

Louisiana Department of Education (LDOE)
Early Childhood Care and Education Advisory Council
Wednesday, November 5, 2014
Minutes – Official

The November 5, 2014 meeting of the Early Childhood Care and Education (ECCE) Advisory Council was called to order at 1:14 P.M. Members present were: Ms. Angele Ashley, Representative Regina Barrow, Ms. Maria Blanco, Ms. Melanie Bronfin, Ms. Contessia Brooks, Ms. Bonnie Buckelew, Dr. Jeanne Burns, Ms. Gina Young Cahee, Representative Steve Carter, Ms. Carole Elliot, Mr. James Evans, Ms. Lois Jordan, Ms. Linda Lambert, Ms. Jodi Loar, Ms. Kim Matherne, Ms. Paula Polito, Ms. Cindy Rushing, Ms. Brenda Sharp, Mr. John Warner Smith, Dr. Roberta Vicari, Mr. Kahree Wahid, Ms. Carynn Wiggins, Mr. Alan Young, and Ms. Amy Zapata. Lt. Chris Eskew served as a proxy for Capt. Stacy Barrett and Ms. Stesha Rampersad served as a proxy for Mr. Carey Foy. Senator Conrad Appel, Ms. Cindy Gonthier, Mr. Albert Mancuso, and Mr. Anthony Recasner were absent

Representing the Louisiana Department of Education were Jenna Conway, Bridget Devlin, Denise Brou and Lisa Brochard.

Public comments were received from:

- Chapter 5: Ms. Susan Spring
- Chapter 13: Ms. Veronica Buckley and Ms. Theresa Gomez
- Chapter 15: Dr. Danny Bronfin, Ms. Nancy Freeman, Ms. Yolanda Motley, and Ms. Sandra Slifer
- Chapter 17: Ms. Stacy Betz, Dr. Danny Bronfin, Ms. Ann Chance, Ms. Robbie Gray (reported by Ms. Bonnie Buckelew), Ms. Sherry Guarisco, Ms. Penny Haire, Ms. Ava Hingle, Dr. Keith Liederman, Ms. Yolanda Motley, Ms. Tafta Miller, Mr. Jonathan Pearce, Ms. Susan Spring, Ms. Lisa Tate, and Ms. Rochelle Wilcox
- Chapter 19: Dr. Danny Bronfin and Ms. Susan Connick
- Chapter 21: Ms. Susan Spring

The meeting was called to order by Chair, Ms. Cindy Rushing.

Ms. Loar nominated Mr. Young as Vice Chair of the Early Childhood Care and Education Advisory Council. Dr. Vicari nominated Mr. Smith as Vice Chair of the Early Childhood Care and Education Advisory Council.

A Roll Call Vote was taken.

Mr. Young received four votes for Vice Chair. Mr. Smith received ten votes for Vice Chair.

Mr. Smith was selected as Vice Chair.

Ms. Rushing made a motion to approve the minutes of the October 21, 2014 Early Childhood Care and Education Advisory Council meeting, amending Motion 7 to revise “*Mr. Polito*” to “*Ms. Polito*”.

- 1 On motion of Mr. Young, and seconded by Ms. Wiggins, the Early Childhood Care and Education Advisory Council approved the minutes of the October 21, 2014 meeting, as amended.

Jenna Conway provided a presentation summarizing the proposed Bulletin 137, *Louisiana Early Learning Center Licensing Regulations*.

- 2 On motion of Ms. Bronfin, and seconded by Mr. Evans, the Early Childhood Care and Education Advisory Council endorsed Bulletin 137 with the following recommendations:

A Roll Call Vote was taken:

Yeas: Ms. Maria Blanco, Ms. Melanie Bronfin, Ms. Contessia Brooks, Ms. Bonnie Buckelew, Dr. Jeanne Burns, Mr. James Evans, Ms. Jodi Loar, Ms. Cindy Rushing, Mr. John Warner Smith, Dr. Roberta Vicari, and Ms. Carynn Wiggins

Nays: Ms. Gina Young Cahee, Ms. Carole Elliot, Ms. Lois Jordan, and Mr. Alan Young

The motion passed, 11-4.

