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1.2	Delete everything after the enacting clause and insert:
1.3 1.4	"Section 1. Minnesota Statutes 2019 Supplement, section 245A.40, subdivision 7, is amended to read:
1.5 1.6 1.7	Subd. 7. <b>In-service.</b> (a) A license holder must ensure that the center director, staff persons, substitutes, and unsupervised volunteers complete in-service training each calendar year.
1.8 1.9 1.10 1.11 1.12	(b) The center director and staff persons who work more than 20 hours per week must complete 24 hours of in-service training each calendar year. Staff persons who work 20 hours or less per week must complete 12 hours of in-service training each calendar year. Substitutes and unsupervised volunteers must complete the requirements of paragraphs (e) to (h) (d) through (g) and do not otherwise have a minimum number of hours of training to
<ul><li>1.13</li><li>1.14</li><li>1.15</li></ul>	complete.  (c) The number of in-service training hours may be prorated for individuals not employed for an entire year.
1.16 1.17 1.18	<ul><li>(d) Each year, in-service training must include:</li><li>(1) the center's procedures for maintaining health and safety according to section 245A.41 and Minnesota Rules, part 9503.0140, and handling emergencies and accidents according</li></ul>
<ul><li>1.19</li><li>1.20</li><li>1.21</li></ul>	to Minnesota Rules, part 9503.0110;  (2) the reporting responsibilities under section 626.556 and Minnesota Rules, part 9503.0130;

..... moves to amend H.F. No. 3737 as follows:

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Section 1.

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2.1	(3) at least one-half hour of training on the standards under section 245A.1435 and on
2.2	reducing the risk of sudden unexpected infant death as required under subdivision 5, if
2.3	applicable; and
2.4	(4) at least one-half hour of training on the risk of abusive head trauma from shaking
2.5	infants and young children as required under subdivision 5a, if applicable.
2.6	(e) Each year, or when a change is made, whichever is more frequent, in-service training
2.7	must be provided on: (1) the center's risk reduction plan under section 245A.66, subdivision
2.8	2; and (2) a child's individual child care program plan as required under Minnesota Rules,
2.9	part 9503.0065, subpart 3.
2.10	(f) At least once every two calendar years, the in-service training must include:
2.11	(1) child development and learning training under subdivision 2;
2.12	(2) pediatric first aid that meets the requirements of subdivision 3;
2.13	(3) pediatric cardiopulmonary resuscitation training that meets the requirements of
2.14	subdivision 4;
2.15	(4) cultural dynamics training to increase awareness of cultural differences; and
2.16	(5) disabilities training to increase awareness of differing abilities of children.
2.17	(g) At least once every five years, in-service training must include child passenger
2.18	restraint training that meets the requirements of subdivision 6, if applicable.
2.19	(h) The remaining hours of the in-service training requirement must be met by completing
2.20	training in the following content areas of the Minnesota Knowledge and Competency
2.21	Framework:
2.22	(1) Content area I: child development and learning;
2.23	(2) Content area II: developmentally appropriate learning experiences;
2.24	(3) Content area III: relationships with families;
2.25	(4) Content area IV: assessment, evaluation, and individualization;
2.26	(5) Content area V: historical and contemporary development of early childhood
2.27	education;
2.28	(6) Content area VI: professionalism;
2.29	(7) Content area VII: health, safety, and nutrition; and
2.30	(8) Content area VIII: application through clinical experiences.
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Section 1. 2

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(i) For purposes of this subdivision, the following terms have the meanings given them.

