

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

1.2 Delete everything after the enacting clause and insert:

1.3 "Section 1. Minnesota Statutes 2018, section 245A.02, subdivision 2c, is amended to read:

1.4 Subd. 2c. **Annual or annually; family child care training requirements.** For the
1.5 purposes of ~~section~~ sections 245A.50, subdivisions 1 to 9 to 245A.53, "annual" or "annually"
1.6 means the 12-month period beginning on the license effective date or the annual anniversary
1.7 of the effective date and ending on the day prior to the annual anniversary of the license
1.8 effective date.

1.9 **EFFECTIVE DATE.** This section is effective September 30, 2020.

1.10 Sec. 2. Minnesota Statutes 2019 Supplement, section 245A.149, is amended to read:

1.11 **245A.149 SUPERVISION OF FAMILY CHILD CARE LICENSE HOLDER'S**
1.12 **OWN CHILD.**

1.13 (a) Notwithstanding Minnesota Rules, part 9502.0365, subpart 5, and with the license
1.14 holder's consent, an individual may be present in the licensed space, may supervise the
1.15 family child care license holder's own child both inside and outside of the licensed space,
1.16 and is exempt from the training and supervision requirements of this chapter and Minnesota
1.17 Rules, chapter 9502, if the individual:

1.18 (1) is related to the license holder or to the license holder's child, as defined in section
1.19 245A.02, subdivision 13, or is a household member who the license holder has reported to
1.20 the county agency;

1.21 (2) is not a designated caregiver, helper, or substitute for the licensed program;

1.22 (3) is involved only in the care of the license holder's own child; and

2.1 (4) does not have direct, unsupervised contact with any nonrelative children receiving
2.2 services.

2.3 (b) If the individual in paragraph (a) is not a household member, the individual is also
2.4 exempt from background study requirements under chapter 245C.

2.5 **EFFECTIVE DATE.** This section is effective September 30, 2020.

2.6 Sec. 3. Minnesota Statutes 2019 Supplement, section 245A.40, subdivision 7, is amended
2.7 to read:

2.8 Subd. 7. **In-service.** (a) A license holder must ensure that the center director, staff
2.9 persons, substitutes, and unsupervised volunteers complete in-service training each calendar
2.10 year.

2.11 (b) The center director and staff persons who work more than 20 hours per week must
2.12 complete 24 hours of in-service training each calendar year. Staff persons who work 20
2.13 hours or less per week must complete 12 hours of in-service training each calendar year.
2.14 Substitutes and unsupervised volunteers must complete the requirements of paragraphs ~~(e)~~
2.15 ~~to (h)~~ (d) through (g) and do not otherwise have a minimum number of hours of training to
2.16 complete.

2.17 (c) The number of in-service training hours may be prorated for individuals not employed
2.18 for an entire year.

2.19 (d) Each year, in-service training must include:

2.20 (1) the center's procedures for maintaining health and safety according to section 245A.41
2.21 and Minnesota Rules, part 9503.0140, and handling emergencies and accidents according
2.22 to Minnesota Rules, part 9503.0110;

2.23 (2) the reporting responsibilities under section 626.556 and Minnesota Rules, part
2.24 9503.0130;

2.25 (3) at least one-half hour of training on the standards under section 245A.1435 and on
2.26 reducing the risk of sudden unexpected infant death as required under subdivision 5, if
2.27 applicable; and

2.28 (4) at least one-half hour of training on the risk of abusive head trauma from shaking
2.29 infants and young children as required under subdivision 5a, if applicable.

2.30 (e) Each year, or when a change is made, whichever is more frequent, in-service training
2.31 must be provided on: (1) the center's risk reduction plan under section 245A.66, subdivision

3.1 2; and (2) a child's individual child care program plan as required under Minnesota Rules,
3.2 part 9503.0065, subpart 3.