Chapter	Draft Bulletin 137 Regulation	ECCE AC Member Recommendation	Outcome of Recommendation
Chapter 1. General Provisions			
§103-Definitions		Add the definition for prekindergarten programs (as stated in RS 17:24.8) to the list of definitions	On motion of Ms. Brooks, seconded by Mr. Young, the recommendation was approved with no opposition.
Chapter 3. Licensure			
§319—Waivers	A. The State Superintendent, pursuant to authority delegated by BESE, may, in specific instances, waive compliance with a minimum standard or regulation if it is determined that the economic impact is sufficiently great to make compliance impractical, as long as the health and well-being of staff and children are not imperiled. If it is determined that the center or agency is meeting or exceeding the intent of the standard or regulation, the standard or regulation may be deemed to be met.	Create a subcommittee of ECCE AC members, selected by the chair, to review waiver requests and provide recommendations to the State Superintendent	On motion of Mr. Evans, seconded by Ms. Brooks, the recommendation was approved with no opposition.
Chapter 7. Licensing Process & Procedures			
§701-Initial Application process	B. Each center shall provide a current email address to the Licensing Division on its initial application for licensure. The center shall maintain a current email address and notify the Licensing Division immediately upon a change in such email address by submitting a Change of Email Address Form to amend the existing licensing application. All communication from the Licensing Division shall be sent via email to the most recent email address provided to the Licensing Division on the center's current application for licensure or renewal.	(701.B) Communities that do not have access to the internet should not be required to use an email address for communication. Recommendation to add "where possible" within the email requirement in Section B	On motion of Mr. Evans, seconded by Ms. Wiggins, the recommendation was approved with no opposition.

	<p>D. Review of Licensing Packet</p> <p>1. If a submitted application is incomplete, the Licensing Division shall notify the applicant of the missing information.</p> <p>a. The applicant shall have 14 calendar days from receipt of notification to submit the additional information.</p>	<p>D. Applicants should be allowed 21 (instead of 14) business days to submit additional information.</p>	<p>On motion of Mr. Evans, seconded by Mr. Smith, the recommendation was approved with no opposition.</p>
§705- Validity of Licenses	<p>A. An early learning center shall allow the Licensing Division staff access to the center, the children, and all files and records at any time during any hours of operation or any time a child is present.</p>	<p>(705.A) Require Licensing Division staff to identify themselves when conducting visits, wear a visible identification tag, and sign in at the center when conducting an inspection, visit, interview, or compliance check</p>	<p>On motion of Mr. Evans, seconded by Ms. Wiggins, the recommendation was approved with no opposition.</p>
	<p>H. All new construction or renovation of a center requires approval from the Office of State Fire Marshal, the Office of Public Health and the Licensing Division prior to occupying the new space.</p>	<p>(709.H) Include a clarification that the State Fire Marshall, Office of Public Health, and Licensing Division need to be contacted before occupying renovated spaces</p>	<p>On motion of Ms. Wiggins, seconded by Dr. Burns, the recommendation was approved with no opposition.</p>
<p>Chapter 11. Operating Violations and incidents; Fines; Appeals</p>			
§1101- Non-Critical Operating Violations	<p>A. When non-critical violations are identified during an on-site inspection, the Licensing Division may allow the center an opportunity to immediately remedy the violation or deficiency, if the Licensing Division determines that allowing such remedy does not endanger the health, safety, or well-being of any child. The Licensing Division may consider the remedy as acceptable corrective action</p>	<p>(1101.A) Recommendation that non-critical violations that are resolved immediately should not to be noted as a deficiency</p>	<p>On motion of Mr. Evans, seconded by Ms. Elliot, the recommendation was approved with no opposition.</p>
§1103- Critical Incidents and Required Notifications	<p>C. The Licensing Division and other appropriate agencies shall be notified verbally on the day of the incident</p>	<p>(1103.C) Change the requirement to notify the licensing division on the day of the critical incident to be notified within 24 hours (instead of on the day)</p>	<p>On motion of Ms. Polito, seconded by Ms. Loar, the recommendation was approved with no opposition.</p>

	D. In addition to the verbal notification, the Licensing Division shall be notified by written report within 24 hours or the next business day. This written notification shall be made on the Licensing Division's Critical Incidents Report Form and shall contain all information requested on the form.	(1103.D) Allow an addendum to the Licensing Divisions' Critical Incidents Report Form without penalty if early learning center staff is informed that a parent sought medical attention for a child after 24 hours of the incident. The early learning center staff should then have 24 hours following their notification to make the addendum to Critical Incident Report.	On motion of Mr. Evans, seconded by Ms. Wiggins, the recommendation was approved with no opposition.
		(1103.D) Allow a waiver of the 24 hour notification requirement under catastrophic circumstances, additionally the licensing department should provide a receipt indicating that they have received the report	On motion of Ms. Wiggins, seconded by Mr. Smith, the recommendation was approved with no opposition.
§1105 Identified Critical Violations and Fines	B. Where such a violation does not result in the revocation of or refusal to renew a license, the Licensing Division shall issue a written warning/notice of violation of the standards listed in Subsection (A) that shall include: 1. a corrective action plan (CAP) that outlines the required actions which shall be implemented or completed immediately;	(1105.B.1) Insert language in the regulations describing where the public can view and obtain copies of corrective action plans (CAP)	On motion of Ms. Blanco, seconded by Mr. Young, the recommendation was approved with no opposition.
		Create Chapter §1102. Process for Reviewing Deficiencies. This chapter should include additional details on the expectations for disputing and reviewing critical and non-critical findings and deficiencies, including a process for receiving receipt of dispute from the Licensing Department.	On motion of Ms. Loar, seconded by Mr. Young, the recommendation was approved with no opposition.
Chapter 13. Denial, Revocation or Non-Renewal of License			

