



Implementation Plan for 2017 Legislative Changes Impacting Licensed Family Child Care

Minnesota Department of Human Services
Office of Inspector General
Licensing Division

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Introduction

During the 2017 legislative session, state legislators enacted several changes that impacted family child care programs, including changes to county monitoring practices and procedures. This Implementation Plan provides information about each change to family child care licensing requirements, and changes to family child care licensing functions delegated to the counties.

Each section contains an overview of the new or changed requirement, what providers need to do to comply with each new requirement (if any action is needed), and instructions for county licensors about how and when to monitor these new requirements.

ELICI roll-out

Between May and October 2017, the new Electronic Licensing Inspection Checklist Information (ELICI) tool was rolled out to each county throughout the state. Starting January 1, 2018, all family child care licensors will use this tool to document inspections that they complete for family child care programs beginning with the pre-licensing inspection. This tool will guide licensors through their monitoring activities for all inspections including, pre-licensing, licensing and re-licensing, off-year, change of premise, investigations, drop-in visits, and monitoring of a conditional license. After the monitoring inspection is complete, the licensor will issue the appropriate notice, as required. The notice may be a “no violation letter” that indicates that no violations were determined, a Fix-It Ticket, or a correction order.

County licensor training

Minn. Stat. 245A.16, subd. 7

Family child care licensing oversight. Only county staff trained by the commissioner on the family child care licensing standards in this chapter and Minnesota Rules, chapter 9502, shall perform family child care licensing functions under subdivision 1. Training must occur within 90 days of a staff person's employment.

County family child care licensors must receive training from the commissioner on the licensing standards for family child care. For newly hired licensors, the training must occur within 90 days of the licensor’s employment. DHS has developed a course titled “Family Child Care—The Basics Plus” that will include the required licensing standards component. On an ongoing basis, DHS will schedule training events so that newly hired licensors can attend both Licensing 101 and the new Basics Plus within the first 90 days of their employment with the county. Beginning in January 2018, DHS will offer additional regional Basics Plus training events to allow current licensors to access the training.

In addition to the above requirement, the legislature approved additional funding for DHS to increase staffing to improve oversight of county licensing activities through increased training, technical assistance, and partnering with county agencies. The Family Systems, Family Child Care Unit has split into two units. One unit focuses on the increased technical assistance and partnering with county licensing agencies. The other unit focuses on operations and the work related to general technical assistance regarding the licensing process, providing information and tools for the licensing process, and processing recommendations for licensing sanctions. The additional licensing consultants for the increased technical assistance and partnering will be assigned regionally. The regional consultants will have frequent contact with county licensors, including visits to county offices and accompanying county licensors on site visits to family child care programs. In addition, the regional consultants will be available to provide regional training events for licensors and participate in regional provider stakeholder meetings.

Annual inspections

Minn. Stat. 245A.04, subd. 4

(d) The commissioner or the county shall inspect at least annually a child care provider licensed under this chapter and Minnesota Rules, chapter 9502 or 9503, for compliance with applicable licensing standards.

Minn. Stat. 245A.16, subd. 1

(c) For family child care programs, the commissioner shall require a county agency to conduct one unannounced licensing review at least annually.

Overview: Beginning January 1, 2018, county licensors must conduct unannounced annual inspections of licensed family child care programs.

What do providers need to do?

In years when the license is due for renewal, the providers will continue to submit their relicensing materials, including the license application and the [FCC Monitoring Questionnaire](#), within the timeframe requested by the county licensing agency. (The FCC Monitoring Questionnaire was formerly known as the “Family Child Care Licensing Checklist,” and has recently been revised.) At this time, DHS does not have paperwork for providers to complete for an “Off year” visit.

What do county licensors need to do?

For each license renewal visit completed in 2018, the county licensor will complete the inspection using the “Licensing/Relicensing” [ELICI checklist](#). For family child care programs not due for a license renewal in 2018, the county licensor will complete an abbreviated licensing review using the “Off-year” ELICI checklist. These off-year visits should be completed within a 90 day period before or after the annual anniversary of the license effective date. While this is intended to be an abbreviated review, if the licensor observes a violation not included in the off-year checklist, the violation should be documented in ELICI.

This review cycle will continue into the future, with each licensed family child care program receiving either a relicensing inspection or an off-year inspection in each calendar year. (Please note that there is no change to the requirement for the initial license to be issued for one year and full relicensing review to be completed after the first year of licensure.)

Although the annual inspection may not be scheduled in advance with the provider, the county licensor may inquire whether there are any days the program will be closed within 90 days prior to the inspection due date to avoid making an unannounced visit on a day the program is not operating.

Additionally, the licensor must issue the appropriate notice to the provider following the visit (i.e., a no-violation letter, a Fix-It Ticket, and/or a correction order). Finally, the licensor is responsible for finalizing the inspection in a timely manner and for monitoring the provider’s response to any violations included in a Fix-It Ticket or correction order.