3.3 (f) At least once every two calendar years, the in-service training must include:

3.4 (1) child development and learning training under subdivision 2;

3.5 (2) pediatric first aid that meets the requirements of subdivision 3;

3.6 (3) pediatric cardiopulmonary resuscitation training that meets the requirements of
3.7 subdivision 4;

3.8 (4) cultural dynamics training to increase awareness of cultural differences; and

3.9 (5) disabilities training to increase awareness of differing abilities of children.

3.10 (g) At least once every five years, in-service training must include child passenger
3.11 restraint training that meets the requirements of subdivision 6, if applicable.

3.12 (h) The remaining hours of the in-service training requirement must be met by completing
3.13 training in the following content areas of the Minnesota Knowledge and Competency
3.14 Framework:

3.15 (1) Content area I: child development and learning;

3.16 (2) Content area II: developmentally appropriate learning experiences;

3.17 (3) Content area III: relationships with families;

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

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

3.21 (6) Content area VI: professionalism;

3.22 (7) Content area VII: health, safety, and nutrition; and

3.23 (8) Content area VIII: application through clinical experiences.

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

3.25 (1) "Child development and learning training" means training in understanding how
3.26 children develop physically, cognitively, emotionally, and socially and learn as part of the
3.27 children's family, culture, and community.

3.28 (2) "Developmentally appropriate learning experiences" means creating positive learning
3.29 experiences, promoting cognitive development, promoting social and emotional development,
3.30 promoting physical development, and promoting creative development.

4.1 (3) "Relationships with families" means training on building a positive, respectful
4.2 relationship with the child's family.

4.3 (4) "Assessment, evaluation, and individualization" means training in observing,
4.4 recording, and assessing development; assessing and using information to plan; and assessing
4.5 and using information to enhance and maintain program quality.

4.6 (5) "Historical and contemporary development of early childhood education" means
4.7 training in past and current practices in early childhood education and how current events
4.8 and issues affect children, families, and programs.

4.9 (6) "Professionalism" means training in knowledge, skills, and abilities that promote
4.10 ongoing professional development.

4.11 (7) "Health, safety, and nutrition" means training in establishing health practices, ensuring
4.12 safety, and providing healthy nutrition.

4.13 (8) "Application through clinical experiences" means clinical experiences in which a
4.14 person applies effective teaching practices using a range of educational programming models.

4.15 (j) The license holder must ensure that documentation, as required in subdivision 10,
4.16 includes the number of total training hours required to be completed, name of the training,
4.17 the Minnesota Knowledge and Competency Framework content area, number of hours
4.18 completed, and the director's approval of the training.

4.19 (k) In-service training completed by a staff person that is not specific to that child care
4.20 center is transferable upon a staff person's change in employment to another child care
4.21 program.

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

4.23 Sec. 4. Minnesota Statutes 2018, section 245A.50, as amended by Laws 2019, First Special
4.24 Session chapter 9, article 2, section 53, is amended to read:

4.25 **245A.50 FAMILY CHILD CARE TRAINING REQUIREMENTS.**

4.26 Subdivision 1. **Initial training.** (a) License holders, adult caregivers, and substitutes
4.27 must comply with the training requirements in this section.

4.28 (b) Helpers who assist with care on a regular basis must complete six hours of training
4.29 within one year after the date of initial employment.

4.30 (c) Training requirements established under this section that must be completed prior
4.31 to initial licensure must be satisfied only by a newly licensed child care provider or by a

5.1 child care provider who has not held an active child care license in Minnesota in the previous
5.2 12 months. A child care provider who voluntarily cancels a license or allows the license to
5.3 lapse for a period of less than 12 months and who seeks reinstatement of the lapsed or
5.4 canceled license within 12 months of the lapse or cancellation must satisfy the annual,
5.5 ongoing training requirements, and is not required to satisfy the training requirements that
5.6 must be completed prior to initial licensure. A child care provider who relocates within the
5.7 state must (1) satisfy the annual, ongoing training requirements according to the schedules
5.8 established in this section and (2) not be required to satisfy the training requirements under
5.9 this section that the child care provider completed prior to initial licensure. If a licensed
5.10 provider moves to a new county, the new county is prohibited from requiring the provider
5.11 to complete any orientation class or training for new providers.