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- (1) "Child development and learning training" means training in understanding how children develop physically, cognitively, emotionally, and socially and learn as part of the children's family, culture, and community.
- (2) "Developmentally appropriate learning experiences" means creating positive learning experiences, promoting cognitive development, promoting social and emotional development, promoting physical development, and promoting creative development.
- (3) "Relationships with families" means training on building a positive, respectful relationship with the child's family.
- (4) "Assessment, evaluation, and individualization" means training in observing, recording, and assessing development; assessing and using information to plan; and assessing and using information to enhance and maintain program quality.
- (5) "Historical and contemporary development of early childhood education" means training in past and current practices in early childhood education and how current events and issues affect children, families, and programs.
- (6) "Professionalism" means training in knowledge, skills, and abilities that promote ongoing professional development.
- (7) "Health, safety, and nutrition" means training in establishing health practices, ensuring safety, and providing healthy nutrition.
- (8) "Application through clinical experiences" means clinical experiences in which a person applies effective teaching practices using a range of educational programming models.
- (j) The license holder must ensure that documentation, as required in subdivision 10, includes the number of total training hours required to be completed, name of the training, the Minnesota Knowledge and Competency Framework content area, number of hours completed, and the director's approval of the training.
- (k) In-service training completed by a staff person that is not specific to that child care center is transferable upon a staff person's change in employment to another child care program.

**EFFECTIVE DATE.** This section is effective the day following enactment.

Section 1. 3

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Sec. 2. Minnesota Statutes 2018, section 245A.50, as amended by Laws 2019, First Special Session chapter 9, article 2, section 53, is amended to read:

## 245A.50 FAMILY CHILD CARE TRAINING REQUIREMENTS.

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- Subdivision 1. Initial training Definitions and general provisions. (a) License holders, caregivers, and substitutes must comply with the training requirements in this section. For the purposes of this section, the following terms have the meanings given:
- (1) "Basics of Licensed Family Child Care for Substitutes" means a course that the commissioner has developed that includes the following topics: preventing and controlling infectious diseases; administering medication; preventing and responding to allergies; ensuring building and physical premise safety; handling and storing biological contaminants; 4.10 preventing and reporting child abuse and maltreatment; emergency preparedness; and child development; 4.12
  - (2) "caregiver" means an adult other than the license holder who supervises children for a cumulative total of more than 30 days in any 12 month period;
    - (3) "helper" means a minor, ages 13 to 17, who assists in caring for children; and
- (4) "substitute" means an adult who assumes responsibility for a provider for a cumulative 4.16 4.17 total of not more than 30 days in any 12 month period.
  - (b) Helpers who assist with care on a regular basis must complete six hours of training within one year after the date of initial employment.
  - (c) Training requirements established under this section that must be completed prior to initial licensure must be satisfied only by a newly licensed child care provider or by a child care provider who has not held an active child care license in Minnesota in the previous 12 months. A child care provider who voluntarily cancels a license or allows the license to lapse for a period of less than 12 months and who seeks reinstatement of the lapsed or canceled license within 12 months of the lapse or cancellation must satisfy the annual, ongoing training requirements, and is not required to satisfy the training requirements that must be completed prior to initial licensure. A child care provider who relocates within the state must (1) satisfy the annual, ongoing training requirements according to the schedules established in this section and (2) not be required to satisfy the training requirements under this section that the child care provider completed prior to initial licensure. If a licensed provider moves to a new county, the new county is prohibited from requiring the provider to complete any orientation class or training for new providers.

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5.1	Subd. 1a. Initial training. (a) License holders, caregivers, substitutes, and helpers must
5.2	comply with the training requirements in this section.
5.3	(b) The license holder, before initial licensure, and each caregiver, before caring for a
5.4	child, must complete:
5.5	(1) the six-hour Supervising for Safety for Family Child Care course that the
5.6	commissioner has developed;
5.7 5.8	(2) child development and learning and behavior guidance training, as required by subdivision 2;
5.9	(3) pediatric first aid, as required by subdivision 3;
5.10	(4) pediatric cardiopulmonary resuscitation, as required by subdivision 4;
5.11	(5) training in reducing the risk of sudden unexpected infant death and abusive head
5.12	trauma, as required by subdivision 5, if applicable; and
5.13	(6) training in child passenger restraint systems, as required by subdivision 6, if
5.14	applicable.
5.15	(c) Before caring for a child, each substitute must complete:
5.16	(1) the four-hour Basics of Licensed Family Child Care for Substitutes course that the
5.17	commissioner has developed;
5.18	(2) pediatric first aid, as required by subdivision 3;
5.19	(3) pediatric cardiopulmonary resuscitation, as required by subdivision 4;
5.20	(4) training in reducing the risk of sudden unexpected infant death and abusive head
5.21	trauma, as required by subdivision 5, if applicable; and
5.22	(5) training in child passenger restraint systems, as required by subdivision 6, if
5.23	applicable.
5.24	(d) Each helper must complete:
5.25	(1) training in reducing the risk of sudden unexpected infant death and training in reducing
5.26	the risk of abusive head trauma, as required by subdivision 5, if applicable;
5.27	(2) six hours of training within one year after the date of initial employment, if the helper
5.28	assists with care on a regular basis; and
5.29	(3) training in child passenger restraint systems, as required by subdivision 6, if
5.30	applicable.