Exit interviews

Minn. Stat. 245A.04, subd. 4

(c) Before completing a licensing inspection in a family child care program or child care center, the licensing agency must offer the license holder an exit interview to discuss violations of law or rule observed during the inspection and offer technical assistance on how to comply with applicable laws and rules. Nothing in this paragraph limits the ability of the commissioner to issue a correction order or negative action for violations of law or rule not discussed in an exit interview or in the event that a license holder chooses not to participate in an exit interview.

Overview: Beginning January 1, 2018, county licensors must offer an exit interview to the provider at the conclusion of each annual licensing inspection. The goal of the exit interview is open communication and transparency about licensing requirements in order to assist the provider in achieving ongoing compliance.

What do providers need to do?

Providers should participate in the exit interview to learn what the licensor found during the inspection and to ask for clarification of any unclear requirements. While the provider is not required to participate in an exit interview, it is a valuable opportunity for the provider and licensor to engage in a collaborative discussion to assist the provider in complying with licensing requirements.

What do county licensors need to do?

The licensor should conduct the exit interview at the end of the licensing inspection, before departing from the family child care home. If an exit interview is not practical at the end of the inspection, the exit interview can be offered either by phone or in person within 2 business days after the licensing inspection, unless other arrangements are agreed upon between the provider and licensor.

Exit interviews should start with a discussion of any items the licensor flagged during the inspection for a follow-up discussion with the licensed provider, as well as positive feedback on areas where the provider is excelling. The exit interview must include a discussion of:

- The items the licensor found out of compliance with law or rule during the visit that will be included in a Fix-It-Ticket or correction order. If a Fix-It-Ticket will be issued, this can be done during the exit interview.
- Technical assistance on how to comply with law or rule. This may include discussion of any questions the provider has, as well as suggestions for how the provider can achieve and maintain compliance with licensing requirements.

The licensor should also inform the provider when there are additional items for which the licensor needs to consult with a supervisor or DHS to determine whether there is a violation. While it is preferable that all areas of non-compliance or concern are discussed with the provider prior to issuing a Fix-It-Ticket or correction order, the licensor is not precluded from including violations on a Fix-It Ticket or correction order if they were not discussed, or in the event the provider chooses not to participate in an exit interview.

Fix-It Ticket

Minn. Stat. 245A.065

(a) In lieu of a correction order under section 245A.06, the commissioner shall issue a fix-it ticket to a family child care or child care center license holder if the commissioner finds that:

(1) the license holder has failed to comply with a requirement in this chapter or Minnesota Rules, chapter 9502 or 9503, that the commissioner determines to be eligible for a fix-it ticket;

(2) the violation does not imminently endanger the health, safety, or rights of the persons served by the program;

(3) the license holder did not receive a fix-it ticket or correction order for the violation at the license holder's last licensing inspection;

(4) the violation can be corrected at the time of inspection or within 48 hours, excluding Saturdays, Sundays, and holidays; and

(5) the license holder corrects the violation at the time of inspection or agrees to correct the violation within 48 hours, excluding Saturdays, Sundays, and holidays.

(b) The fix-it ticket must state:

(1) the conditions that constitute a violation of the law or rule;

(2) the specific law or rule violated; and

(3) that the violation was corrected at the time of inspection or must be corrected within 48 hours, excluding Saturdays, Sundays, and holidays.

(c) The commissioner shall not publicly publish a fix-it ticket on the department's Web site.

(d) Within 48 hours, excluding Saturdays, Sundays, and holidays, of receiving a fix-it ticket, the license holder must correct the violation and within one week submit evidence to the licensing agency that the violation was corrected.

(e) If the violation is not corrected at the time of inspection or within 48 hours, excluding Saturdays, Sundays, and holidays, or the evidence submitted is insufficient to establish that the license holder corrected the violation, the commissioner must issue a correction order for the violation of Minnesota law or rule identified in the fix-it ticket according to section 245A.06.

(f) The commissioner shall, following consultation with family child care license holders, child care center license holders, and county agencies, issue a report by October 1, 2017, that identifies the violations of this chapter and Minnesota Rules, chapters 9502 and 9503, that are eligible for a fix-it ticket. The commissioner shall provide the report to county agencies and the chairs and ranking minority members of the legislative committees with jurisdiction over child care, and shall post the report to the department's Web site.

Fix-It Ticket, continued

Overview: Beginning January 1, 2018, county licensors are required to issue a Fix-It Ticket for certain violations identified by the commissioner that do not imminently endanger the health, safety, or rights of children. The Fix-It Ticket provides an opportunity for the provider to correct eligible violations and avoid receiving a correction order for these violations if they are corrected within the allotted timeframe. A report that identifies the violations eligible for a Fix-It Ticket is posted online on the [DHS Licensing webpage for child care](#).

What do providers need to do?

Upon receipt of a Fix-It Ticket, the provider may:

- A. Correct the violation at the time of inspection or within 48 hours (excluding Saturdays, Sundays, and holidays). For violations corrected within 48 hours, the provider must submit evidence to the licensor within one week after the deadline for correction that the violation was corrected. If the evidence is sufficient, the Fix-It Ticket violation(s) are considered resolved; or
- B. Not correct the violation at the time of inspection or within 48 hours and/or not submit evidence that the violation was corrected. In this case, the county licensor must issue a correction order for the violation listed in the Fix-It Ticket using the ELICI tool.