§1301 Reasons for Denial, Revocation, or Refusal to Renew	A. The following is an illustrative, but not exclusive, list of reasons that an application for licensure may be denied or a license may be revoked or renewal refused: 6. failure to obtain approval of any agency whose approval is required for licensure;	(1301.A.6) Programs should not be held liable if Fire Marshall and Health department has not completed inspections prior to the licensing visit and documentation is provided by center staff indicating proof of contacting the agencies for inspections before license visit.	On motion of Mr. Evans, seconded by Mr. Young, the recommendation was approved with no opposition.
	A. The following is an illustrative, but not exclusive, list of reasons that an application for licensure may be denied or a license may be revoked or renewal refused: 13. if the owner, director, or a staff member is temperamentally or otherwise unsuited for the care of children in the center;	(1301.A.13) – Delete “temperamentally or otherwise”	On motion of Mr. Evans, seconded by Mr. Young, the recommendation was approved with no opposition.
§1309 Disqualification Period Following Revocation or Refusal to Renew	H. An application for a new license for a center whose license has been revoked or renewal has been refused, or whose license has been surrendered to avoid adverse action, shall be denied if the applicant is an affiliate of the center.	(1309.H) Change “shall be denied” to “may be denied”	On motion of Ms. Loar, seconded by Mr. Young, the recommendation was approved with no opposition.
Chapter 15. Minimum General Requirements and Standards			
§1503 General Liability Insurance	D. Parents shall not be required to waive the center’s responsibility.	(1503.D) Include a statement that clarifies “the parent may select to use their own insurance”	On motion of Ms. Loar, seconded by Dr. Vicari, the recommendation was approved with no opposition.
§1505 Visitors	Any visitor, as defined in §103, to the center shall be accompanied by a staff person at all times. This Subsection shall not apply to Type I centers.	Remove the Type 1 exception.	On motion of Dr. Vicari, seconded by Ms. Blanco, the recommendation was approved with no opposition.
§1507 Daily	G. This Section shall not apply to Type I centers.	(1507.G) Remove the Type 1 exception	On motion of Dr. Vicari,

Attendance Records			seconded by Ms. Wiggins, the recommendation was approved with no opposition.
§1509 Policies	C. Admissions Policy that includes admission criteria and describes the needs, situations and patterns best addressed by the program	(1509.C) Remove the word “patterns”	On motion of Ms. Wiggins, seconded by Dr. Burns, the recommendation was approved with no opposition.
	G. Parental Involvement Policy 1. Parents shall be offered opportunities for involvement each year, which may include but are not limited to, an open house, parent education session, parent and staff conference, family pot luck dinner, holiday party or parent or grandparent’s day.	(1509.G.1) Include the minimum number of opportunities for parental involvement	On motion of Ms. Wiggins, seconded by Mr. Young, the recommendation was approved with no opposition.
	H. Behavior Management Policy 1. Each center shall develop and implement a written behavior management policy describing the methods of behavior guidance and management that shall be used at the center. 2. The behavior management policy shall prohibit children from being subject to any of the following: a. physical or corporal punishment which includes but is not limited to yelling, slapping, spanking, yanking, shaking, pinching, exposure to extreme temperatures or other measures producing physical pain, putting anything in the mouth of a child, requiring a child to exercise, or placing a child in an uncomfortable	(1509.H.2.a) Remove “However, Type I centers may use limited corporal punishment in the specific manner provided in Subsection C.”	On motion of Dr. Vicari, seconded by Ms. Polito, the recommendation was approved with no opposition.
		(1509.H.2.h) Allow timeout during active playtime if the infraction was incurred during active playtime	On motion of Ms. Loar, seconded by Ms. Wiggins, the recommendation was approved with no opposition.