5.12 (d) Before an adult caregiver or substitute cares for a child or assists in the care of a
5.13 child, the license holder must train the adult caregiver or substitute on:

5.14 (1) the emergency preparedness plan required under section 245A.51, subdivision 3;
5.15 and

5.16 (2) allergy prevention and response required under section 245A.51, subdivision 1.

5.17 Subd. 1a. **Definitions and general provisions.** (a) For the purposes of this section, the
5.18 following terms have the meanings given:

5.19 (1) "adult caregiver" means an adult other than the license holder who supervises children
5.20 for a cumulative total of more than 500 hours annually;

5.21 (2) "helper" means a minor, ages 13 to 17, who assists in caring for children; and

5.22 (3) "substitute" means an adult who assumes responsibility for a provider for a cumulative
5.23 total of not more than 500 hours annually.

5.24 (b) Notwithstanding other requirements of this section, courses within the identified
5.25 Knowledge and Competency Areas that are specific to child care centers or legal nonlicensed
5.26 providers do not fulfill the requirements of this section.

5.27 Subd. 2. **Child development and learning and behavior guidance training.** (a) For
5.28 purposes of family and group family child care, the license holder and each adult caregiver
5.29 who provides care in the licensed setting for more than 30 days in any 12-month period
5.30 shall complete and document at least four hours of child growth and learning and behavior
5.31 guidance training prior to initial licensure, and before caring for children. For purposes of
5.32 this subdivision, "child development and learning training" means training in understanding
5.33 how children develop physically, cognitively, emotionally, and socially and learn as part

6.1 ~~of the children's family, culture, and community. "Behavior guidance training" means~~
6.2 ~~training in the understanding of the functions of child behavior and strategies for managing~~
6.3 ~~challenging situations. At least two hours of child development and learning or behavior~~
6.4 ~~guidance training must be repeated annually. Training curriculum shall be developed or~~
6.5 ~~approved by the commissioner of human services.~~

6.6 This requirement must be met by completing one of the following:

6.7 (1) two hours in Knowledge and Competency Area I: Child Development and Learning
6.8 or Knowledge, and two hours in Knowledge and Competency Area II-C: Promoting Social
6.9 and Emotional Development; or

6.10 (2) four hours in Knowledge and Competency Area II-C; or

6.11 (3) one four-hour course in both Knowledge and Competency Area I and Knowledge
6.12 and Competency Area II-C.

6.13 Training curriculum shall be developed or approved by the commissioner of human services.

6.14 (b) Notwithstanding initial child development and learning and behavior guidance
6.15 training requirements in paragraph (a), individuals are exempt from this requirement if they:

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

6.18 (2) have received a baccalaureate or master's degree in early childhood education or
6.19 school-age child care within the past five years;

6.20 (3) are licensed in Minnesota as a prekindergarten teacher, an early childhood educator,
6.21 a kindergarten to grade 6 teacher with a prekindergarten specialty, an early childhood special
6.22 education teacher, or an elementary teacher with a kindergarten endorsement; or

6.23 (4) have received a baccalaureate degree with a Montessori certificate within the past
6.24 five years.

6.25 (c) The license holder and adult caregivers must annually take at least two hours of child
6.26 development and learning or behavior guidance training. This annual training must be
6.27 fulfilled by completing any course in Knowledge and Competency Area I: Child Development
6.28 and Learning or Knowledge and Competency Area II-C: Promoting Social and Emotional
6.29 development. Training curriculum shall be developed or approved by the commissioner of
6.30 human services.

6.31 (d) A three-credit course about early childhood development meets the requirements of
6.32 paragraph (c).

