1.2	Delete everything after the enacting clause and insert:
1.3	"Section 1. Minnesota Statutes 2024, section 142B.01, subdivision 12, is amended to read:
1.4	Subd. 12. Experience. For purposes of child care centers, "experience" means paid or
1.5	unpaid employment:
1.6	(1) caring for children as a teacher, assistant teacher, aide, or student intern, staff person,
1.7	or unsupervised volunteer:
1.8	(i) in a licensed child care center, a licensed family day care or group family day care,
1.9	or a Tribally licensed child care program in any United States state or territory; or
1.10	(ii) in a public or nonpublic school;
1.11	(2) caring for children as a staff person or unsupervised volunteer in a certified,
1.12	license-exempt child care center under chapter 142C; or
1.13	(3) providing direct contact services in a home or residential facility serving children
1.14	with disabilities that requires a background study under section 245C.03.
1.15	Sec. 2. Minnesota Statutes 2024, section 142B.65, is amended to read:
1.16	142B.65 CHILD CARE CENTER TRAINING REQUIREMENTS.
1.17	Subdivision 1. <b>Orientation.</b> (a) The child care center license holder must ensure that
1.18	the director, staff persons, substitutes, and unsupervised volunteers are given orientation
1.19	training and successfully complete the training before starting assigned duties. The orientation
1.20	training must include information about:

...... moves to amend H.F. No. 628 as follows:

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(1) the center's philosophy, child care program, and procedures for maintaining health and safety according to section 142B.66 and Minnesota Rules, part 9503.0140, and handling emergencies and accidents according to Minnesota Rules, part 9503.0110; (2) specific job responsibilities; (3) the behavior guidance standards in Minnesota Rules, part 9503.0055; (4) the reporting responsibilities in chapter 260E and Minnesota Rules, part 9503.0130; (5) the center's drug and alcohol policy under section 142B.10, subdivision 1, paragraph (c); (6) the center's risk reduction plan as required under section 142B.54, subdivision 2; (7) at least one-half hour of training on the standards under section 142B.46 and on reducing the risk of sudden unexpected infant death as required in subdivision 6, if applicable; (8) at least one-half hour of training on the risk of abusive head trauma as required for the director and staff under subdivision 7, if applicable; and (9) training required by a child's individual child care program plan as required under Minnesota Rules, part 9503.0065, subpart 3, if applicable. (b) In addition to paragraph (a), before having unsupervised direct contact with a child, the director and staff persons within the first 90 days of employment, and substitutes and unsupervised volunteers within 90 days after the first date of direct contact with a child, must complete: (1) pediatric first aid, in accordance with subdivision 4; and (2) pediatric cardiopulmonary resuscitation, in accordance with subdivision 5. (c) In addition to paragraph (b), the director and staff persons within the first 90 days of employment, and substitutes and unsupervised volunteers within 90 days from the first date of direct contact with a child, must complete training in child development, in accordance with subdivision 3. (d) The license holder must ensure that documentation, as required in subdivision 10,

identifies the number of hours completed for each topic with a minimum training time identified, if applicable, and that all required content is included.

(e) Training in this subdivision must not may be used to meet in-service training requirements in subdivision 9, excepting training on reducing the risk of sudden unexpected infant death and training on the risk of abusive head trauma.

(f) Training completed within the previous 12 months under paragraphs (a), clauses (7) 3.1 and (8), and (c) are transferable to another child care center. 3.2 Subd. 2. **Definitions.** (a) For the purposes of this section, the following terms have the 3.3 meanings given. 3.4 (b) "Substitute" means an adult a person who: 3.5 (1) is at least 16 years of age; 3.6 3.7 (2) is temporarily filling a position as a director, teacher, assistant teacher, or aide staff person in a licensed child care center for less than 240 hours total in a calendar year; and 3.8 (3) does not work a set or consistent schedule due to the absence of a regularly employed 3.9 staff person. 3.10 (c) "Staff person" means an employee of a child care center who: 3.11 (1) is at least 16 years of age; and 3.12 provides direct contact services to children (2) carries out child care program activities 3.13 under the supervision of a director. 3.14 (d) "Unsupervised volunteer" means an individual who: 3.15 (1) is at least 16 years of age; 3.16 (1) (2) assists in the care of a child in care; 3.17 (2) (3) is not under the continuous direct supervision of a staff person; and 3.18 (3) (4) is not employed by the child care center. 3.19 Subd. 3. Child development and learning training. (a) The director and all staff 3.20 persons, substitutes, and unsupervised volunteers shall complete child development and 3.21 learning training within the first 90 days of employment. The director and staff persons, not 3.22 including substitutes, must complete at least two hours of training on child development 3.23 and learning. The training for substitutes and unsupervised volunteers is not required to be 3.24 3.25 of a minimum length. For purposes of this subdivision, "child development and learning training" means any training in Knowledge and Competency Area I: Child Development 3.26 and Learning, which is training in understanding how children develop physically, 3.27 cognitively, emotionally, and socially and learn as part of the children's family, culture, and 3.28 community. 3.29