(e) Before caring for a child or assisting in the care of a child, the license holder must

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6.2	train each caregiver, substitute, and helper about:
6.3	(1) the emergency preparedness plan as required under section 245A.51, subdivision 3;
6.4	(2) allergy prevention and response as required under section 245A.51, subdivision 1;
6.5	<u>and</u>
6.6	(3) the program's policies and procedures as required under section 245A.04, subdivision
6.7	<u>14.</u>
6.8 6.9	(f) Training requirements established under this section that must be completed prior to initial licensure must be satisfied only by a newly licensed child care provider or by a child
6.10	care provider who has not held an active child care license in Minnesota in the previous 12
6.11	months. A child care provider who voluntarily cancels a license or allows the license to
6.12	lapse for a period of less than 12 months and who seeks reinstatement of the lapsed or
6.13	canceled license within 12 months of the lapse or cancellation must satisfy the annual,
6.14	ongoing training requirements, and is not required to satisfy the training requirements that
6.15	must be completed prior to initial licensure. A child care provider who relocates within the
6.16	state must:
6.17 6.18	(1) satisfy the annual, ongoing training requirements according to the schedules established in this section; and
6.19	(2) not be required to satisfy the training requirements under this section that the child
6.20	care provider completed prior to initial licensure.
6.21	If a licensed provider moves to a new county, the new county is prohibited from requiring
6.22	the provider to complete any orientation class or training for new providers.
6.23	Subd. 2. Child development and learning and behavior guidance training. (a) For
6.24	purposes of family and group family child care, The license holder and each adult caregiver
6.25	who provides care in the licensed setting for more than 30 days in any 12-month period
6.26	shall complete and document at least four hours of child growth development and learning
6.27	and behavior guidance training prior to initial licensure, and before caring for children. For
6.28	purposes of this subdivision, "child development and learning training" means training in
6.29	understanding how children develop physically, cognitively, emotionally, and socially and
6.30	learn as part of the children's family, culture, and community. "Behavior guidance training"
6.31	means training in the understanding of the functions of child behavior and strategies for
6.32	managing challenging situations. At least two hours of child development and learning or

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behavior guidance training must be repeated annually. Training curriculum shall be developed or approved by the commissioner of human services.

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- (b) Notwithstanding initial child development training requirements in paragraph (a), individuals are exempt from this requirement if they:
- (1) have taken a three-credit course on early childhood development within the past five 7.5 years; 7.6
  - (2) have received a baccalaureate or master's degree in early childhood education or school-age child care within the past five years;
  - (3) are licensed in Minnesota as a prekindergarten teacher, an early childhood educator, a kindergarten to grade 6 teacher with a prekindergarten specialty, an early childhood special education teacher, or an elementary teacher with a kindergarten endorsement; or
  - (4) have received a baccalaureate degree with a Montessori certificate within the past five years.
  - (c) The license holder and each caregiver must annually complete at least two hours of child development and learning training or behavior guidance training. The commissioner shall develop or approve training curriculum.
- (d) A three-credit course about early childhood development meets the requirements of 7.17 paragraph (c). 7.18
  - Subd. 3. First aid. (a) When children are present in a family child care home governed by Minnesota Rules, parts 9502.0315 to 9502.0445, at least one staff person must be present in the home who has been trained in first aid The license holder must complete pediatric first aid training before licensure. Each caregiver and substitute must complete pediatric first aid training before caring for children. The first aid training must have been provided by an individual approved to provide first aid instruction. First aid training may be less than eight hours and. Persons qualified to provide first aid training include individuals approved as first aid instructors. First aid training must be repeated every two years.
  - (b) A family child care provider is exempt from the first aid training requirements under this subdivision related to any substitute caregiver who provides less than 30 hours of care during any 12-month period The license holder, each caregiver, and each substitute must complete additional pediatric first aid training every two years.
- (c) Video training reviewed and approved by the county licensing agency satisfies the training requirement of this subdivision. 7.32

