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Graeff, Melissa

From:	Jen DeBell <jdebell@pennaeyc.org></jdebell@pennaeyc.org>
Sent:	Sunday, November 11, 2018 2:51 PM
То:	Morris, Suzann; PW, CC Reg Changes
Cc:	Grimm-Thomas, Karen; Vasquez, Tanya; Jodi Askins; Rose Snyder
Subject:	PennAEYC comments on proposed certification regulations
Attachments:	Child Care Certification Regulations - PennAEYC Letter and Comments - Final 11-11-18.pdf

Hi Suzann and Tamula -

Thank you for the opportunity to comment on the proposed certification regulations. Attached please find our cover letter and comments. Ctb NGV 16 P 12: Take care,

Jen

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We have provided our specific comments on the regulations in the chart attached to this letter. Know that we support the vast majority of the proposed changes, as they will improve child health and safety. However, there are some areas in which we request longer implementation periods or in which we make additional recommendations for consideration.

Thank you again for the opportunity to comment and your commitment to the children and families in Pennsylvania.

Sincerely,

(Joli Asting)

Jodi Askins



Pennsylvania Association for the Education of Young Children

November 11, 2018

Ms. Suzann Morris Deputy Secretary Office of Child Development and Early Learning 333 Market Street, 6th Floor Harrisburg, PA 17126 Ms. Tamula Ferguson Bureau of Certification Services Office of Child Development and Early Learning 333 Market Street, 6th Floor Harrisburg, PA 17126

Dear Deputy Secretary Morris and Ms. Ferguson:

On behalf of the Pennsylvania Association for the Education of Young Children (PennAEYC), I would like to thank you for the opportunity to comment on the child care facilities proposed rulemaking.

We applaud the Office of Child Development and Early Learning (OCDEL) and DHS leadership for your efforts to comply with the federal Child Care and Development Block Grant Act. As you know, reauthorization of the act resulted in a federal mandate to better protect the health and safety of children in care nationwide, as well as an emphasis on quality child care. Your efforts to reflect these changes – such as unannounced inspections, pre-certification inspections and one-time professional development – in the certification regulations are critical to protecting Pennsylvania's children in care and setting strong minimum standards for operation of child care centers, group child care homes and family child care homes in the commonwealth.

As a co-chair of Gov. Wolf's Ready to Start Task Force, I believe it is important to recognize that highquality infant/toddler care improves cognitive, language, social and emotional development, early learning and school achievement and we are not doing enough to capitalize on the period of brain development that establishes the foundation for all future learning, behavior, and health. We are therefore appreciative that the proposed regulation "purpose" section refers several times to using inspections as an opportunity to talk about quality improvement with providers. We encourage DHS to consider actually requiring this in the regulatory language explicitly. PennAEYC also supports increasing the number of annual professional development hours to promote quality improvement.

In addition, we appreciate the proactive approach to complying with Act 40 of 2018, by changing references to "day care" to "child care" in the regulations. This terminology more accurately reflects the work early care and education programs and recognizes child care teachers as the professionals who promote positive child development.