(b) Notwithstanding paragraph (a), individuals are exempt from this requirement if they:

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(1) have taken a three-credit college course on early childhood development within the past five years;

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- (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 sixth grade 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 director and staff persons, not including substitutes, must complete at least two hours of child development and learning training every second calendar year.
  - (d) Substitutes and unsupervised volunteers must complete child development and learning training every second calendar year. There is no minimum number of training hours required.
  - (e) Except for training required under paragraph (a), Training completed under this subdivision may be used to meet the in-service training requirements under subdivision 9.
  - Subd. 4. **First aid.** (a) Unless training has been completed within the previous two years, the director, staff persons, substitutes, and unsupervised volunteers must satisfactorily complete pediatric first aid training prior to having unsupervised direct contact with a child, but not to exceed the first 90 days of employment.
  - (b) Pediatric first aid training must be repeated at least every second calendar year. First aid training under this subdivision must be provided by an individual approved as a first aid instructor and must not may be used to meet in-service training requirements under subdivision 9.
  - Subd. 5. **Cardiopulmonary resuscitation.** (a) Unless training has been completed within the previous two years, the director, staff persons, substitutes, and unsupervised volunteers must satisfactorily complete pediatric cardiopulmonary resuscitation (CPR) training that meets the requirements of this subdivision. Pediatric CPR training must be completed prior to having unsupervised direct contact with a child, but not to exceed the first 90 days of employment.
  - (b) Pediatric CPR training must be provided by an individual approved to provide pediatric CPR instruction.

(c) The pediatric CPR training must:

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- (1) cover CPR techniques for infants and children and the treatment of obstructed airways;
- 5.3 (2) include instruction, hands-on practice, and an in-person, observed skills assessment 5.4 under the direct supervision of a CPR instructor; 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) Pediatric CPR training must be repeated at least once every second calendar year.
  - (e) Pediatric CPR training in this subdivision must not may be used to meet in-service training requirements under subdivision 9.
  - Subd. 6. **Sudden unexpected infant death training.** (a) Before caring for infants, the director, staff persons, substitutes, unsupervised volunteers, and any other volunteers must receive training on the standards under section 142B.46 and on reducing the risk of sudden unexpected infant death during orientation and each calendar year thereafter.
  - (b) Sudden unexpected infant death reduction training required under this subdivision must be at least one-half hour in length. At a minimum, the training must 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.
  - (c) Except if completed during orientation, training taken under this subdivision may be used to meet the in-service training requirements under subdivision 9.
  - Subd. 7. **Abusive head trauma training.** (a) Before caring for children under school age, the director, staff persons, substitutes, and unsupervised volunteers must receive training on the risk of abusive head trauma during orientation and each calendar year thereafter.
  - (b) Abusive head trauma training under this subdivision must be at least one-half hour in length. At a minimum, the training must address the risk factors related to shaking infants and young children, means to reduce the risk of abusive head trauma in child care, and license holder communication with parents regarding reducing the risk of abusive head trauma.
  - (c) Except if completed during orientation, training taken under this subdivision may be used to meet the in-service training requirements under subdivision 9.

(d) The commissioner shall make available for viewing a video presentation on the dangers associated with shaking infants and young children, which may be used in conjunction with the annual training required under paragraph (b).