	<p>position. However, Type I centers may use limited corporal punishment in the specific manner provided in Subsection C.</p> <ul style="list-style-type: none"> b. verbal abuse, which includes but is not limited to using offensive or profane language, telling a child to “shut up”, or making derogatory remarks about children or family members of children in the presence of children; c. the threat of a prohibited action even if there is no intent to follow through with the threat; d. being disciplined by another child; e. being bullied by another child; f. being deprived of food or beverages; g. being restrained by devices such as high chairs or feeding tables for disciplinary purposes; and h. having active play time withheld for disciplinary purposes. 		
	<p>3. Time Out</p> <ul style="list-style-type: none"> a. Time out shall not be used for children under age 2. b. A time out shall take place within sight of staff. c. The length of each time out shall be based on the age of the child and shall not exceed 1 minute per year of age. d. If time out is to be extended beyond this length of time, a signed and dated statement, 	<p>(1509.H.3.d) Change to say “For children over the age of 6, a timeout may be extended beyond one minute per year of age, if a signed and dated statement, including a maximum time limit, from the parent granting such permission shall be kept on file”</p>	<p>On motion of Ms. Blanco, seconded by Ms. Cahee, the recommendation was approved with no opposition.</p>

	<p>including a maximum time limit, from the parent granting such permission shall be kept on file.</p>		
	<p>4. Corporal punishment in Type I Centers. If corporal punishment is used in a Type I center, the following are applicable and shall be included in a written policy of the center.</p> <ul style="list-style-type: none">a. For purposes of this Section, the following definitions apply:<ul style="list-style-type: none">i. "Corporal punishment" shall be defined as and limited to a spanking.ii. "Spanking" shall be defined as and limited to a striking by the director's open hand on the clothed buttocks of a child older than 24 months of age as punishment.b. A parent must provide written permission for corporal punishment to be administered.c. Written documentation of details of the incident or infraction and the punishment administered is required. A copy of the documentation shall be kept on file at the center and a copy shall be given to the parents.d. Written permission for corporal punishment of a child shall not be a preadmission requirement for children to be enrolled at the center.e. Corporal punishment shall not be used on children 24 months of age and younger.f. Use of any implement other than the open hand shall be considered mistreatment of the child.	<p>(1509.H.4.a-h) Remove subsection 1509.H.4 on the recommendation to remove corporal punishment in 1509.H.2.a</p>	<p>On motion of Dr. Vicari, seconded by Ms. Polito, the recommendation was approved with no opposition.</p>

<p>g. Corporal punishment shall only be administered by the director in the form of and not more than three spanks of the open hand on the clothed buttocks of a child older than 24 months of age.</p> <p>h. A second adult shall be present during the administration of the spanking and both adults present shall sign the documentation of the spanking.</p>		
<p>I. Electronic Devices Policy that provides that all activities involving electronic devices, including but not limited to television, movies, games, videos, computers and hand held electronic devices, shall adhere to the following limitations:</p> <ol style="list-style-type: none"> 1. Electronic device activities for children under age 2 are prohibited; and 2. Time allowed for electronic device activities for children ages 2 and above shall not exceed 2 hours per day. 	<p>(1509.I.2) The electronic devices policy should be modified to say “Time allowed for electronic device activities not related to the academic program for children between the ages 2 and 5 shall not exceed one hour per day”</p>	<p>On motion of Ms. Wiggins, seconded by Dr. Vicari, the recommendation was approved.</p> <p>Ms. Blanco, Ms. Bronfin, Ms. Buckelew, Dr. Burns and Ms. Loar were recorded as being opposed to the motion.</p>
<p>K. Programs, Movies and Video Games Policy</p> <ol style="list-style-type: none"> 3. “PG” or “PG-13” programming or its television equivalent shall not be shown to children under age 5. 4. “PG” programming shall only be viewed by children age 5 and above and shall require written parental authorization. 5. “PG-13” programming shall only be viewed by children age 13 and above and shall require written parental authorization. 6. Any programming with a rating more restrictive than “PG-13” is prohibited. 7. All video games shall be suitable for the 	<p>(1509.K) Subsection 1509.K.5 should be removed, movies rated PG-13 should not be shown to any children, even with parental permission. Subsection 1509.K.7.b should read “Games rated “T” or “M” shall not be permitted”</p>	<p>On motion of Dr. Vicari, seconded by Ms. Blanco, the recommendation was approved with no opposition.</p>