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Subd. 4. Cardiopulmonary resuscitation (CPR). (a) When children are present in a family child care home governed by Minnesota Rules, parts 9502.0315 to 9502.0445, at least one caregiver must be present in the home who has been trained in cardiopulmonary resuscitation (CPR), including CPR techniques for infants and children, and in the treatment of obstructed airways. The CPR training must have been provided by an individual approved to provide CPR instruction, must be repeated at least once every two years, and must be documented in the earegiver's records The family child care license holder must complete pediatric cardiopulmonary resuscitation (CPR) training prior to licensure. Caregivers and substitutes must complete pediatric CPR training prior to caring for children. Training that license holders, caregivers, or substitutes have completed during the previous two years fulfills this requirement.

- (b) A family child care provider is exempt from the CPR training requirement in this subdivision related to any substitute caregiver who provides less than 30 hours of care during any 12-month period The CPR training must be provided by an individual certified to provide CPR instruction.
- (c) <u>Persons providing</u> The pediatric CPR training must use <u>CPR training that has been developed</u>:
- (1) by the American Heart Association or the American Red Cross and incorporates

  psychomotor skills to support the instruction include CPR techniques for infants and children
  and the treatment of obstructed airways; or
- (2) using nationally recognized, evidence-based guidelines for CPR training and incorporates psychomotor skills to support the instruction. include instruction, hands-on practice, and an in-person observed skills assessment under a CPR instructor's direct supervision; and
- (3) be developed by the American Heart Association, the American Red Cross, or another organization that uses nationally recognized, evidence-based guidelines for CPR.
- (d) License holders, caregivers, and substitutes must complete pediatric CPR training at least once every two years.
- Subd. 5. Sudden unexpected infant death and abusive head trauma training. (a)

  Prior to caring for infants, the license holder must complete training about reducing the risk
  of sudden unexpected infant death. License holders must document ensure that before staff
  persons, caregivers, substitutes and helpers assist in the care of infants, they are instructed
  on the standards in section 245A.1435 and receive training on reducing the risk of sudden
  unexpected infant death.

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(b) Prior to caring for infants and children under school age, the license holder must complete training about reducing the risk of abusive head trauma. In addition, license holders must document ensure that before staff persons, caregivers, substitutes, and helpers assist in the care of infants and children under school age, they receive training on reducing the risk of abusive head trauma from shaking infants and young children. The training in this subdivision may be provided as initial training under subdivision 1 or ongoing annual training under subdivision 7.

(b) (c) Sudden unexpected infant death reduction training required under this subdivision must, at a minimum, address the risk factors related to sudden unexpected infant death, means of reducing the risk of sudden unexpected infant death in child care, and license holder communication with parents regarding reducing the risk of sudden unexpected infant death.

(e) (d) Abusive head trauma training required under this subdivision must, at a minimum, address the risk factors related to shaking infants and young children, means of reducing the risk of abusive head trauma in child care, and license holder communication with parents regarding reducing the risk of abusive head trauma.

(d) (e) Training for family and group family child care providers must be developed by the commissioner in conjunction with the Minnesota Sudden Infant Death Center and approved by the Minnesota Center for Professional Development. Sudden unexpected infant death reduction training and abusive head trauma training may be provided in a single course of no more than two hours in length.