7.1 Subd. 3. **First aid.** (a) ~~When children are present in a family child care home governed~~
7.2 ~~by Minnesota Rules, parts 9502.0315 to 9502.0445, at least one staff person must be present~~
7.3 ~~in the home who has been trained in first aid~~ Before initial licensure and before caring for
7.4 a child, license holders, adult caregivers, and substitutes must be trained in pediatric first
7.5 aid. The first aid training must have been provided by an individual approved to provide
7.6 first aid instruction. First aid training may be less than eight hours and persons qualified to
7.7 provide first aid training include individuals approved as first aid instructors. ~~First aid~~
7.8 ~~training must be repeated~~ License holders, adult caregivers, and substitutes must repeat
7.9 pediatric first aid training every two years.

7.10 (b) ~~A family child care provider is exempt from the first aid training requirements under~~
7.11 ~~this subdivision related to any substitute caregiver who provides less than 30 hours of care~~
7.12 ~~during any 12-month period.~~

7.13 (e) (b) Video training reviewed and approved by the county licensing agency satisfies
7.14 the training requirement of this subdivision.

7.15 Subd. 4. **Cardiopulmonary resuscitation.** (a) ~~When children are present in a family~~
7.16 ~~child care home governed by Minnesota Rules, parts 9502.0315 to 9502.0445, at least one~~
7.17 ~~caregiver must be present in the home who has been trained in cardiopulmonary resuscitation~~
7.18 ~~(CPR)~~ Before initial licensure and before caring for a child, license holders, adult caregivers,
7.19 and substitutes must be trained in pediatric cardiopulmonary resuscitation (CPR), including
7.20 CPR techniques for infants and children, and in the treatment of obstructed airways. The
7.21 CPR training must have been provided by an individual approved to provide CPR instruction,
7.22 License holders, adult caregivers, and substitutes must be repeated repeat pediatric CPR
7.23 training at least once every two years, and it must be documented in the caregiver's license
7.24 holder's records.

7.25 (b) ~~A family child care provider is exempt from the CPR training requirement in this~~
7.26 ~~subdivision related to any substitute caregiver who provides less than 30 hours of care during~~
7.27 ~~any 12-month period.~~

7.28 (e) (b) Persons providing CPR training must use CPR training that has been developed:

7.29 (1) by the American Heart Association or the American Red Cross and incorporates
7.30 psychomotor skills to support the instruction; or

7.31 (2) using nationally recognized, evidence-based guidelines for CPR training and
7.32 incorporates psychomotor skills to support the instruction.

8.1 Subd. 5. **Sudden unexpected infant death and abusive head trauma training.** (a)
8.2 License holders must ensure and document that before ~~staff persons~~ the license holder, adult
8.3 caregivers, substitutes, and helpers assist in the care of infants, they are instructed on the
8.4 standards in section 245A.1435 and receive training on reducing the risk of sudden
8.5 unexpected infant death. In addition, license holders must ensure and document that before
8.6 ~~staff persons~~ the license holder, adult caregivers, substitutes, and helpers assist in the care
8.7 of infants and children under school age, they receive training on reducing the risk of abusive
8.8 head trauma from shaking infants and young children. The training in this subdivision may
8.9 be provided as initial training under subdivision 1 or ongoing annual training under
8.10 subdivision 7.

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

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

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

8.25 (e) Sudden unexpected infant death reduction training and abusive head trauma training
8.26 required under this subdivision must be completed in person or as allowed under subdivision
8.27 10, clause (1) or (2), at least once every two years. On the years when the ~~license holder~~
8.28 person receiving training is not receiving training in person or as allowed under subdivision
8.29 10, clause (1) or (2), the ~~license holder~~ person receiving training in accordance with this
8.30 subdivision must receive sudden unexpected infant death reduction training and abusive
8.31 head trauma training through a video of no more than one hour in length. The video must
8.32 be developed or approved by the commissioner.

8.33 (f) An individual who is related to the license holder as defined in section 245A.02,
8.34 subdivision 13, and who is involved only in the care of the license holder's own infant or

9.1 child under school age and who is not designated to be a an adult caregiver, helper, or
9.2 substitute, as defined in Minnesota Rules, part 9502.0315, for the licensed program, is
9.3 exempt from the sudden unexpected infant death and abusive head trauma training.