	<p>youngest child with access to the games.</p> <p>a. "E10+" rated games shall be permitted for children ages 10 years and older.</p> <p>b. "T" rated games shall not be shown to or played by children under age 13.</p> <p>c. "M" rated games shall not be permitted.</p>		
§1511- Procedures	<p>A. Physical Activity</p> <p>1. Children under age 2 shall be provided time and space for age appropriate physical activity for at least 60 minutes per day.</p> <p>2. Children age 2 and older shall be provided 60 minutes of physical activity per day that includes a combination of both teacher led and free play.</p>	(1511.A.1&2) Requirement should be "a minimum of 60 minutes per day" for physical activity for children under the age of 2	On motion of Ms. Wiggins, seconded by Mr. Young, the recommendation was approved with no opposition.
	<p>B. Sleep/Rest</p> <p>1. Infants shall be allowed to sleep according to their individual schedules</p> <p>2. Children under age 4 shall have daily rest time of at least 45 minutes in programs operating more than 5 hours per day.</p>	(1511.B.2) Increase rest time to "at least 75 minutes"	On motion of Ms. Wiggins, seconded by Ms. Blanco, the recommendation was approved with no opposition.
		Addition of a Section E, "For planning and implementing procedures for early learning activities that address the full range of Louisiana's Birth to Five Early Learning and Development Standards"	On motion of Ms. Bronfin, seconded by Mr. Evans, the recommendation was approved. Ms. Cahee, Ms. Loar, and Mr. Young were recorded as being opposed to the motion
§1513- Schedules	<p>An early learning center shall establish in writing the following schedules:</p> <p>A. Schedule of days and hours of operation,</p>	(1513.B) Early learning schedules should be posted. In the daily schedule, there should be an inclusion of early learning activities.	On motion of Ms. Bronfin, seconded by Mr. Evans, the recommendation was approved

	including scheduled days and holidays when center is closed; and B. Daily schedule that includes times of planned activities, allowing for flexibility and change.		with no opposition.
§1515- Child Records and Cumulative Files	4. Special Diets . A written statement from the parent is required when the child requires a modified diet for religious reasons.	(1515.A.4.c) Remove the specification of “for religious reasons”	On motion of Ms. Wiggins, seconded by Dr. Burns, the recommendation was approved with no opposition.
Chapter 17. Minimum Staffing Requirements and Standards			
§1707 Required Staff (revised §1707 and §1709)	A. Director or Director Designee. Each center shall have a director or director designee. 1. The director or director designee shall be an on-site, full-time staff person at the center during the day time hours of operation (prior to 9:00 p.m.). 2. The director or director designee shall be responsible for planning, managing, and controlling the center’s daily activities, as well as responding to parental concerns and ensuring that minimum licensing requirements are met. 3. A director or director designee shall be at least age 21 and have a high school diploma or GED.	(1707.A.3\)\ Reinstated director qualifications for all centers as they previously were for Class A	On motion of Ms. Polito, seconded by Ms. Bronfin, the recommendation was approved with no opposition.
		(1707.A.3\)\ Add to Director Qualifications, Number 3: “six credit hours in child care, child development, or early childhood education or 90 ‘clock hours’ of required training approved by the Department of Education”	On motion of Ms. Bronfin, seconded by Dr. Vicari, the recommendation was approved with no opposition.
		(1707.A.3\)\ Add to Director Qualifications, Number 1 “A baccalaureate degree in early childhood or related field.”	On motion of Ms. Cahee, seconded by Ms. Elliot, the recommendation was approved. Ms. Bronfin was recorded as being opposed to the motion.
	E. Staff 1. Staff shall be ages 18 or older. 2. A person age 17 may be included in the child to staff ratio if the person works under the direct supervision of an adult staff	(1707.E.2 & 1707.E.3) In E.2 include “physically present with direct visual contact at all times.” Remove section E.3 allowing a person age 16 in Type 1 centers to be included in child to staff ratios.	On motion of Ms. Bronfin, seconded by Dr. Burns, the recommendation was approved. Ms. Cahee, Mr. Evans. Dr. Vicari and Mr. Young were recorded