The Fix-It Ticket does not have its own appeal rights. If the provider disagrees with a Fix-It Ticket violation, the provider can choose to not respond to the Fix-It Ticket and the licensor would then issue a correction order for the violation after the allotted time for correction has passed. Upon receipt of a correction order, the provider has the right to request reconsideration from DHS. Providers are not required to post the Fix-It Ticket.

What do county licensors need to do?

A Fix-It Ticket must be issued for each eligible violation if the provider did not receive a Fix-It Ticket or correction order for the same violation at the provider's last annual licensing inspection. When applicable, the county licensor will issue a Fix-It Ticket to the provider at the time of the inspection using the [Fix-It Ticket form](#). The licensor will identify on the form by letter (listed on page 2 of the form) the item(s) that was not in compliance and whether the provider was able to correct the item while the licensor was on-site or if the provider has 48 hours (excluding weekends and holidays) to correct the violation. For inspections completed in 2018, all providers are eligible for a Fix-It Ticket for all items regardless of the outcome of the inspections completed in 2017. In 2019, items on the list are not eligible for a Fix-It Ticket if a correction order or a Fix-It Ticket was issued for the violation at the 2018 annual inspection.

Fix-It Ticket eligible violations are programmed into ELICI, with options for the county licensor to indicate that the violation was corrected on-site, or to indicate correction of the violation after evidence is submitted by the provider. If a Fix-It Ticket violation is not corrected within the required timelines, the licensor must issue a correction order for the violation using the ELICI tool.

Amended correction orders

Minn. Stat. 245A.06, subd. 8

(b) If the commissioner reverses or rescinds a violation in a correction order upon reconsideration under subdivision 2, the commissioner shall issue an amended correction order and the license holder shall post the amended order according to paragraph (a).

(c) If the correction order is rescinded or reversed in full upon reconsideration under subdivision 2, the license holder shall remove the original correction order posted according to paragraph (a).

Overview: The commissioner is now required to issue an amended correction order when one or more violations on a correction order are reversed or rescinded as a result of the licensed provider's request for reconsideration from DHS. DHS will distribute the reconsideration decision and the amended correction order, when applicable, to both the licensed provider and the county licensing agency.

What do providers need to do?

When an amended correction order is issued, the provider must post the amended correction order (instead of the original correction order) in a conspicuous place in the family child care program. If all violations in a correction order are reversed or rescinded, the licensed provider shall remove the original correction order from being posted in the family child care program.

What do county licensors need to do?

DHS has the responsibility to issue the amended correction order as the result of a reconsideration.

If a county licensor determines that a citation was issued in error, the licensor will need to contact DHS for assistance in issuing an amended correction order.

Expedited reconsideration process for certain violations

Minn. Stat. 245A.06, subd. 2

(b) This paragraph applies only to licensed family child care providers. A licensed family child care provider who requests reconsideration of a correction order under paragraph (a) may also request, on a form and in the manner prescribed by the commissioner, that the commissioner expedite the review if:

- (1) The provider is challenging a violation and provides a description of how complying with the corrective action would require the substantial expenditure of funds or a significant change to their program; and
- (2) Describes what actions the provider will take in lieu of the corrective action ordered to ensure the health and safety of children in care pending the commissioner's review of the correction order.

Overview: Family child care providers may request that DHS expedite their correction order reconsideration if the provider is challenging a violation for which the corrective action would require a substantial expenditure of funds, or a significant change to their program. When requesting an expedited reconsideration, the provider must describe what actions the provider will take in lieu of the corrective action ordered to ensure the health and safety of children pending the commissioner's review of the correction order.

What do providers need to do?

If the provider disagrees with a correction order where the corrective action would require a substantial expenditure of funds, or a significant change to the operation of the program, the provider may request expedited reconsideration from DHS. Examples of substantial expenditures may include installing fencing or egress windows, or making structural modifications to the home. A significant change to the operation of the program may include things such as disruption to children in the program, or disruption of a large area of licensed space within the home or the yard in order to comply with the correction order.

The correction order will include instructions for how the provider can request reconsideration from DHS for any correction order, and will direct the provider to DHS' website for instructions and a form to complete for an [expedited reconsideration request](#).

The provider must submit the request for reconsideration postmarked within 20 calendar days of the date they received the correction order. While awaiting DHS' decision, the provider must continue to comply with any alternative action the provider took to ensure the health and safety of children in care.

What do county licensors need to do?

DHS will notify the county licensor by email of the provider's expedited reconsideration request. The email will include a copy of the reconsideration request, a deadline for the county licensor's response, and an email address to which the county's response may be submitted. DHS has developed a fillable [form](#) that can be used by the provider to submit their expedited reconsideration request. DHS will notify the provider and the county of the reconsideration decision. If DHS affirms the violation, the licensor will follow up with the provider to determine that the required correction has been made.