Topic and Proposed Regulation	PennAEYG Comment
Annual Unannounced	PennAEYC strongly supports the new federal requirement for annual,
Inspections	unannounced inspections and the inclusion of this provision in the regulation. Unannounced inspections provide a more accurate
3270.11(g), 3270.24(d)	depiction of facility operations and the care provided to children than those which are planned. The National Association for the Education of
3280.11(h), 3280.23(d)	Young Children (NAEYC) states the importance of an effective system of public regulation and monitoring to protect children's health and safety
3290.11(k), 3290.11(m)(2), 3290.21(d)	in early education settings in its position statement on licensing and public regulation of early childhood programs, including unannounced inspections (1997). Research has also demonstrated unannounced visits are especially effective when targeted to providers who have a history of poor compliance with state rules (Fiene 1996).
	The "purpose" section of the proposed regulation notes that the
	Department of Human Services (DHS) will use the inspection to offer technical assistance on how to meet regulatory requirements and
	provide quality child care services, including information on Keystone STARS. However, this language does not appear in the regulation. We
	recommend DHS consider adding such a provision to the actual
	regulations. While the regulations are the floor for operation, it is important for DHS to use opportunities with providers to promote
	increased program quality.
Certification of Family	While PennAEYC recognizes the proposed language is conforming to Act
Child Care Homes	92 of 2015, which required family child care homes to be certified, we
3290.2, 3290.3(d), 3290.4	note our support for this change. Prior to the law's passage family child care homes were not regularly inspected and requiring certification
various definitions,	provides better protection for children.
3290.11(c) and all changes	
of "registration" to	
"compliance" throughout Ch. 3290	
Announced Pre-	PennAEYC strongly supports the new federal requirement for pre-
Certification Inspections	certification, announced inspections and the inclusion of this provision in the regulation. NAEYC recommended this requirement to ensure the
3270.24(e)	health and safety of children as a facility opens (1997).
3280.23(e)	The "purpose" section of the proposed regulation notes that DHS will
2700 11/i) and (m)(1)	ensure the applicant understands the responsibilities involved to meet
3290.11(i) and (m)(1), 3290.21(e)	regulation requirements, inform the applicant of any health or safety issues, alert the applicant to technical assistance and quality child care
J_JU.L1(C)	initiatives and alert the applicant of any information that they must report to DHS. However, this language does not appear in the
	regulation. We recommend DHS consider adding such a provision to the
	actual regulations. While the regulations are the floor for operation, it is important for DHS to use opportunities with providers to promote
	increased program quality.

One-Time Professional	PennAEYC supports the federal requirement of one-time professional
Development	development and its inclusion in the regulation. The ten health and
	safety areas identified are critical as appropriate training will protect
3270.11(c), 3270.31(f)	children from serious illness, injury or even death. We appreciate the
	inclusion of "pediatric CPR" specifically as this is an improvement on
3280.11(c), 3280.31(f)	current regulatory requirements that do not specifically state training is
	needed for providing CPR to children.
3290.11(e), 3290.31(g)	
	PennAEYC supports this provision's application to new child care
	programs and current staff. The "purpose" section of the regulation
	notes professional development sessions that have been completed
	within two years prior to the date of publication of the final-form
	rulemaking will satisfy this requirement. However, this does not appear
	in the regulation itself. We recommend this language be added to the
	regulation. In addition, the one-time only implementation period of 180
	days for current staff may not provide enough time for completion. DHS
	should consider a waiver for providers that need more time to comply.
	We recommend a waiver be allowed for a reasonable timeframe of one-year total if they are able to document reasoning for an extension
	and a plan to complete the training. We believe DHS' intent to offer
	online options will assist with compliance in the 180-day timeframe.
	onime options will assist with compliance in the 100-day timename.
	The importance of these trainings to the health and safety of the
	children in care outweighs the cost. However, we appreciate DHS
	noting programs will likely incur overtime costs or substitute staff costs
	in order to comply.
Emergency Plans	PennAEYC supports the changes in this section which require drills
	annually and sharing a copy of the emergency plan with the local
3270.27(a)(5)(6) and (f)	municipality. More importantly, PennAEYC supports the provision
	requiring specific accommodations for infants, toddler, children with
3280.26(a)(4)(5) and (f)	disabilities and children with chronic medical conditions. It is important
	the most vulnerable children be considered in the emergency planning
3290.24(a)(5),(d) and (g)	process as strategies for evacuation, staff to child ratio, etc. may need
	to change recognizing a child's age and/or physical, developmental or
	mental health condition.
	PennAEYC also recommends requiring that an emergency plan include
	lock-down procedures. This requirement is needed to comply with the
	federal Child Care and Development Block Grant Act.
Increased Annual	PennAEYC strongly supports increasing the number of annual training
Professional Development	hours from six to 12. We believe this requirement strengthens the
	minimum standards set for all child care staff, further promoting the
3270.31(e)	importance of health and safety, as well as quality improvement.
	NAEYC's position statement on professional development recommends
3280.31(e)	24 hours of training per year (1993), demonstrating the importance of
	continued education and the reasonableness of 12 hours.
3290.31(f)	