9.4 Subd. 6. **Child passenger restraint systems; training requirement.** (a) A license
9.5 holder must comply with all seat belt and child passenger restraint system requirements
9.6 under section 169.685.

9.7 (b) Family and group family child care programs licensed by the Department of Human
9.8 Services that serve a child or children under nine years of age must document training that
9.9 fulfills the requirements in this subdivision.

9.10 (1) Before a license holder, ~~staff person,~~ adult caregiver, substitute, or helper transports
9.11 a child or children under age nine in a motor vehicle, the person placing the child or children
9.12 in a passenger restraint must satisfactorily complete training on the proper use and installation
9.13 of child restraint systems in motor vehicles. Training completed under this subdivision may
9.14 be used to meet initial training under subdivision 1 or ongoing training under subdivision
9.15 7.

9.16 (2) Training required under this subdivision must be at least one hour in length, completed
9.17 at initial training, and repeated at least once every five years. At a minimum, the training
9.18 must address the proper use of child restraint systems based on the child's size, weight, and
9.19 age, and the proper installation of a car seat or booster seat in the motor vehicle used by the
9.20 license holder to transport the child or children.

9.21 (3) Training under this subdivision must be provided by individuals who are certified
9.22 and approved by the Department of Public Safety, Office of Traffic Safety. License holders
9.23 may obtain a list of certified and approved trainers through the Department of Public Safety
9.24 website or by contacting the agency.

9.25 (c) Child care providers that only transport school-age children as defined in section
9.26 245A.02, subdivision 19, paragraph (f), in child care buses as defined in section 169.448,
9.27 subdivision 1, paragraph (e), are exempt from this subdivision.

9.28 Subd. 7. **Training requirements for family and group family child care.** For purposes
9.29 of family and group family child care, the license holder and each primary adult caregiver
9.30 must complete 16 hours of ongoing training each year. ~~For purposes of this subdivision, a~~
9.31 ~~primary caregiver is an adult caregiver who provides services in the licensed setting for~~
9.32 ~~more than 30 days in any 12-month period.~~ Repeat of topical training requirements in
9.33 subdivisions 2 to 8 shall count toward the annual 16-hour training requirement. Additional

10.1 ongoing training subjects to meet the annual 16-hour training requirement must be selected
10.2 from the following areas:

10.3 (1) child development and learning training ~~under subdivision 2, paragraph (a) in~~
10.4 understanding how a child develops physically, cognitively, emotionally, and socially, and
10.5 how a child learns as part of the child's family, culture, and community;

10.6 (2) developmentally appropriate learning experiences, including training in creating
10.7 positive learning experiences, promoting cognitive development, promoting social and
10.8 emotional development, promoting physical development, promoting creative development;
10.9 and behavior guidance;

10.10 (3) relationships with families, including training in building a positive, respectful
10.11 relationship with the child's family;

10.12 (4) assessment, evaluation, and individualization, including training in observing,
10.13 recording, and assessing development; assessing and using information to plan; and assessing
10.14 and using information to enhance and maintain program quality;

10.15 (5) historical and contemporary development of early childhood education, including
10.16 training in past and current practices in early childhood education and how current events
10.17 and issues affect children, families, and programs;

10.18 (6) professionalism, including training in knowledge, skills, and abilities that promote
10.19 ongoing professional development; and

10.20 (7) health, safety, and nutrition, including training in establishing healthy practices;
10.21 ensuring safety; and providing healthy nutrition.

10.22 **Subd. 8. Other required training requirements.** (a) The training required of family
10.23 and group family child care providers and staff must include training in the cultural dynamics
10.24 of early childhood development and child care. The cultural dynamics and disabilities
10.25 training and skills development of child care providers must be designed to achieve outcomes
10.26 for providers of child care that include, but are not limited to:

10.27 (1) an understanding and support of the importance of culture and differences in ability
10.28 in children's identity development;

10.29 (2) understanding the importance of awareness of cultural differences and similarities
10.30 in working with children and their families;

10.31 (3) understanding and support of the needs of families and children with differences in
10.32 ability;

11.1 (4) developing skills to help children develop unbiased attitudes about cultural differences
11.2 and differences in ability;

11.3 (5) developing skills in culturally appropriate caregiving; and

11.4 (6) developing skills in appropriate caregiving for children of different abilities.