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- Subd. 8. Child passenger restraint systems; training requirement. (a) Before a license holder transports a child or children under age eight in a motor vehicle, the person placing the child or children in a passenger restraint must satisfactorily complete training on the proper use and installation of child restraint systems in motor vehicles.
- (b) Training required under this subdivision must be repeated at least once every five years. At a minimum, the training must address the proper use of child restraint systems based on the child's size, weight, and age, and the proper installation of a car seat or booster seat in the motor vehicle used by the license holder to transport the child or children.
- (c) Training required under this subdivision must be provided by individuals who are certified and approved by the Department of Public Safety, Office of Traffic Safety. License holders may obtain a list of certified and approved trainers through the Department of Public Safety website or by contacting the agency.
- (d) Child care providers that only transport school-age children as defined in section 142B.01, subdivision 25, in child care buses as defined in section 169.448, subdivision 1, paragraph (e), are exempt from this subdivision.
- (e) Training completed under this subdivision may be used to meet in-service training requirements under subdivision 9. Training completed within the previous five years is transferable upon a staff person's change in employment to another child care center.
- Subd. 9. **In-service training.** (a) A license holder must ensure that the center director, staff persons, substitutes, and unsupervised volunteers complete in-service training each calendar year.
- (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 (d) to (g) and do not otherwise have a minimum number of hours of training to complete.
- (c) The number of in-service training hours may be prorated for individuals not employed for an entire year.
  - (d) Each year, in-service training must include:

7.1	(1) the center's procedures for maintaining health and safety according to section 142B.66
7.2	and Minnesota Rules, part 9503.0140, and handling emergencies and accidents according
7.3	to Minnesota Rules, part 9503.0110;
7.4	(2) the reporting responsibilities under chapter 260E and Minnesota Rules, part
7.5	9503.0130;
7.6	(3) at least one-half hour of training on the standards under section 142B.46 and on
7.7	reducing the risk of sudden unexpected infant death as required under subdivision 6, if
7.8	applicable; and
7.9	(4) at least one-half hour of training on the risk of abusive head trauma from shaking
7.10	infants and young children as required under subdivision 7, if applicable.
7.11	(e) Each year, or when a change is made, whichever is more frequent, in-service training
7.12	must be provided on: (1) the center's risk reduction plan under section 142B.54, subdivision
7.13	2; and (2) a child's individual child care program plan as required under Minnesota Rules,
7.14	part 9503.0065, subpart 3.
7.15	(f) At least once every two calendar years, the in-service training must include:
7.16	(1) child development and learning training under subdivision 3;
7.17	(2) pediatric first aid that meets the requirements of subdivision 4;
7.18	(3) pediatric cardiopulmonary resuscitation training that meets the requirements of
7.19	subdivision 5;
7.20	(4) cultural dynamics training to increase awareness of cultural differences; and
7.21	(5) disabilities training to increase awareness of differing abilities of children.
7.22	(g) At least once every five years, in-service training must include child passenger
7.23	restraint training that meets the requirements of subdivision 8, if applicable.
7.24	(h) The remaining hours of the in-service training requirement must be met by completing
7.25	training in the following content areas of the Minnesota Knowledge and Competency
7.26	Framework:
7.27	(1) Content area I: child development and learning;
7.28	(2) Content area II: developmentally appropriate learning experiences;

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(3) Content area III: relationships with families;

(4) Content area IV: assessment, evaluation, and individualization;

(5) Content area V: historical and contemporary development of early childhood education;

(6) Content area VI: professionalism;

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- (7) Content area VII: health, safety, and nutrition; and
- (8) Content area VIII: application through clinical experiences.
  - (i) For purposes of this subdivision, the following terms have the meanings given them.
- (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.

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Subd. 10. **Documentation.** All training must be documented and maintained on site in each personnel record. In addition to any requirements for each training provided in this section, documentation for each staff person must include the staff person's first date of direct contact and first date of unsupervised contact with a child in care.

## Sec. 3. [142B.671] CHILD CARE CENTER DIRECTOR QUALIFICATIONS.

Subdivision 1. Director qualifications; general. A director must be at least 18 years of age and meet the qualifications in subdivision 2.

Subd. 2. Director education and experience requirements. A director with the credential listed in column A must have the education and experience listed in column B.