	<p>member. Direct supervision, for purposes of 17-year-olds, means physically present, or within an immediate distance such as adjacent room, and available to respond immediately to the emergency needs of children.</p> <p>3. In Type I centers only, a person age 16 may be included in the child to staff ratios if the person works under the direct supervision of an adult staff member. Direct supervision, for purposes of 16-year-olds in Type I centers, means physically present with visual contact at all times and available to respond immediately to the emergency needs of children.</p>		as being opposed to the motion.												
<p>§1709 Child to Staff Minimum Ratios (revised §1711)</p>	<p>B. Minimum child to staff ratios shall be met at all times.</p> <p>1. There shall be a minimum of two staff members present at each Type II and Type III center during all hours of operation and when children are present. Type I centers shall have a minimum of one staff member present at the center during all hours of operation and when children are present.</p>	<p>(1709.B.1) Remove the exception for Type I centers.</p>	<p>On motion of Dr. Vicari, seconded by Ms. Wiggins, the recommendation was approved with no opposition.</p>												
	<p>C. Minimum Child to Staff Ratios for Type II and Type III centers:</p> <table border="1" data-bbox="310 1166 909 1390"> <thead> <tr> <th>Ages of Children</th> <th>Ratio</th> </tr> </thead> <tbody> <tr> <td>Infants under 1 year</td> <td>5:1</td> </tr> <tr> <td>One year</td> <td>7:1</td> </tr> <tr> <td>Two years</td> <td>11:1</td> </tr> <tr> <td>Three years</td> <td>13:1</td> </tr> <tr> <td>Four years</td> <td>15:1</td> </tr> </tbody> </table>	Ages of Children	Ratio	Infants under 1 year	5:1	One year	7:1	Two years	11:1	Three years	13:1	Four years	15:1	<p>(1709.C) Lower the staff to child ratios for infants and two-year-olds to 1:4 for infants and 1:8 for two-year-olds by reducing by one child per year</p>	<p>On motion of Ms. Bronfin, seconded by Mr. Smith. A roll call vote was taken:</p> <p>Yeas: Ms. Blanco, Ms. Bronfin, Dr. Burns, Mr. Evans, Ms. Rushing, Mr. Smith, and Dr. Vicari.</p>
Ages of Children	Ratio														
Infants under 1 year	5:1														
One year	7:1														
Two years	11:1														
Three years	13:1														
Four years	15:1														

Five Years	19:1
Six years and up	23:1

		<p>Nays: Ms. Brooks, Ms. Buckelew, Ms. Cahee, Ms. Elliot, Ms. Loar, Mr. Young and Ms. Jordan.</p> <p>Abstentions: Ms. Wiggins</p> <p>Absences: Ms. Polito</p> <p>The motion did not pass.</p>
(1709.C) Over time reduce the two-year-old ratios by one child per year, not to exceed a 1:8 ratio		<p>On motion of Ms. Polito, seconded by Mr. Smith, a roll call vote was taken:</p> <p>Yeas: Ms. Blanco, Ms. Bronfin, Ms. Brooks, Ms. Buckelew, Dr. Burns, Mr. Evans, Ms. Rushing, Mr. Smith, Dr. Vicari and Ms. Wiggins.</p> <p>Nays: Ms. Cahee, Ms. Elliot, Ms. Jordan, Ms. Loar, and Mr. Young.</p> <p>Absences: Ms. Polito</p> <p>The motion passed.</p>
(1709.C) Restore requirement to publically post child to staff ratios		<p>On motion of Ms. Bronfin, seconded by Ms. Blanco, the recommendation was approved.</p> <p>Mr. Young was recorded as being opposed to the motion.</p>

	<p>F. Rest Time - Minimum Child to Staff Ratios</p> <p>1. Sufficient staffing needed to satisfy child to staff ratios shall be present in the building during rest time and available to assist as needed.</p> <p>2. Children ages 2 and older may be grouped together at rest time with one staff member in each room supervising the resting children. If two rooms share a common doorway, one staff member may supervise the resting children in both rooms.</p>	(1709.F.1) Allow staff to be counted in staff to child ratios during rest time as long as they are on the premise, instead of being in the building	On motion of Ms. Loar, seconded by Mr. Young, the recommendation was approved with no opposition.
		(1709.F.2) Allow children ages 1 and older to be grouped together at nap time with staff member supervision	On motion of Ms. Loar, seconded by Mr. Young, the recommendation was approved with no opposition.
	<p>H. Field Trips - Minimum Child to Staff Ratios</p> <p>1. Minimum child to staff ratios, plus one additional adult, shall be met for all field trips. This Paragraph shall not apply to Type I centers.</p>	(1709.H.1) Remove exception for Type I centers	On motion of Ms. Wiggins, seconded by Dr. Vicari, the recommendation was approved with no opposition.
	<p>K. Special Needs Children - Minimum Child to Staff Ratios. When the nature of a child with special health care needs or the number of children with special health care needs warrants added care, the center shall add sufficient staff as necessary. This Subsection shall not apply to Type I centers.</p>	(1709.K) Remove exception for Type I centers	On motion of Dr. Vicari, seconded by Ms. Wiggins, the recommendation was approved with no opposition.
<p>§1711 Supervision (revised §1713)</p>	<p>G. Restrooms</p> <p>2. A child age 4 and older may be permitted to go and return from the restroom without s</p>	(1711.G.2) Remove provision allowing 4 year olds to go to restroom without staff	<p>On motion of Ms. Bronfin, seconded by Ms. Blanco, the recommendation was approved.</p> <p>Mr. Young, Ms. Brooks, Ms. Elliot, and Ms. Cahee were recorded as being opposed to the motion.</p>

