MEMORANDUM

To: Family Child Care Home and Large Family Child Care Home Providers

From: Carla Recker, Executive Director
       Kathy Krause

Date: April 22, 2010

Subject: A. Public Hearing to address increases in minimum standards for Family Child Care Homes and Large Family Child Care Homes
        B. Meeting Compliance for Proposed Regulations

A. Public Hearing to Address Increases in Minimum Standards

The Pinellas County License Board at their regular meeting of April 7, 2010, approved for public hearing regulations to increase/supplement requirements in Licensing Regulations Governing Pinellas County Family Child Care Homes and Large Family Child Care Homes.

A public hearing WHICH BEGINS AT 6:30 P.M. will be held for the Board to receive public comments, if any, on the proposed increases.

Public Hearing
Wednesday, July 7, 2010
6:30 – 6:45 p.m. or until all comments are heard for children’s centers
6:45 – 7:00 p.m. or until all comments are heard for family child care homes and large family child care homes
Conference room 340, Health Department, 4175 East Bay Drive, Largo

Attendance is not required. If you wish to make a comment but cannot attend the public hearing, you may submit written comments by 12:00 noon Monday, July 5, 2010 to Dana Stajkowski:

- By mail: 4175 East Bay Drive, Suite 350, Largo 33764, or
- By fax at 727-507-4858, or
- By email to Dana_Stajkowski@doh.state.fl.us.

Call to verify receipt of comments unless hand-delivered.

Underlined words are increases and stricken words are deletions. Double underlined and double stricken words were changes made by Board at the April 7, 2010 Board meeting.

When referenced, the License Board must meet or exceed state child care licensing regulations in Chapter 65C-20.
A. Public Hearing to address increases in minimum standards for children's centers

Staff recommended the following 3 increases in regulations regarding training to care for 3 children under 18 months.

DEFINITIONS

Family child care home – A family child care home means an occupied place of residence of a family, person, or persons who regularly provide child care and training for children from at least two (2) unrelated households, with or without compensation, for no more than five (5) children at any given time under thirteen (13) years of age who are not related to such person or persons by blood, marriage, or adoption. This includes preschool household members whether present or not and children of any age who are in the operator’s care and do not reside in the family child care home of those five (5) children, no more than three (3) of the five (5) children may be under two (2) years of age, or no more than three (3) of the five (5) children may be under 18 months of age if the provider has proof of completion of an approved training course. A family child care home shall provide child care for a period less than 24 hours per day per child.

I. PERSONNEL

B. Staff Training

8. Specialized Training is to include accredited courses in each of the following topics. The courses may be completed through the Department of Children and Families; Early Learning Coalition; Coordinated Child Care; Juvenile Welfare Board; Pinellas County Extension; any pre-approved county, state, or other community agencies not listed; or other pre-approved community agencies. College courses may also be substituted for these trainings if a transcript and course description is submitted from an accredited college or university. A maximum of 50% of the training can occur online. The training must be completed within 12 months, unless approved by the Child Care Licensing Program.

1. Minimum 2 hours – Shaken Baby Syndrome and SIDS
2. Minimum 2 hours – Brain Research for children aged zero-5 years
3. Minimum 10 hours – Infant Toddler Appropriate Practices, or equivalent that is designed for child care professionals responsible for the care of children birth through 36 months. The course provides an overview of the need for quality care, stages of development, appropriate interactions, learning environments and experiences, health and safety practices, positive guidance strategies, observation and assessment, relationships with families, and quality caregivers.
4. Minimum 15 hours – Beyond Cribs and Rattles or equivalent that reviews specific child development, age appropriate play, biting, theorists for each age group 0-3 years of age, social and environmental development, and early literacy
5. Minimum 2 hours – Supervision of Multiage Groups in Family Child Care Homes
6. Minimum 1 hour – Current Abuse and Neglect Training. (The DCF Identifying and Reporting Child Abuse Training cannot be used to complete this requirement.)
A. Public Hearing to address increases in minimum standards for children’s centers

I. PERSONNEL
   C. SUPERVISION (Family Child Care Homes)
      1. The number of children in a family child care home at any given time is limited to the maximum set forth herein. Preschool household members, whether present or not, and children of any age who are in the operator’s care and do not reside in the family child care home, are counted in the license capacity.

      The license capacity of a family child care home is limited to five (5) children in care. No more than three (3) of the five (5) children may be under the age of 2, or with Specialized Training approved training, no more than three (3) of the five (5) children may be under 18 months of age.

      Reference:  F.S. 402.302(7)
                  Ch 61. S.6.(3)(c)
                  8/1/07, 4/1/09

      Finding of Necessity:
      The current regulation requiring “approved training” is vague and does not specify the trainings that would need to occur in order to approve a Family Child Care Provider to care for the possibility of 5 children under two years of age including 3 under 18 months.

      The proposed changes to the Definition of Family Child Care Home, Staff Training, and Supervision would ensure that providers who are approved for “3 under 18 months” would have the training necessary to provide for the children’s health, safety and mental development.

      In addition, delineating the requirements for Specialized Training courses will ensure the integrity of the training and that all providers receive comparable instruction.

      Implementation Date: November 15, 2010 following October 6, 2010 Board Action if approved

Ch. 65C-20.010(1)(j) states:
If a family day care home uses a swimming pool, it shall be maintained by using chlorine or other suitable chemicals.

Recommendation: This is a new regulation for Pinellas County and staff is requesting that the state regulation be increased as follows.

IV. PHYSICAL PLANT HOUSING FAMILY CHILD CARE HOMES
   E. Rules for Pools Located At Family Child Care Homes and Large Homes

      If a family child care home has a swimming pool, it shall be maintained by using chlorine or other suitable chemicals, so that the bottom of the pool is clearly visible.
**A. Public Hearing to address increases in minimum standards for children’s centers**

Finding of Necessity:
Chapter 65C currently requires that family child care homes maintain pools by using chlorine or other suitable chemicals if the pool is used. Pinellas County does not allow pools to be used by children during operating hours. However, the pool should be maintained for visibility of objects on the bottom of the pool.

Implementation Date: November 15, 2010 following October 6, 2010 Board Action if approved

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**65C-20.010(5)(d) states:**
In the event of an emergency, non-prescription medication that is not brought in by the custodial parent or legal guardian can be dispensed only if the facility has written authorization from the custodial parent or legal guardian to do so.

Any medication dispensed under these conditions must be documented in the child’s file, and the custodial parent or legal guardian must be notified on the day of occurrence.

**Recommendation:** This is a new regulation for Pinellas County and staff is requesting that the state regulation be increased as follows.

II. RECORDS (Family Child Care Homes)
   A. Facility Records
      8. Medication
         g. In the event of an emergency, non-prescription medication that is not brought in by the custodial parent or legal guardian can be dispensed only if the facility has written authorization from the custodial parent or legal guardian and with emergency medical personnel direction to do so.

         Any medication dispensed under these conditions must be documented in the child’s file, and the custodial parent or legal guardian must be notified on the day of occurrence.

**Finding of Necessity:**
A medical emergency necessitates enacting emergency procedures which includes contacting 911 or Poison Control, depending on the situation. A medical professional will know whether administration of medication is the proper protocol and what the proper dose is to administer to a child. It will help to ensure that measures taken will help and not hurt the child.

Implementation Date: November 15, 2010 following October 6, 2010 Board Action if approved