11.5 The commissioner shall approve the curriculum for cultural dynamics and disability
11.6 training.

11.7 (b) The provider must meet the training requirement in section 245A.14, subdivision
11.8 11, paragraph (a), clause (4), to be eligible to allow a child cared for at the family child care
11.9 or group family child care home to use the swimming pool located at the home.

11.10 Subd. 9. **Supervising for safety; training requirement.** (a) Courses required by this
11.11 subdivision must include the following health and safety topics:

11.12 (1) preventing and controlling infectious diseases;

11.13 (2) administering medication;

11.14 (3) preventing and responding to allergies;

11.15 (4) ensuring building and physical premise safety;

11.16 (5) handling and storing biological contaminants;

11.17 (6) preventing and reporting child abuse and maltreatment; and

11.18 (7) emergency preparedness.

11.19 (b) Before initial licensure and before caring for a child, all family child care license
11.20 holders and each adult caregiver ~~who provides care in the licensed family child care home~~
11.21 ~~for more than 30 days in any 12-month period~~ shall complete and document the completion
11.22 of the six-hour Supervising for Safety for Family Child Care course developed by the
11.23 commissioner.

11.24 (c) The license holder must ensure and document that, before caring for a child, all
11.25 substitutes have completed the four-hour Basics of Licensed Family Child Care for
11.26 Substitutes course developed by the commissioner, which must include health and safety
11.27 topics as well as child development and learning.

11.28 ~~(b)~~ (d) The family child care license holder and each adult caregiver ~~who provides care~~
11.29 ~~in the licensed family child care home for more than 30 days in any 12-month period~~ shall
11.30 complete and document:

12.1 (1) the annual completion of a two-hour active supervision course developed by the
 12.2 commissioner, which may be fulfilled by completing any course in Knowledge and
 12.3 Competency Area VII-A: Establishing Healthy Practices or Knowledge and Competency
 12.4 area VII-B: Ensuring Safety, that is not otherwise required in this section; and

12.5 (2) the completion at least once every five years of the two-hour courses Health and
 12.6 Safety I and Health and Safety II. A license holder's or adult caregiver's completion of either
 12.7 training in a given year meets the annual active supervision training requirement in clause
 12.8 (1).

12.9 (e) At least once every three years, license holders must ensure and document that
 12.10 substitutes have completed the four-hour Basics of Licensed Family Child Care for
 12.11 Substitutes course.

12.12 Subd. 10. **Approved training.** County licensing staff must accept training approved by
 12.13 the Minnesota Center for Professional Development, including:

12.14 (1) face-to-face or classroom training;

12.15 (2) online training; and

12.16 (3) relationship-based professional development, such as mentoring, coaching, and
 12.17 consulting.

12.18 Subd. 11. **Provider training.** New and increased training requirements under this section
 12.19 must not be imposed on providers until the commissioner establishes statewide accessibility
 12.20 to the required provider training.

12.21 **EFFECTIVE DATE.** This section is effective September 30, 2020.

12.22 Sec. 5. **DIRECTION TO THE COMMISSIONER; EVALUATION OF**
 12.23 **CONTINUOUS LICENSES.**

12.24 By January 1, 2021, the commissioner of human services shall consult with family child
 12.25 care license holders and county agencies to determine whether family child care licenses
 12.26 should automatically renew instead of requiring license holders to reapply for licensure. If
 12.27 the commissioner determines that family child care licenses should automatically renew,
 12.28 the commissioner must propose legislation for the 2021 legislative session to make the
 12.29 required amendments to statute and administrative rules, as necessary.

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

12.31 Amend the title accordingly