9.13	Column A	Column B
9.14 9.15 9.16	(1) A high school diploma or commissioner of education-selected high school equivalency certification	Experience: 4,160 hours within the classroom under supervision Education: 24 quarter credits
9.17 9.18 9.19 9.20 9.21	(2) Diploma from Association Montessori Internationale; preprimary credential, primary diploma, or provisional certificate from the American Montessori Society, without a baccalaureate degree	Experience: 2,080 hours within the classroom under supervision Education: 12 quarter credits
9.22 9.23 9.24 9.25 9.26	(3) Preprimary credential, primary diploma, or provisional certificate from the American Montessori Society or diploma from the Association Montessori Internationale with a baccalaureate degree	Experience: 1,040 hours within the classroom under supervision Education: no additional required
9.27 9.28 9.29	(4) Minnesota technical institute certificate as a Child Development Assistant	Experience: 2,080 hours within the classroom under supervision Education: six quarter credits
9.30 9.31 9.32 9.33 9.34	(5) Child development associate credential (center based or family day care) for preschool or for infants and toddlers from the Council for Early Childhood Professional Recognition	Experience: 1,560 hours within the classroom under supervision Education: no additional required
9.35 9.36 9.37 9.38 9.39 9.40	(6) License from the Minnesota Department of Education for Prekindergarten Associate; or a certificate or credential for a two-year program from an accredited community college or technical college in child development or early childhood education	Experience: 1,040 hours within the classroom under supervision Education: six quarter credits
9.41 9.42 9.43	(7) Baccalaureate degree from an accredited college or university in any field	Experience: 1,040 hours within the classroom under supervision Education: 18 quarter credits

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10.1 10.2 10.3 10.4 10.5	(8) License from the Minnesota Depa of Education for elementary educat without kindergarten endorsement		classroom und Education: six	20 hours within the der supervision quarter credits within one employment if teaching r school age
10.6 10.7 10.8 10.9 10.10	(9) License from the Minnesota Department of Education for prekindergarten or nursery, or a license from the Minnesota Department of Education for element education with a kindergarten endor	esota entary		o additional required additional required
10.11	Sec. 4. [142B.673] CHILD CAR	E CENTER	STAFF RAT	OS AND GROUP SIZE.
10.12	Subdivision 1. Staff-to-child rati	os and maxi	mum group siz	ze. The minimally acceptable
10.13	staff-to-child ratios and the maximu	ım group siz	e within each a	ge category are:
10.14	Age Category Minin	mum Staff-to	-Child Ratio	Maximum Group Size
10.15	Infant	<u>1:4</u>		<u>8</u>
10.16	<u>Toddler</u>	<u>1:7</u>		<u>14</u>
10.17	Preschooler	<u>1:10</u>		<u>20</u>
10.18	School-age child	1:15		<u>30</u>
10.19	Subd. 2. Staff distribution. (a)	The license h	older must ens	ure that the staff distribution
10.20	requirements in this subdivision are	met and a w	ritten staff distr	ribution record is kept in the
10.21	administrative record.			
10.22	(b) Only the following individua	als who work	directly with	children can be counted in
10.23	meeting the staff-to-child ratios und	ler this section	on: director, sta	ff person, substitute, and
10.24	unsupervised volunteer.			
10.25	(c) The maximum group size app	olies at all tim	nes except durii	ng meals, outdoor activities,
10.26	field trips, naps and rest, and specia	l activities s	uch as films, gi	uest speakers, and holiday
10.27	programs.			
10.28	Subd. 3. Age category grouping	During the	center's regular	hours of operation, children
10.29	in different age categories may be n	nixed within	a group if the	staff-to-child ratios, group
10.30	size, and staff distribution applied ar	e for the you	ngest child pres	sent and the group is divided
10.31	when the number of children presen	nt reaches the	e maximum gro	oup size of the classroom
10.32	where the children are present.			
10.33	Subd. 4. Age categories and des	ignations. (a	a) For purposes	of this section, the following
10.34	terms have the meanings given in the	nis paragraph	<u>ı:</u>	
10.35	(1) "infant" means a child who is	s at least six	weeks old but	less than 16 months old;
10.36	(2) "toddler" means a child who	is at least 16	months old bu	at less than 33 months old;