	In the "purpose" section DHS notes the one-time only professional development can count towards the twelve hours for a new staff person in their first year of employment. However, this provision is not in the actual regulation. We recommend it be added. The importance of these trainings to the health and safety of the children in care outweighs the cost. However, we appreciate DHS noting programs will likely incur overtime costs or substitute staff costs in order to comply.
	Finally, in the "purpose" section DHS uses language regarding "providers that participate in the Keystone STARS quality initiative". Now that all regulated providers are part of Keystone STARS this should be reflected.
Updating Terminology –	Working closely with Trying Together who led on this initiative,
"Day Care" to "Child Care"	PennAEYC advocated for this change to be made in law, which was accomplished through Act 40 of 2018. We appreciate DHS including the
Throughout 3270, 3280	updated language in the regulation now to comply, rather than waiting
and 3290, as well as	and proposing it separately. This terminology more accurately reflects
3041.13	the work of early care and education programs and recognizes child
	care teachers as professionals who promote the emotional, cognitive,
	communicative, perceptual-motor, physical and social development of the child.
Updated Clearance and	PennAEYC supports clarifying provisions related to mandatory reporting
Mandated Reporting	to comply with the Child Protective Services Law, as well as inclusion of
Requirements	clearance provisions for household members age 18 and older who reside in group child care or family child care homes.
3270.19(b)	
3280.11 (e), 3280.18(b)	PennAEYC also recommends including two provisions in the regulations, which are required to comply with the federal Child Care and Development Block Grant Act related to clearances:
3290.11(h), 3290.16(b)	1) Require all child care employees and household members age
	18 and older in a family child care or group child care home
	who have not lived in Pennsylvania for the previous five years
	to obtain a child abuse clearance and criminal history clearance
	from each state where they resided in those previous five vears.
	 Require prospective child care employees to present at least
	the DHS FBI clearance or the Pennsylvania State Police
	clearance prior to beginning employment.
	These requirements will further protect children in care.
Pediatric CPR	The one-time professional development requirement, which applies to
	all current and new staff, includes pediatric CPR. Updating the existing
3270.33(d)	regulation noting one or more facility persons competent in CPR shall
	be at the facility when children are in care, to include pediatric CPR
3280.33(c)	provides consistency in the regulation and is supported by PennAEYC.
3290.32(d)	

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Identification of Staff	PennAEYC supports the requirement for the program director, primary
3270.34(c)	staff person or operator to present a photo ID at inspection. We believe this recommendation is in response to a specific instance where staff falsified their identity. This is an easy and smart protection to prevent
3280.34(a)	fraud.
3290.31(a)(3)	<u>K</u>
Definition of "relative" in	PennAEYC recognizes DHS is proposing to align the regulatory definition
Family Child Care Homes	with the Human Services Code (62 P.S. §1001) definition. However, we ask DHS to consider if it is legally able to require staff:child ratios and
3290.4 Definitions	space requirements to apply to unrelated and related children, as there is no limit on the maximum number of related children in care.
Family Child Care	The proposed regulation is requiring family child care providers to use a
Supervision of Children	monitoring device with a video camera or other video or sight technological device to supervise a child if the operator is not able to
3290.113(f)	directly see, hear, direct and assess the activity of a child. While
	PennAEYC agrees this provision will allow for supervision of children at all times there will be cost to providers. DHS notes a potential cost of
	\$125 per family child care home. We strongly encourage DHS to work
	with PennAEYC and our partners on developing a shared service
	opportunity to purchase monitors, with the aim of lowering the cost by buying in bulk.
Work Hour Limits in Family	PennAEYC strongly supports limiting working hours to no more than 16
Child Care	in a 24-hour day. This will ensure staff have time to sleep, providing a safer environment for the children in care.
3290.113(g)	
Human Milk	PennAEYC supports banning the use of microwaves to warm human milk. In the purpose section of the regulation, DHS cites the American
3270.166(7)	Academy of Pediatrics (AAP) and other standards and notes using warm running water to heat the bottle is proper. DHS should consider stating
3280.166(7)	that bottles should be warmed with running water or a bottle warmer, considering this is best practice.
3290.166(7)	
	In addition, PennAEYC recommends including additional requirements
	regarding human milk – at minimum including its handling, storage,
	preparation and feeding methods. DHS should also consider training so
	that child care staff working with infants and toddlers are
	knowledgeable and supportive of all infant and toddler feeding styles and support breastfeeding mothers of children in care and their own
	staff. PennAEYC recommends consultation with the AAP, other child
	health organizations and breastfeeding organizations for the proper
	provisions to include.
Adding Foster	PennAEYC supports this change which provides consistency with Act 75
Mother/Father to	of 2015 and recognizes a foster mother/father may be making child
Definition of Parent	care decisions for a child. All children in foster care should have the
2220 A D-A-141	same opportunities to participate in age-appropriate every day
3270.4 Definitions	activities, as all other children.