Posting Licensing Information

245A.04, subd. 4

(e) No later than November 19, 2017, the commissioner shall make publicly available on the department's Web site the results of inspection reports of all child care providers licensed under this chapter and under Minnesota Rules, chapter 9502 or 9503, and the number of deaths, serious injuries, and instances of substantiated child maltreatment that occurred in licensed child care settings each year.

S.F. 2, Article 7, Sec. 35. Child Care Correction Order Posting Guidelines.

No later than November 1, 2017, the commissioner shall develop guidelines for posting public licensing data for licensed child care programs. In developing the guidelines, the commissioner shall consult with stakeholders, including licensed child care center providers, family child care providers, and county agencies.

Overview: DHS is now required to post the results of child care licensing inspections on the DHS website, and to report the total number of deaths, serious injuries, and substantiated maltreatment that occurred in licensed child care settings each year. DHS is also required to develop guidelines for posting public licensing data in consultation with family child care providers, child care centers, and county agencies.

What do providers need to do?

The posting of inspection results on the DHS website (<https://licensinglookup.dhs.state.mn.us/>) will be new for family child care providers; however, providers do not need to take any action related to the posting of these results.

For deaths, serious injuries, and maltreatment, providers will continue to immediately report to the county any death or serious injury of a child in care (under [Minnesota Rules, part 9502.0375](#)), and any instance of suspected maltreatment (under [Minnesota Statutes, section 626.556](#)).

Serious injuries that must be reported to the county licenser are injuries to a child that are treated by a physician. This means that if a child sees a physician for evaluation of an injury, but no treatment is given, the injury does not need to be reported. (Examples of injuries that do not need to be reported include things such as cuts or scrapes for which the child sees a physician but no treatment is needed, a bump to a tooth if the dentist determines no treatment is needed, etc.) Providers may ask their licenser for guidance if unsure whether an injury needs to be reported.

What do county licensers need to do?

Effective January 1, 2018, county licensers must use ELICI to document the outcome of every inspection visit to a family child care program. Inspection information recorded in ELICI will be used for the posting of inspection results on the DHS website. The Department will be releasing additional information about the specific types of licensing information that will be made publicly available in the upcoming weeks.

Licensers will use the [Quarterly Serious Injury Reporting Form](#) to document serious injuries reported by providers. The form needs to be submitted to DHS each calendar quarter, by the tenth day of the month following the end of the quarter. Licensers will continue to immediately report to DHS any death or injury resulting in hospitalization of a child. Systems already exist for DHS to collect maltreatment data.

Definition of “annual”

Minn. Stat. 245A.02, subd. 2c

Annual or annually; family child care training requirements. For the purposes of section 245A.50, subdivisions 1 to 9, "annual" or "annually" means the 12-month period beginning on the license effective date or the annual anniversary of the effective date and ending on the day prior to the annual anniversary of the license effective date.

Overview: The definition of “annual” was modified for the purposes of family child care training requirements to allow for the completion of annual training requirements within the one year period following the license effective date, or the one year period following the anniversary of the license effective date.

What do providers need to do?

Providers need to ensure that they, and the caregivers in their program, complete annual training requirements and provide documentation to their licensor at the annual licensing inspection, or after the licensing inspection within the applicable one year period for any training completed after the date of the inspection.

The definition of “annual” does not apply to CPR/First Aid or Child Passenger Restraint Training. CPR/First Aid training must be completed within two years from the date the training was most recently completed. Child Passenger Restraint Training must be completed within five years from the date the training was most recently completed (if you transport children or place children in passenger restraints).

For substitute caregivers who work for multiple licensed family child care programs, it is recommended that these caregivers complete the SUID/AHT training requirements once every 12 months to ensure compliance for each program they provide care in.

What do county licensors need to do?

County licensors will monitor completion of annual training requirements to ensure that any required training topics were completed within the applicable one year period. This will be either the first year after the license effective date, or the second year of a two year license. Licensors will no longer verify that annual training was completed within a certain month of the year, just that it was completed before the end of the applicable one year period.

Since providers other caregivers have until the end of the licensing year to complete annual training requirements, it is possible that all required trainings may not yet be completed at the time of the licensing inspection. Licensors need to accept training completed through the end of the licensing year as meeting the annual training requirements.

It is the responsibility of the licensed provider to ensure that substitute caregiver training records are available for review.

Child development and learning; behavior guidance training

Minn. Stat. 245A.50, subd. 2

Child development and learning and behavior guidance training. (a) For purposes of family and group family child care, the license holder and each adult caregiver who provides care in the licensed setting for more than 30 days in any 12-month period shall complete and document at least four hours of child growth and behavior guidance training prior to initial licensure, and before caring for children. For purposes of this subdivision, "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. "Behavior guidance training" means training in the understanding of the functions of child behavior and strategies for managing challenging situations. At least two hours of child development and learning or behavior guidance training must be repeated annually. Training curriculum shall be developed or approved by the commissioner of human services.