(e) (f) Sudden unexpected infant death reduction training and abusive head trauma training required under this subdivision must be completed in person or as allowed under subdivision 10, clause (1) or (2), at least once every two years. On the years when the license holder is, caregiver, substitute, and helper are not receiving training in person or as allowed under subdivision 10, clause (1) or (2), the license holder, caregiver, substitute, and helper must receive sudden unexpected infant death reduction training and abusive head trauma training through a video of no more than one hour in length. The video must be developed or approved by the commissioner.

(f) (g) An individual who is related to the license holder as defined in section 245A.02, subdivision 13, and who is involved only in the care of the license holder's own infant or child under school age and who is not designated to be a caregiver, helper, or substitute, as defined in Minnesota Rules, part 9502.0315, for the licensed program, is exempt from the sudden unexpected infant death and abusive head trauma training.

Subd. 6. Child passenger restraint systems; training requirement. (a) A license 10.1 holder must comply with all seat belt and child passenger restraint system requirements 10.2 under section 169.685. 10.3 (b) Family and group family child care programs licensed by the Department of Human 10.4 Services that serve a child or children under nine years of age must document training that 10.5 fulfills the requirements in this subdivision. 10.6 (1) Before A license holder, staff person, caregiver, substitute or helper transports may 10.7 transport a child or children under age nine in a motor vehicle. The person placing the 10.8 license holder must ensure that any person who places a child or children under age nine 10.9 10.10 in a passenger restraint must has satisfactorily completed training on the proper use and installation of child restraint systems in motor vehicles. Training completed under 10.11 this subdivision may be used to meet initial training under subdivision 1 or ongoing training 10.12 under subdivision 7. 10.13 (2) (b) Training required under this subdivision must be at least one hour in length, 10.14 completed at initial training, and repeated at least once every five years. 10.15 (c) At a minimum, the training must address the proper use of child restraint systems 10.16 based on the child's size, weight, and age, and the proper installation of a car seat or booster 10.17 seat in the motor vehicle used by the license holder to transport the child or children. 10.18 (3) (d) Training under this subdivision must be provided by individuals who are certified 10.19 and approved by the Department of Public Safety, Office of Traffic Safety. License holders 10.20 may obtain a list of certified and approved trainers through the Department of Public Safety 10.21 website or by contacting the agency. 10.22 (e) Child care providers that only transport school-age children as defined in section 10.23 245A.02, subdivision 19, paragraph (f), in child care buses as defined in section 169.448, 10.24 subdivision 1, paragraph (e), are exempt from this subdivision. 10.25 Subd. 7. Ongoing training requirements for family and group family child care 10.26 license holders and caregivers. For purposes of family and group family child care, (a) 10.27 The license holder and each primary caregiver must complete 16 hours of ongoing training 10.28 each year. For purposes of this subdivision, a primary caregiver is an adult caregiver who 10.29 10.30 provides services in the licensed setting for more than 30 days in any 12-month period. Repeat of topical training requirements in subdivisions 2 to 8 shall count toward the annual 10.31 16-hour training requirement. Additional ongoing training subjects to meet the annual 10.32 16-hour training requirement must be selected from the following areas: 10.33

