child (<i>each classroom measured wall to wall, deducting teacher desks, adult storage, children's cubbies, dramatic play equipment, sinks</i>).
<input type="checkbox"/>	All walls, floors, ceilings and other surfaces are clean and in good repair.
<input type="checkbox"/>	Rooms must be adequately lit and ventilated.
<input type="checkbox"/>	Stairwells have guards at the top and bottom of openings and into areas used by children (indoor and outdoor).
<input type="checkbox"/>	Suitable sized furniture for at least 75% of children in the class.
<input type="checkbox"/>	All doors, windows and openings to outer air are effectively screened.
<input type="checkbox"/>	All outlets, wiring and connections are in accordance with electrical standards.
<input type="checkbox"/>	All outlets within reach of children have approved cover plates.
<input type="checkbox"/>	Cleaning supplies and medication stored out of reach of children.
<input type="checkbox"/>	Windows above the ground floor have guards at the top and bottom of openings and into areas used by children.

Child Care Regulation Programme

Department of Health, Continental Building, 25 Church Street, Hamilton HM12

Phone: (+1 441) 278-4936

Email: childcare@gov.bm

<input type="checkbox"/>	Fire Extinguisher accessible and charged.
<input type="checkbox"/>	Fire exits uncluttered/ accessible.
<input type="checkbox"/>	Working Cell phone or land line telephone.
<input type="checkbox"/>	All children should have an assigned place to sleep (i.e. cot) that is age appropriate, washable and of sound construction; or a no napping policy.
<input type="checkbox"/>	Approved drinking water source used on premises.
<input type="checkbox"/>	Designated space for administrative duties.
<input type="checkbox"/>	1 toilet and 1 sink per 15 children.
<input type="checkbox"/>	Separate staff bathroom and sink.
<input type="checkbox"/>	Garbage containers accessible to children have lids.
<input type="checkbox"/>	Outdoor play space at least 50 sq Ft. per child using it.
<input type="checkbox"/>	Outside space has access to shade.
<input type="checkbox"/>	Outside space is free from hazards.
<input type="checkbox"/>	Outside space is fenced with a suitable barrier at least 4 feet high and in good repairs.
<input type="checkbox"/>	Approved surfacing under play equipment that aligns with equipment instruction manual.

SECTION A: Day Care Centre Information

Day Care Centre Name:

Physical Address:

Phone No:

Cellular No:

Email Address:

Hours of Operation:

OPERATOR (NAME):

Phone No:

Cellular No:

Email Address:

Home Address:

PERSON IN CHARGE (NAME):

Degree, Educational Transcript (to verify courses in Early Childhood), and Resume required at time of submission.

Phone No:

Cellular No:

Email Address:

Contact Details for CCRP Website

Email Address:

Phone No:

Cellular No:

SECTION B: Proposed Enrollment

Young Infants (3-9 months): _____ Older Infants (9-12 months): _____ Toddlers (12-24 months): _____

2 Year Olds: _____

3 Year Olds: _____

4 Year Olds: _____

Please list the number of children's toilets and wash basins you have available on site:

Children's Toilets: _____

Wash basins: _____

Potties: _____

Please confirm that you have at least one staff bathroom (sink and toilet) that is separate from the children's bathroom and list its location below:

Location:

SECTION C: *Structure and Utilities*

- a. Attach a blueprint or scaled drawing showing the proposed ratios of each class/group (i.e. 1 year old 2:10), including external play area(s). Please refer to the Child to Staff Ratio form for guidance.
- b. Contact the Fire Department via email fireprotection@gov.bm for your annual inspection giving enough time to obtain a current Fire Certificate. Please note the annual inspection period for Day Care Centres falls between June – August.
- c. Your General Liability Insurance Policy must be renewed annually.
- d. Occupancy Certificates are only required for Day Care Centres who have undergone recent renovations or spaces that required change of use from the Planning Department.
- e. Your Elevator Certificate must be renewed annually.
- f. Indoor and outdoor photos of the centre spaces.