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11.1	(3) "preschooler" means a child who is at least 33 months old up to school age; and
11.2	(4) "school age" means a child who is at least of sufficient age to have attended the first
11.3	day of kindergarten, or is eligible to enter kindergarten within the next four months, but is
11.4	younger than 13 years of age.
11.5	(b) A child must be designated as a member of the age category under paragraph (a) that
11.6	is consistent with the child's date of birth, with the following exceptions:
11.7	(1) a child may be designated as an "infant" up to the age of 18 months if the parent,
11.8	teacher, and center director determine that such a designation is in the best interest of the
11.9	child;
11.10	(2) a child may be designated as a "toddler" at the age of 14 months or up to the age of
11.11	35 months if the parent, teacher, and center director determine that such a designation is in
11.12	the best interest of the child; and
11.13	(3) a child may be designated as a "preschooler" at the age of 31 months if the parent,
11.14	teacher, and center director determine that the designation is in the best interests of the child.
11.15	Sec. 5. <u>DIRECTION TO COMMISSIONER OF CHILDREN, YOUTH, AND</u>
11.16	FAMILIES; AMENDING CHILD CARE CENTER REQUIREMENTS.
11.17	Subdivision 1. Changes to child care center record requirements. (a) The
11.17 11.18	Subdivision 1. Changes to child care center record requirements. (a) The commissioner of human services or the commissioner of children, youth, and families must
11.18	commissioner of human services or the commissioner of children, youth, and families must
11.18 11.19	commissioner of human services or the commissioner of children, youth, and families must amend Minnesota Rules, part 9503.0125, or its successor as a part of the transition of
11.18 11.19 11.20	commissioner of human services or the commissioner of children, youth, and families must amend Minnesota Rules, part 9503.0125, or its successor as a part of the transition of responsibilities, to remove the requirement that a child's record must contain the names,
11.18 11.19 11.20 11.21	commissioner of human services or the commissioner of children, youth, and families must amend Minnesota Rules, part 9503.0125, or its successor as a part of the transition of responsibilities, to remove the requirement that a child's record must contain the names, addresses, and telephone numbers of the child's source of regular medical and dental care
11.18 11.19 11.20 11.21 11.22	commissioner of human services or the commissioner of children, youth, and families must amend Minnesota Rules, part 9503.0125, or its successor as a part of the transition of responsibilities, to remove the requirement that a child's record must contain the names, addresses, and telephone numbers of the child's source of regular medical and dental care and the source of medical and dental care to be used in case of an emergency.
11.18 11.19 11.20 11.21 11.22 11.23	commissioner of human services or the commissioner of children, youth, and families must amend Minnesota Rules, part 9503.0125, or its successor as a part of the transition of responsibilities, to remove the requirement that a child's record must contain the names, addresses, and telephone numbers of the child's source of regular medical and dental care and the source of medical and dental care to be used in case of an emergency.  (b) The commissioner of human services or the commissioner of children, youth, and
11.18 11.19 11.20 11.21 11.22 11.23 11.24	commissioner of human services or the commissioner of children, youth, and families must amend Minnesota Rules, part 9503.0125, or its successor as a part of the transition of responsibilities, to remove the requirement that a child's record must contain the names, addresses, and telephone numbers of the child's source of regular medical and dental care and the source of medical and dental care to be used in case of an emergency.  (b) The commissioner of human services or the commissioner of children, youth, and families must amend Minnesota Rules, part 9503.0125, or its successor as a part of the
11.18 11.19 11.20 11.21 11.22 11.23 11.24 11.25	commissioner of human services or the commissioner of children, youth, and families must amend Minnesota Rules, part 9503.0125, or its successor as a part of the transition of responsibilities, to remove the requirement that a child's record must contain the names, addresses, and telephone numbers of the child's source of regular medical and dental care and the source of medical and dental care to be used in case of an emergency.  (b) The commissioner of human services or the commissioner of children, youth, and families must amend Minnesota Rules, part 9503.0125, or its successor as a part of the transition of responsibilities, to change the requirement that a child's record must contain
11.18 11.19 11.20 11.21 11.22 11.23 11.24 11.25 11.26	commissioner of human services or the commissioner of children, youth, and families must amend Minnesota Rules, part 9503.0125, or its successor as a part of the transition of responsibilities, to remove the requirement that a child's record must contain the names, addresses, and telephone numbers of the child's source of regular medical and dental care and the source of medical and dental care to be used in case of an emergency.  (b) The commissioner of human services or the commissioner of children, youth, and families must amend Minnesota Rules, part 9503.0125, or its successor as a part of the transition of responsibilities, to change the requirement that a child's record must contain the names, addresses, and telephone numbers of two persons to be contacted if a parent
11.18 11.19 11.20 11.21 11.22 11.23 11.24 11.25 11.26 11.27	commissioner of human services or the commissioner of children, youth, and families must amend Minnesota Rules, part 9503.0125, or its successor as a part of the transition of responsibilities, to remove the requirement that a child's record must contain the names, addresses, and telephone numbers of the child's source of regular medical and dental care and the source of medical and dental care to be used in case of an emergency.  (b) The commissioner of human services or the commissioner of children, youth, and families must amend Minnesota Rules, part 9503.0125, or its successor as a part of the transition of responsibilities, to change the requirement that a child's record must contain the names, addresses, and telephone numbers of two persons to be contacted if a parent cannot be reached in an emergency or when there is an injury requiring medical attention
11.18 11.19 11.20 11.21 11.22 11.23 11.24 11.25 11.26 11.27 11.28	commissioner of human services or the commissioner of children, youth, and families must amend Minnesota Rules, part 9503.0125, or its successor as a part of the transition of responsibilities, to remove the requirement that a child's record must contain the names, addresses, and telephone numbers of the child's source of regular medical and dental care and the source of medical and dental care to be used in case of an emergency.  (b) The commissioner of human services or the commissioner of children, youth, and families must amend Minnesota Rules, part 9503.0125, or its successor as a part of the transition of responsibilities, to change the requirement that a child's record must contain the names, addresses, and telephone numbers of two persons to be contacted if a parent cannot be reached in an emergency or when there is an injury requiring medical attention to a requirement that a child's record must only contain the name, address, and telephone
11.18 11.19 11.20 11.21 11.22 11.23 11.24 11.25 11.26 11.27 11.28 11.29	commissioner of human services or the commissioner of children, youth, and families must amend Minnesota Rules, part 9503.0125, or its successor as a part of the transition of responsibilities, to remove the requirement that a child's record must contain the names, addresses, and telephone numbers of the child's source of regular medical and dental care and the source of medical and dental care to be used in case of an emergency.  (b) The commissioner of human services or the commissioner of children, youth, and families must amend Minnesota Rules, part 9503.0125, or its successor as a part of the transition of responsibilities, to change the requirement that a child's record must contain the names, addresses, and telephone numbers of two persons to be contacted if a parent cannot be reached in an emergency or when there is an injury requiring medical attention to a requirement that a child's record must only contain the name, address, and telephone number of one person to be contacted.
11.18 11.19 11.20 11.21 11.22 11.23 11.24 11.25 11.26 11.27 11.28 11.29	commissioner of human services or the commissioner of children, youth, and families must amend Minnesota Rules, part 9503.0125, or its successor as a part of the transition of responsibilities, to remove the requirement that a child's record must contain the names, addresses, and telephone numbers of the child's source of regular medical and dental care and the source of medical and dental care to be used in case of an emergency.  (b) The commissioner of human services or the commissioner of children, youth, and families must amend Minnesota Rules, part 9503.0125, or its successor as a part of the transition of responsibilities, to change the requirement that a child's record must contain the names, addresses, and telephone numbers of two persons to be contacted if a parent cannot be reached in an emergency or when there is an injury requiring medical attention to a requirement that a child's record must only contain the name, address, and telephone number of one person to be contacted.  (c) The commissioner of human services or the commissioner of children, youth, and