11.1	(b) The license holder and each caregiver must annually complete ongoing training as
11.2	<u>follows:</u>
11.3	(1) a two-hour course in child development and learning or behavior guidance, as required
11.4	by subdivision 2;
11.5	(2) a two-hour course in active supervision; and
11.6	(3) ongoing training in reducing the risk of sudden unexpected infant death and abusive
11.7	head trauma, as required under subdivision 5, if applicable.
11.8 11.9	(c) At least once every two years, the license holder and each caregiver must complete ongoing training as follows:
11.10	(1) training in pediatric first aid, as required under subdivision 3;
11.11	(2) training in pediatric cardiopulmonary resuscitation, as required under subdivision 4;
11.12	<u>and</u>
11.13	(3) a two-hour course about accommodating children with disabilities or about cultural
11.14	dynamics that the license holder or caregiver may fulfill by completing any course in
11.15	Knowledge and Competency Area III: Relationships with Families.
11.16	(d) At least once every five years, the license holder and each caregiver must complete
11.17	ongoing training as follows:
11.18	(1) two-hour courses: Health and Safety I and Health and Safety II; and
11.19	(2) ongoing training in child passenger restraint systems, as required under subdivision
11.20	6, if applicable.
11.21	(e) Additional ongoing training subjects to meet the annual 16-hour training requirement
11.22	must be selected from training in the following content areas of the Minnesota Knowledge
11.23	and Competency Framework:
11.24	(1) Content area I: child development and learning, including training under subdivision
11.25	2, paragraph (a) in understanding how a child develops physically, cognitively, emotionally,
11.26	and socially, and how a child learns as part of the child's family, culture, and community;
11.27	(2) Content area II: developmentally appropriate learning experiences, including training
11.28	in creating positive learning experiences, promoting cognitive development, promoting
11.29	social and emotional development, promoting physical development, promoting creative
11.30	development; and behavior guidance;

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12.1	(3) Content area III: relationships with families, including training in building a positive,
12.2	respectful relationship with the child's family;
12.3	(4) Content area IV: assessment, evaluation, and individualization, including training
12.4	in observing, recording, and assessing development; assessing and using information to
12.5	plan; and assessing and using information to enhance and maintain program quality;
12.6	(5) Content area V: historical and contemporary development of early childhood
12.7	education, including training in past and current practices in early childhood education and
12.8	how current events and issues affect children, families, and programs;
12.9	(6) Content area VI: professionalism, including training in knowledge, skills, and abilities
12.10	that promote ongoing professional development; and
12.11	(7) Content area VII: health, safety, and nutrition, including training in establishing
12.12	healthy practices; ensuring safety; and providing healthy nutrition.
12.13	Subd. 8. Other required Ongoing training requirements for substitutes and
12.14	helpers. (a) The training required of family and group family child care providers and staff
12.15	must include training in the cultural dynamics of early childhood development and child
12.16	care. The cultural dynamics and disabilities training and skills development of child care
12.17	providers must be designed to achieve outcomes for providers of child care that include,
12.18	but are not limited to:
12.19	(1) an understanding and support of the importance of culture and differences in ability
12.20	in children's identity development;
12.21	(2) understanding the importance of awareness of cultural differences and similarities
12.22	in working with children and their families;
12.23	(3) understanding and support of the needs of families and children with differences in
12.24	ability;
12.25	(4) developing skills to help children develop unbiased attitudes about cultural differences
12.26	and differences in ability;
12.27	(5) developing skills in culturally appropriate earegiving; and
12.28	(6) developing skills in appropriate caregiving for children of different abilities.
12.29	The commissioner shall approve the curriculum for cultural dynamics and disability
12.30	training.

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13.1	(b) The provider must meet the training requirement in section 245A.14, subdivision
13.2	11, paragraph (a), clause (4), to be eligible to allow a child cared for at the family child care
13.3	or group family child care home to use the swimming pool located at the home.
13.4	(a) Each substitute must complete ongoing training adhering to the following schedule:
13.5	(1) annually, training in reducing the risk of sudden unexpected infant death and abusive
13.6	head trauma, as required under subdivision 5, if applicable;
13.7	(2) at least once every two years, training in pediatric first aid, as required under
13.8	subdivision 3, and training in pediatric cardiopulmonary resuscitation, as required under
13.9	subdivision 4;
13.10	(3) at least once every three years, the four-hour Basics of Licensed Family Child Care
13.11	for Substitutes course; and
13.12	(4) at least once every five years, training in child passenger restraint systems, as required
13.13	under subdivision 6, if applicable.
13.14	(b) Each helper must annually complete training in reducing the risk of sudden unexpected
13.15	infant death and abusive head trauma, as required under subdivision 5, if applicable.
13.16	Subd. 9. Supervising for safety; training requirement. (a) Before initial licensure and
13.17	before caring for a child, all family child care license holders and each adult caregiver who
13.18	provides care in the licensed family child care home for more than 30 days in any 12-month
13.19	period shall complete and document the completion of the six-hour Supervising for Safety
13.20	for Family Child Care course developed by the commissioner.
13.21	(b) The family child care license holder and each adult caregiver who provides care in
13.22	the licensed family child care home for more than 30 days in any 12-month period shall
13.23	complete and document:
13.24	(1) the annual completion of a two-hour active supervision course developed by the
13.25	commissioner; and
13.26	(2) the completion at least once every five years of the two-hour courses Health and
13.27	Safety I and Health and Safety II. A license holder's or adult caregiver's completion of either
13.28	training in a given year meets the annual active supervision training requirement in clause
13.29	<del>(1).</del>
13.30	Subd. 10. Approved training. County licensing staff must accept training approved by
13.31	the Minnesota Center for Professional Development, including:
13.32	(1) face-to-face or classroom training;