Overview: The child development training terminology and definition were updated to align with the current Minnesota Knowledge & Competency Framework, and the ongoing annual training requirement was clarified.

What do providers need to do?

For the ongoing annual training requirement, license holders and adult caregivers may now complete a two hour child development and learning course OR a two hour behavior guidance course to meet the annual training requirement.

Training offered through [Develop](#) meets these training requirements. Courses are identified in Develop by the applicable Minnesota Knowledge & Competency Framework (KCF) Area. KCF Content Area I courses meet the Child Development and Learning training requirement. KCF Content Area IIC courses meet both the Child Development and Learning and the Behavior Guidance training requirements. For ongoing annual training, one course from either Content Area I or Content Area IIC will meet the annual training requirement.

Please note that a new license holder or adult caregiver can meet the initial four hour training requirement by completing:

- One four hour course that includes both Content Area I and Content Area IIC;
- A two hour Content Area I course and a two hour Content Area IIC course; or
- Two 2 hour Content Area IIC courses.

What do county licensors need to do?

County licensors need to verify that the license holder/caregivers have taken the correct courses and document the outcome in the ELICI tool. ELICI will be updated to address these changes to the training requirements. Please note that this change, which offers more flexibility for providers, is in effect now.

Ongoing training

Minn. Stat. 245A.50, subd. 7

Ongoing training. Training requirements for family and group family child care. For purposes of family and group family child care, the license holder and each primary caregiver must complete 16 hours of ongoing training each year. For purposes of this subdivision, a primary caregiver is an adult caregiver who 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 16-hour training requirement. Additional ongoing training subjects to meet the annual 16-hour training requirement must be selected from the following areas:

- (1) child development and learning training under subdivision 2, paragraph (a);
- (2) developmentally appropriate learning experiences, including training in creating positive learning experiences, promoting cognitive development, promoting social and emotional development, promoting physical development, promoting creative development; and behavior guidance;
- (3) relationships with families, including training in building a positive, respectful relationship with the child's family;
- (4) assessment, evaluation, and individualization, including 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, including training in past and current practices in early childhood education and how current events and issues affect children, families, and programs;
- (6) professionalism, including training in knowledge, skills, and abilities that promote ongoing professional development; and
- (7) health, safety, and nutrition, including training in establishing healthy practices; ensuring safety; and providing healthy nutrition.

Ongoing training, continued

Overview: The terminology for the list of additional ongoing training subjects to meet the annual 16-hour training requirement was also updated to align with the current Minnesota Knowledge & Competency Framework.

What do providers need to do?

There was no change to the number of annual hours (16) of ongoing training required for the license holder and any adult caregiver who provides care for more than 30 days in a 12 month period. All required trainings in section 245A.50 (Child Development and Learning; Behavior Guidance; First Aid; CPR; SUID/AHT; Supervising for Safety, etc.) completed in a given year continue to count toward the annual 16 hour training requirement for that year. If the provider or caregiver needs to complete additional training to meet the 16 hour requirement, the additional training must be selected from the subject areas in this updated subdivision.

Training offered through [Develop](#) is identified by the applicable Minnesota Knowledge & Competency Framework (KCF) Area and will count toward meeting the additional annual training requirement for license holders and caregivers.

Providers and caregivers may also select training outside of Develop and should consult with their county licenser if there are questions about whether the training will meet the ongoing training requirements.

What do county licensers need to do?

County licensers will monitor completion of annual training requirements at each annual licensing visit. The annual period for purposes of monitoring family child care training requirements is the one year period following the license effective date or the annual anniversary of the license effective date. Since licensing visits typically occur before the end of the annual period, licensers will need to allow the provider and caregivers any time remaining in the annual period to complete required annual training. ELICI will be updated to reflect the updated terminology for the ongoing training areas.

Supervising for Safety

Minn. Stat. 245A.50, subd. 9.

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

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

(1) the annual completion of a two-hour active supervision course developed by the commissioner; and

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

Overview: The additional health and safety training topics required by the federal CCDF were incorporated into the existing training course. The six-hour Supervising for Safety for Family Child Care course for new license holders and adult caregivers was updated effective January 1, 2017, to include all of the required health and safety topics. Ongoing training for the required health and safety topics has been incorporated into the existing annual two hour active supervision training requirement as Health and Safety I and Health and Safety II.

What do providers need to do?

There was no change to the requirement for newly licensed providers and caregivers to complete a six-hour Supervising for Safety course prior to initial licensure, and to complete a two-hour active supervision course each year. The newly required Health and Safety I and II trainings will meet the annual active supervision training requirement in the year completed. Each license holder and adult caregiver is required to complete each of the Health and Safety course once every five years.

Newly licensed providers and new caregivers who completed their initial six hour Supervising for Safety training after January 1, 2017, will need to complete each of the Health and Safety I and Health and Safety II within five years after they completed the initial six hour course, and then complete each of the two courses every five years thereafter.

All other licensed providers and caregivers have five years from January 1, 2018, to complete both the Health and Safety I, and Health and Safety II. Both courses must be completed by December 31, 2022, and then every five years thereafter. Although providers and caregivers have five years to complete this training, they are encouraged to consider taking advantage of these courses while they are offered at no charge through Develop until June 30, 2018.