<p>§1715 Records for independent Contractors and Student Trainees (revised §1717)</p>	<p>B. Student Trainees. The following information shall be maintained for all student trainees:</p> <ol style="list-style-type: none"> 1. an application or information form with the student's name, date of birth, address and telephone number, name of the educational center and course instructor, and job description that includes duties to be performed, and 2. A list of duties performed while present at the center. 	<p>(1715.B.2) Remove B.2 as it is repeating B.1</p>	<p>On motion of Ms. Wiggins, seconded by Ms. Loar, the recommendation was approved with no opposition.</p>
<p>§1719 Continuing Education (revised §1721)</p>	<p>A. Early learning centers shall provide opportunities for continuing education of staff members. The center staff of Type II and Type III centers, excluding Foster Grandparents, shall obtain a minimum of 12 clock hours of training annually in job related areas. The center staff of Type I centers, excluding Foster Grandparents, shall obtain a minimum of three clock hours of training annually in job related areas. These hours are in addition to the three hours required for health and safety in the Louisiana Sanitary Code, found at LAC 51:XXI.301.A.9</p>	<p>(1719.A) Reduce training hour requirement for Type II centers from 12 hours to 3 hours</p>	<p>On motion of Ms. Cahee, seconded by Ms. Elliot, a roll call vote was taken:</p> <p>Yeas: Ms. Cahee and Ms. Elliot.</p> <p>Nays: Ms. Blanco, Ms. Bronfin, Ms. Brooks, Ms. Buckelew, Dr. Burns, Mr. Evans, Ms. Jordan, Ms. Loar, Ms. Rushing, Mr. Smith, Dr. Vicari, Ms. Wiggins, and Mr. Young</p> <p>Abstentions: Ms. Wiggins</p> <p>Absences: Ms. Polito</p> <p>The motion did not pass.</p>
		<p>(1719.A) Type I centers should not be exempt from the 12 hours of training required by Type II and Type III centers</p>	<p>On motion of Ms. Wiggins, seconded by Dr. Vicari, the recommendation was approved.</p> <p>Ms. Elliot was recorded as being</p>

			opposed to the motion.
		(1719.A) Restore the requirement that Continuing Education (CE) training must have prior approval by the Department and add a requirement for trainer approval and a trainer registry.	<p>On motion of Ms. Bronfin, seconded by Mr. Smith, a roll call vote was taken:</p> <p>Yeas: Ms. Blanco, Ms. Bronfin, Ms. Brooks, Ms. Buckelew, Dr. Burns, Mr. Evans, Ms. Rushing, Mr. Smith, Dr. Vicari and Ms. Wiggins.</p> <p>Nays: Ms. Cahee, Ms. Elliot, Ms. Jordan, Ms. Loar, and Mr. Young</p> <p>Absences: Ms. Polito</p> <p>The motion passed.</p>
§1721 CPR and First Aid Certifications (revised §1723)	<p>B. Adult CPR. Fifty percent of staff members on the premises of a center and accessible to children, or at least four staff on the premises and accessible to children, whichever is less, shall have current certification in adult CPR, except for Type I centers, which shall have at least one staff member on the premises and accessible to children trained in adult CPR if there is a child eight years or older on the premises.</p> <p>C. Pediatric First Aid. Fifty percent of staff members on the premises of a center and accessible to children or at least four staff on the premises and accessible to children, whichever is less, shall have current certification in Pediatric First Aid. This Subsection shall not apply to Type I centers</p>	(1721.B & C) Remove exemptions for Type I centers.	On motion of Ms. Wiggins, seconded by Mr. Evans, the recommendation was approved with no opposition.