Sec. 5. 11

12.1	Subd. 2. Changes to child care center health requirements. The commissioner of
12.2	human services or the commissioner of children, youth, and families must amend Minnesota
12.3	Rules, part 9503.0140, subpart 2, or its successor as a part of the transition of responsibilities,
	to remove the requirement that programs serving infants must have a health consultation
12.4	<u> </u>
12.5	review completed monthly.
12.6	Subd. 3. Changes to child care center facility requirements. The commissioner of
12.7	human services or the commissioner of children, youth, and families must amend Minnesota
12.8	Rules, part 9503.0155, subpart 13, or its successor as a part of the transition of
12.9	responsibilities, to allow a minimum temperature of 65 degrees Fahrenheit.
12.10	Subd. 4. Changes to child care center staff ratios. The commissioner of human services
12.11	or the commissioner of children, youth, and families must amend Minnesota Rules, part
12.12	9503.0040, subpart 4, or its successor as a part of the transition of responsibilities, to allow
12.13	a child to be designated as a "toddler" starting at 14 months.
12.14	Subd. 5. Good cause exempt process. Notwithstanding any other requirements for good
12.15	cause exempt rulemaking, the commissioner may use the procedure under Minnesota
12.16	Statutes, section 14.388, subdivision 1, clause (3), for changes to Minnesota Rules pursuant
12.17	to this section. Minnesota Statutes, section 14.386, does not apply to rules adopted pursuant
12.18	to this section except as provided under Minnesota Statutes, section 14.388.
12.19	Sec. 6. REPEALER.
12.20	(a) Minnesota Statutes 2024, section 142B.41, subdivision 7, is repealed.
12.21	(b) Minnesota Rules, parts 9503.0031; 9503.0032; 9503.0033; 9503.0034; and 9503.0040,
12.22	are repealed."
12.23	Amend the title accordingly

Sec. 6. 12