What do county licensors need to do?

County licensors will monitor completion of the supervising for safety initial and annual training requirements at each annual licensing visit. ELICI will be updated to include the new Health and Safety I and II training requirements.

SUID/AHT Exemption

Minn. Stat. 245A.50, subd. 5

(f) 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.

Overview: An exemption was added to the SUID/AHT training requirement to allow a person who is "related"¹ to the provider, and who is not designated to be a caregiver, helper, or substitute in the family child care program, to care for the provider's own infant or child without completing the SUID/AHT training.

Example: The provider's own teenage child is not used as a helper in the family child care program. The teenager can care for their own infant or under school age sibling and is not required to complete SUID/AHT training. If the teenager assists in the care of any child who is not related to the provider, the teenager must complete SUID/AHT training. This exemption also applies to spouses and other relatives of the provider as defined in section 245A.02, subd. 13.

What do providers need to do?

Providers may allow an individual related to them who has not had SUID or AHT training to care for the provider's own infant or child under school age. If the individual will also care for other children in the program, they must complete the applicable training(s).

What do county licensors need to do?

If an individual related to the provider cares only for the provider's own infant or child, and is not designated as a caregiver, helper, or substitute in the family child care program, the individual is not required to complete SUID or AHT training, and a correction order may not be issued.

¹ "Individual who is related" means a spouse, a parent, a birth or adopted child or stepchild, a stepparent, a stepbrother, a stepsister, a niece, a nephew, an adoptive parent, a grandparent, a sibling, an aunt, an uncle, or a legal guardian. See Minn. Stat. 245A.02, subd. 13.

Emergency preparedness & response

Minn. Stat. 245A.51, subd. 3

- (a) No Later than September 30, 2017, a license family child care provider must have a written emergency preparedness plan for emergencies that require evacuation, sheltering, or other protection of children, such as fire, natural disaster, intruder, or other threatening situation that may pose a health or safety hazard to children. The plan must be written on a form developed by the commissioner and updated at least annually. The plan must include:
- (1) procedures for an evacuation, relocation, shelter-in-place, or lockdown;
 - (2) a designated relocation site and evacuation route;
 - (3) procedures for notifying a child’s parent or legal guardian of the evacuation, shelter-in-place, or lockdown, including procedures for reunification with families;
 - (4) accommodations for a child with a disability or chronic medical condition;
 - (5) Procedures for storing a child’s medically necessary medicine that facilitate easy removal during an evacuation or relocation;
 - (6) procedures for continuing operations in the period during and after a crisis; and
 - (7) procedures for communicating with local emergency management officials, law enforcement officials, and other appropriate state or local authorities.
- (b) The license holder must train caregivers before the caregiver provides care and at least annually on the emergency preparedness plan and document completion of this training.
- (c) The license holder must conduct drills according the requirements in Minnesota Rules, part 9502.0435, subpart 8. The date and time of the drills must be documented.
- (d) The license holder must have the emergency preparedness plan available for review and posted in a prominent location. The license holder must provide a physical or electronic copy of the plan to the child’s parent or legal guardian upon enrollment.

Overview: Providers are now required to have an emergency preparedness plan for emergencies that require evacuation, sheltering, or other protection of children. The plan must be written on a form developed by the commissioner and updated at least annually. DHS’ Keeping Kids Safe includes detailed emergency planning guidance for providers and the required Child Care Emergency Plan form that providers will use to document their emergency preparedness plan. Both resources are available online on the [DHS Licensing webpage for Licensed family child care](#).

What do providers need to do?

By January 1, 2018, providers must:

- Write a Child Care Emergency Plan for their program;
- Post the Child Care Emergency Plan in a prominent location in the program; and
- Provide an electronic or paper copy of the Child Care Emergency Plan to each child’s parent or legal guardian upon enrollment in the program (including parents or legal guardians of currently enrolled children).

Emergency preparedness & response, continued

What do providers need to do? (continued)

Effective January 1, 2018, providers must:

- Train caregivers on the Child Care Emergency Plan prior to caring for children and at least annually, and document when caregivers receive the training;
- Document the date and time each monthly fire and storm drill was completed under the already existing Rule 2 requirement for these drills; and
- Annually review and update (if needed) the Child Care Emergency Plan.

Caregiver training and annual review of the Plan can be documented by the license holder and each caregiver initialing and dating the Plan.

Please note that DHS recently revised the [Child Care Emergency Plan template](#) to ensure that child specific information is not documented within the plan, which must be posted and shared with parents. DHS has also revised the [Admission and Arrangements form](#) so that the necessary child specific information is on page one of this form. Providers should keep a copy of page one of each child's Admission and Arrangements form with the provider's emergency kit(s) so that it is easily accessible in an emergency. (For children enrolled prior to January 1, 2018, providers may keep a copy of the existing Admission and Arrangements form with the emergency kit and do not need to complete new Admission and Arrangements forms for these children unless information on the form has changed.) Providers who have already created a Child Care Emergency Plan using the original template developed by DHS can use that plan, but will need to remove any child-specific information before posting the plan in the program or sharing the plan with parents and guardians.