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-					
(2) online training; and					
(3) relationship-based professional	development, such as me	ntoring, coach	ning, and		
consulting.					
Subd. 11. <b>Provider training.</b> New and increased training requirements under this section					
must not be imposed on providers until the commissioner establishes statewide accessibility					
to the required provider training.					
Subd. 12. <b>Documentation.</b> The license holder must document the date, title, and event					
ID from Develop, if applicable, of a completed training required by this section for the					
license holder and each caregiver, substitute, and helper.					
EFFECTIVE DATE. This section	is effective September 30	) 2020			
<u> </u>		<u>, = = = = = = = = = = = = = = = = = = =</u>			
Sec. 3. Minnesota Statutes 2018, sec	tion 245H.08, subdivision	4, is amended	d to read:		
Subd. 4. Maximum group size. (a) For a child six weeks old through 16 months old,					
the maximum group size shall be no more than eight children.					
(b) For a child 16 months old throu	gh 33 months old, the max	ximum group	size shall be		
no more than 14 children.					
(c) For a child 33 months old throu	oh nrekindergarten a max	kimum graun	size shall be		
(c) For a child 33 months old through prekindergarten, a maximum group size shall be no more than 20 children.					
(d) For a child in kindergarten through 13 years old, a maximum group size shall be no					
more than 30 children.					
(e) The maximum group size applies	s at all times except during	group activity	coordination		
time not exceeding 15 minutes, during a meal, outdoor activity, field trip, nap and rest, and					
special activity including a film, guest speaker, indoor large muscle activity, or holiday					
program.					
(f) Notwithstanding paragraph (d), a certified center may continue to serve a child older					
than 13 years if one of the following conditions is true:					

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1, paragraph (e); or

grades 6 through 8.

(1) the child remains eligible for child care assistance under section 119B.09, subdivision

(2) the certified center serves children in a middle-school-only program, defined as

**EFFECTIVE DATE.** This section is effective the day following enactment.

Sec. 3. 14

15.1	Sec. 4. Minnesota Statutes 2018, section 245H.08, subdivision 5, is amended to read:		
15.2	Subd. 5. Ratios. (a) The minimally accept	otable staff-to-child ratios are:	
15.3	six weeks old through 16 months old	1:4	
15.4	16 months old through 33 months old	1:7	
15.5	33 months old through prekindergarten	1:10	
15.6	kindergarten through 13 years old	1:15	
15.7	(b) Kindergarten includes a child of suffi	icient age to have attended the first day of	
15.8	kindergarten or who is eligible to enter kind	ergarten within the next four months.	
15.9	(c) For mixed groups, the ratio for the ag	ge group of the youngest child applies.	
15.10	(d) Notwithstanding paragraph (a), a cert	ified center may continue to serve a child older	
15.11	than 13 years if one of the following conditions is true:		
15.12	(1) the child remains eligible for child care	e assistance under section 119B.09, subdivision	
15.13	1, paragraph (e); or		
15.14	(2) the certified center serves children in a middle-school-only program, defined as		
15.15	grades 6 through 8.		
15.16	EFFECTIVE DATE. This section is eff	Sective the day following enactment."	
15.17	Amend the title accordingly		

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