SECTION D: *Approved drinking water source*

Please describe in writing your approved drinking water source on your premises (i.e. boiled water, pure water, water bottles, parents will provide spare water):

SECTION E: *Programme*

List the name of purchased Curriculum or submit the details of centre created Curriculum

*Curriculum:

SECTION F: Documents and Policies in place

“Must”: is used when the action or item is required in Bermuda law

“Should”: is used when describing a best practice

DOCUMENTS	Attached	On file at CCRP	Notes
General Liability Insurance Policy:	<input type="checkbox"/>	<input type="checkbox"/>	
Valid Fire Certificate:	<input type="checkbox"/>	<input type="checkbox"/>	
Occupancy Certificate (if applicable):	<input type="checkbox"/>	<input type="checkbox"/>	
Elevator Certificate (if applicable):	<input type="checkbox"/>	<input type="checkbox"/>	
Day Care Enrollment Application:	<input type="checkbox"/>	<input type="checkbox"/>	
Curriculum:	<input type="checkbox"/>	<input type="checkbox"/>	
MUST POLICIES			
Sick Policy (COVID-19 included):	<input type="checkbox"/>	<input type="checkbox"/>	
Medicine Policy:	<input type="checkbox"/>	<input type="checkbox"/>	
Transportation Policy:	<input type="checkbox"/>	<input type="checkbox"/>	
Safe Sleep Policy children under 12 months:	<input type="checkbox"/>	<input type="checkbox"/>	
Fire & Emergency Evacuation Policy:	<input type="checkbox"/>	<input type="checkbox"/>	
Mandatory Reporting Policy:	<input type="checkbox"/>	<input type="checkbox"/>	
Discipline Policy:	<input type="checkbox"/>	<input type="checkbox"/>	
SHOULD POLICIES			
Accident & Injury:	<input type="checkbox"/>	<input type="checkbox"/>	
Complaint Policy:	<input type="checkbox"/>	<input type="checkbox"/>	
Enrolment Policy:	<input type="checkbox"/>	<input type="checkbox"/>	
Media Viewing Policy :	<input type="checkbox"/>	<input type="checkbox"/>	
Open Door Policy: (Parents/ Visitors/ Support Services)	<input type="checkbox"/>	<input type="checkbox"/>	
Food prepared on site: <input type="checkbox"/> Yes <input type="checkbox"/> No If applicable, please submit a copy of the certificate from Environment Health.			
Please note that approval for the Director of Health is required for the preparation and service of meals to children and the kitchen must comply with Public Health Food Regulations 1950.			

SECTION G: Screening Questions - Circle Yes or No for all questions. If you answer yes to any of the following questions provide an explanation below.

1. Have you been charged with, convicted of, or pled guilty or no contest to a crime in Bermuda or any other country?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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Explanation:

2. Have you had any form of investigation or disciplinary action by any health or social services related agency in Bermuda or another country?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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Explanation:

SECTION H: Declaration Statement – (check each box after reading and sign below)

- I agree the information in this application and the information in any required or following documentation is true and accurate to the best of my knowledge. I understand that false statements may result in the removal from the Day Care Centre.
- I agree to notify the Child Care Regulation Programme of any changes to the information provided in this licencing application form.
- I agree for the Child Care Regulation Programme and/or MOH to contact relevant persons (including but not limited to regulatory and government entities) to verify the information provided in this application.
- I agree that I will adhere to the Children Act 1998, Day Care Centre Regulations 1999, and Child Care Standards 2018.

I, _____, have knowledge of my responsibility to report known or suspected child abuse in compliance with Part III of the Children Act 1998.

I certify to the best of my knowledge that the information contained in this application is true and factual.

Printed Name of Applicant

Signature of Applicant

Date

INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED

PATI disclaimer: This correspondence and any response thereof is subject to public disclosure under the Public Access to Information Act 2010. Most exempt records may be disclosed if it is in the public interest (s.21). Personal information, such as names and personal details of service users, patients, complaints, children and vulnerable adults, is exempt from disclosure (s.23). Information of people receiving discretionary benefit such as a licence is not personal information and can be disclosed (s.24 (1)). Commercial information and information received in confidence may be disclosed if it is in the public interest (s.25&s. 26).