Providers who need assistance completing a Child Care Emergency Plan may refer to section 3 of Keeping Kids Safe for links to resources, or may contact their local Child Care Aware partner agency for assistance.

What do county licensors need to do?

Beginning January 1, 2018, and through 2018, county licensors will monitor this requirement for existing providers by verifying at the annual licensing visit that the provider has completed a Child Care Emergency Plan; that the plan is posted in a prominent location; that the provider has a plan for providing an electronic or paper copy to parents; that current caregivers have received training on the plan; and, that the provider is documenting the date and time of each monthly fire and storm drill. The [FCC Monitoring Questionnaire](#) and the ELICI checklist will be updated to include these requirements.

For all licensing reviews completed in calendar year 2018, if the licensor finds that a provider has not yet completed a Child Care Emergency Plan, or any of the other related requirements, the licensor will provide technical assistance that these requirements need to be met within 30 days using the [2018 New Licensing Requirements & Technical Assistance Checklist](#). Again, these items should not be cited in a correction order. The licensor will also "flag" the emergency preparedness related items not yet in compliance on the ELICI checklist and note that technical assistance was provided. The licensor will then confirm at the next annual licensing visit in 2019 that the provider has come into compliance.

Effective January 1, 2018, all new license applicants must complete this requirement before a license is issued.

County licensors are only required to verify that the provider has completed a child care emergency plan. County licensors are not expected to evaluate the specific contents of the plan.

Preventing & responding to allergies

Minn. Stat. 245A.51, subd. 1

(a) Before admitting a child for care, the license holder must obtain information about any known allergy from the child's parent or legal guardian. The license holder must maintain current allergy information in each child's record. The allergy information must include a description of the allergy, specific triggers, avoidance techniques, symptoms of an allergic reaction, and procedures for responding to an allergic reaction, including medication, dosages, and a doctor's contact information.

(b) The child's allergy information must be documented on a form approved by the commissioner, readily available to all caregivers, and reviewed annually by the license holder and each caregiver.

Overview: Providers are now required to obtain detailed allergy information from the child's parent or legal guardian before admitting a child for care; make allergy information readily available to all caregivers; and, to ensure annual review of the allergy information by the license holder and each caregiver.

DHS has revised the [Admission and Arrangements form](#) and has developed a [Family Child Care Allergy Information Form](#) to be completed by the parent when their child has an allergy. The Allergy Information form contains all of the required allergy information.

What do providers need to do?

Beginning January 1, 2018, providers will use the revised [Admission and Arrangements form](#) for each newly enrolled child. If a parent identifies an allergy on the Admission and Arrangements form, the provider will require the parent to complete a [Family Child Care Allergy Information Form](#) before the child begins attending care.

For children who were already in care before January 1, 2018, providers are asked to review each child's existing Admission and Arrangements form and for any child with an identified allergy, the provider will have the parent complete a Family Child Care Allergy Information Form as soon as possible.

Providers must also ensure that each child's allergy information is readily available to all caregivers in the program. Allergy information must be reviewed annually by the license holder and each caregiver. The annual review can be documented by the license holder and each caregiver initialing and dating each child's Allergy Information Form. The [FCC Monitoring Questionnaire](#) has been updated to address these items.

What do county licensors need to do?

Beginning January 1, 2018, county licensors will monitor this requirement by reviewing the provider's responses on the FCC Monitoring Questionnaire and by verifying at licensing visits that the provider has a completed Allergy Information Form for each child with an allergy. The FCC Monitoring Questionnaire has been updated and the ELICI checklist will be updated to include this requirement.

For all licensing reviews completed in calendar year 2018, if the licensor finds that a provider does not yet have a completed Allergy Information Form for a child with an identified allergy, the licensor will provide technical assistance that this form must be obtained from the parent(s) within 30 days using the [2018 New Licensing Requirements & Technical Assistance Checklist](#). The licensor will also "flag" the item on the ELICI checklist and note that technical assistance was provided. The licensor will then confirm at the next annual licensing visit in 2019 that the provider has come into compliance.

Handling & disposal of bodily fluids

Minn. Stat. 245A.51, subd. 2

The licensed family child care provider must comply with the following procedures for safely handling and disposing of bodily fluids:

- (1) surfaces that come in contact with potentially infectious bodily fluids, including blood and vomit, must be cleaned and disinfected as described in section 245A.148;
- (2) blood-contaminated material must be disposed of in a plastic bag with a secure tie;
- (3) sharp items used for a child with special care needs must be disposed of in a "sharps container." The sharps container must be stored out of reach of a child; and
- (4) the license holder must have the following bodily fluid disposal supplies available: disposable gloves, disposal bags, and eye protection.

Overview: In addition to current requirements for sanitizing diaper changing areas, providers must follow new requirements for handling and disposal of potentially infectious bodily fluids (blood and vomit).