3280.4 Definitions	
3290.4 Definitions	
Health Information	PennAEYC supports requiring parents to provide an initial health report
	no later than 30 days following the first day of attendance. The
3270.131(a)	requirement is currently 60 days and we believe shortening the time
	period will further protect children from exposure to contagious
3280.131(a)	disease. In addition, the requirement provides an incentive for some
	families to ensure their children have a well-child visit.
3290.131(a)	
	However, we recognize there could be circumstances in which families
	do not have a current health assessment and may struggle to get a
	doctor's appointment in the 30-day window. We recommend providing
	for an exception for families in these circumstances, allowing an
Lead Recommendations	additional 30 days only if the family has scheduled an appointment.
Paint and Water	While the proposed regulation does not address these sections,
Faint and water	PennAEYC wanted to raise lead exposure as a health and safety concern DHS should be examining and addressing. We recommend the
3270.69 and 3270.77	following be considered:
5270.05 and 5270.77	
3280.69 and 3238.77	Include the following language in section 3290.75, which is currently
	found in 3270.77(d) and (f) and 3280.77(d) and (f), to bring existing
3290.67 and 3290.75	regulations regarding lead paint in family child care homes in line with
	child care center and group child care home regulations:
	"Removal, clean-up and disposal of leaded paint dust and debris
	shall be accomplished in a manner that avoids dispersal of dust
	and debris into the environment."
	"Dust and debris generated by removal shall be disposed of in
	accordance with applicable Federal, State and local regulations."
	PennAEYC recommends that DHS consider adding language to 3270.77,
	3280.77 and 3290.75 requiring facilities built prior to 1978 operating as
	a child care center, group child care home or family child care home to
	obtain a certification from a certified lead inspector stating their
	property is lead free/safe based on Environmental Protection Agency
	and/or Department of Environmental Protection (DEP) standards. The
	requirement should be part of the certification process to open a
	facility and existing providers could be given a reasonable number of
	years to comply in line with the timing of their certification renewal.
	PennAEYC recommends that DHS consider adding language to 3270.69,
	3280.69 and 3290.67 requiring facilities operating as child care center,
	group child care home or family child care home to test for lead in their
	water supply. If lead is discovered a requirement to use an alternative
	water source should be required. DHS should consult with the DEP to
	determine appropriate action related to remediation given it may not
	be under the provider's control to fix the problem. DHS should also

	consult with DEP on the appropriate testing frequency and level which requires an alternative water source to be used. If lead is discovered it should be reported to OCDEL certification staff and parents should be notified with an explanation of the alternative water source being used to provide clear communication regarding child safety. It is our understanding that the following states/city require child care facilities to test water for lead and could be used as a guide for developing Pennsylvania regulations: California, Connecticut, Illinois, New Jersey, Rhode Island and Washington, and New York City.
Effective Date	PennAEYC recommends extending the effective date of the regulations, which is currently upon publication of the final-form regulations in the Pennsylvania Bulletin with a few exceptions. It is essential all current child care providers are aware of the final changes before there is an expectation of compliance. More time will allow DHS to communicate with the field and ensure there is an understanding of the new requirements.
Regulatory Analysis Form, Section 19	The cost analysis in this section uses the "Pennsylvania Occupational Wages Statewide" from the Center for Workforce Information and Analysis website as the source for wage data of impacted employees. However, the categories listed are from the education sector. Specifically, the occupation title of "childcare workers" is not included in the analysis. The ages included from the education sector are applicable to some employees working in child care programs offering state-funded Pre-K Counts, but not the majority. Therefore, PennAEYC believe the cost analysis is likely inaccurate.
	PennAEYC would be pleased to work with the administration and the General Assembly to promulgate policies and associated funding that ensures the child care workforce impacted by these regulations receives wage parity with the education sector wages cited in this analysis.

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