What do providers need to do?

Providers must clean and disinfect any surfaces that come in contact with blood or vomit in the same manner as was already required for diaper changing surfaces. Providers must have available and use chlorine bleach or other approved substances for cleaning and disinfecting contaminated surfaces.

In addition, providers must obtain the following supplies:

- Plastic bags that can be securely closed for disposal of blood-contaminated material as well as disposable gloves and eye protection for use in handling bodily fluid-contaminated materials; and
- Providers who use sharp items for the care of children with special needs, such as administering insulin or other medications by injection, must have a "sharps container" for disposal of sharp items. This container must be stored out of reach of children.

Bodily fluids disposal supplies, including disposable gloves, disposable bags, and eye protection, must be available for all caregivers. "Eye protection" does not include a person's everyday glasses. An economical pair of safety glasses or goggles is sufficient for this requirement.

A "sharps container" is only required when a provider cares for children with special care needs who require the use of injectable medication. If you care for a child who requires injectable medication, it is recommended that you ask the parent of the child to provide the "sharps container," along with the injectable medication supplies. A "sharps container" must be a container that is manufactured specifically for the purpose of disposing of sharp items.

Handling & disposal of bodily fluids, continued

What do county licensors need to do?

Beginning January 1, 2018, county licensors will monitor this requirement by reviewing the provider's responses on the [FCC Monitoring Questionnaire](#) and by verifying at licensing visits that the provider has the required items and is following required procedures. The FCC Monitoring Questionnaire has been updated and the ELICI checklist will be updated to include this requirement.

For all licensing reviews completed in calendar year 2018, if the licensor finds that a provider has not yet obtained the newly required bodily fluid disposal supplies, the licensor will provide technical assistance that the supplies must be obtained within 30 days using the [2018 New Licensing Requirements & Technical Assistance Checklist](#). The licensor will also "flag" the item(s) on the ELICI checklist and note that technical assistance was provided. The licensor will then confirm at the next annual licensing visit in 2019 that the provider has come into compliance.

Not every provider is required to have a "sharps container." A "sharps container" is only required when a provider cares for children with special care needs who require the use of injectable medication.

Parental access

Minn. Stat. 245A.14, subd. 15

An enrolled child's parent or legal guardian must be allowed access to the parent's or legal guardian's child at any time while the child is in care.

Overview: Providers are now required to allow an enrolled child's parent or legal guardian access to their child at any time while the child is in care.

What do providers need to do?

Providers who have an existing policy that limits (including language that suggests) the times parents or legal guardians can be present or pick their child up from the licensed program must remove this from their policies. Although this item is not required to be addressed in the provider policies required by Rule 2, a provider may choose to address it in their provider policies if they wish to do so. Providers will be asked on the FCC Monitoring Questionnaire if they allow parents and legal guardians the required access to their children.

What do county licensors need to do?

Beginning January 1, 2018, county licensors will monitor this requirement by reviewing the provider's response on the [FCC Monitoring Questionnaire](#). In addition, when reviewing provider policies at relicensing licensors will confirm that there is no policy restricting parent or legal guardian access to their own children, including policy language that suggests parents or guardians should not access their children during certain times.

The FCC Monitoring Questionnaire has been updated and ELICI checklist will be updated to include this requirement.

For all licensing reviews completed in calendar year 2018, if the licensor finds that a provider currently has a policy restricting access, the licensor will provide technical assistance that the policy must be changed within 30 days using the [2018 New Licensing Requirements & Technical Assistance Checklist](#). The licensor will also "flag" this item on the ELICI checklist and note that technical assistance was provided. The licensor will then confirm at the next licensing visit in 2019 that the provider has come into compliance.

Additional Information

Correction order quota

Minn. Stat. 245A.06, subd. 9

The commissioner and county licensing agencies shall not order, mandate, require, or suggest to any person responsible for licensing or inspecting a licensed family child care provider or child care center a quota for the issuance of correction orders on a daily, weekly, monthly, quarterly, or yearly basis.

County licensors may only issue a correction order when there is a violation of law or rule that is not eligible for a Fix-It Ticket. There is no expectation that a licensor must find a violation at every inspection visit, or that a licensor must issue a certain number of correction orders in any determined period of time.

Enhanced background studies

Enhanced background studies will not be available or required until, at the earliest, mid- to late-2018.

Please visit [Minn. Stat. 245C](#) and <https://mn.gov/dhs/general-public/background-studies/faqs/ccdbg/> for the most up-to-date information about background study requirements and processes.

Sign up for email updates from DHS

Family child care providers can now subscribe to the [Family Child Care Providers email list](#) to receive periodic emails from DHS Licensing about the implementation of the legislative changes and other family child care information.

Changes to Minnesota's Child Care Assistance Program and Parent Aware

For information about legislative and other changes to Minnesota's Child Care Assistance Program and Parent Aware (Minnesota's quality rating and improvement system), please visit

<https://mn.gov/dhs/partners-and-providers/news-initiatives-reports-workgroups/child-care-and-early-education/>.