<p>§1723 Medication Management Training (revised §1725)</p>	<p>A. All staff members who administer medication shall have medication administration training. B. Whether administering medication or not, each early learning center shall have at least two staff members trained in medication administration. C. Such training shall be completed every two years with an approved Child Care Health Consultant. D. A licensed practical nurse (LPN) or registered nurse (RN) with a valid nursing license shall be considered to have medication administration training. E. This Section does not apply to Type I centers</p>	<p>(1723.E) Remove the exemption for Type 1 centers</p>	<p>On motion of Ms. Cahee, seconded by Dr. Vicari, the recommendation was approved. Ms. Elliot was recorded as being opposed to the motion.</p>
<p>Chapter 19. Minimum Health, Safety, and Environment Requirements and Standards</p>			
<p>§ 1901 General Safety Requirements</p>	<p>A. Telephones and Emergency Numbers 2. When a center has multiple buildings and a phone is not located in each building where children are present, the center shall establish and follow written procedures for securing emergency help. The written procedures shall be posted in each building. This Paragraph shall not apply to Type I centers.</p>	<p>(1901.A.2) Remove the exemption for Type 1 centers</p>	<p>On motion of Mr. Evans, seconded by Ms. Blanco, the recommendation was approved with no opposition.</p>
	<p>D. End-of-Day Check. The entire center and play yard shall be checked after the last child departs to ensure that no child is left at the center and this check shall be documented. Documentation shall include date, time of visual check, and signature of the staff conducting the visual check. This Subsection does not apply to Type I centers.</p>	<p>(1901.D)Remove the exemption for Type 1 centers</p>	<p>On motion of Ms. Wiggins, seconded by Ms. Loar, the recommendation was approved with no opposition.</p>
<p>§1909 Safe Sleeping Practices</p>	<p>I. Staff shall visually check on sleeping infants at least every ten minutes.</p>	<p>(1909.I) Remove requirement for staff to visually check on sleeping infants at least every 10 minutes</p>	<p>On motion of Ms. Loar, seconded by Mr. Young, the recommendation was approved</p>

			with no opposition.
§1911 Care of Children	E. Daily Reports for Infants. Written reports that include the liquid intake, food intake, disposition, bowel movements and eating and sleeping patterns shall be given to the parents of infants on a daily basis. Reports shall be kept current throughout the day. This Subsection shall not apply to Type I centers.	(1911.E) Remove the exemption for Type 1 centers	On motion of Dr. Vicari, seconded by Ms. Wiggins, the recommendation was approved with no opposition.
§1917 Medication Administration	H. Records. Medication administration records shall be maintained for all children regardless of who administers the medication. Records shall include the following: 6. When a parent administers medication to his/her own child on center premises, the medication administration record shall be documented by either the parent or a staff member. This Paragraph shall not apply to Type I centers.	(1917.H.6) Remove the exemption for Type I centers	On motion of Dr. Vicari, seconded by Ms. Wiggins, the recommendation was approved with no opposition.
§1919 Food Service and Nutrition	C. Information regarding food allergies and special diets of children shall be posted in the food preparation area with special care taken to ensure that individual names of children are not in public view. If a parent chooses to allow the center to post the child's name and allergy information in public view, the center shall obtain a signed and dated authorization from the parent	(1919.C) Recommendation that allergy information must be covered when posted out of a concern with confidentiality and privacy, even with a parent providing consent	On motion of Mr. Evans (no second motion recorded), a roll call vote was taken: Yeas: Mr. Evans, Ms. Elliot, Ms. Rushing and Mr. Smith. Nays: Ms. Blanco, Ms. Bronfin, Ms. Brooks, Ms. Buckelew, Dr. Burns, Ms. Cahee, Ms. Jordan, Ms. Loar, Mr. Smith, Dr. Vicari, Ms. Wiggins, and Mr. Young Absences: Ms. Polito The motion did not pass.

	E. Food brought into the center by a parent or child shall be labeled with the name of the child and the date.	(1919.E) Modify to say “Parents may be allowed to bring food in, per the centers discretion. Parents shall be allowed to provide breast milk”	On motion of Ms. Cahee, seconded by Mr. Young, the recommendation was approved with no opposition.
	G. Infants shall be held while being bottle-fed. An infant or child who can hold a bottle may be placed in a crib, on a mat or in a carrier, if written permission is obtained from the parent. A bottle shall not be propped at any time	(1919.G) An infant who cannot hold a bottle should be held while being bottle fed. A child shall not be placed lying down on a mat or crib or carrier while with a bottle	On motion of Dr. Vicari, seconded by Mr. Young, the recommendation was approved with no opposition.
Chapter 21. Minimum Transportation Requirements and Standards			
§2101 General Requirements (Center provided, parent provided or contract transportation)	These general transportation rules apply to all transportation, whether for field trips or daily transportation. I. Regular maintenance of all center vehicles shall include monthly inspection of tire wear and pressure, brakes, lights, and functioning seat belts and shall be documented.	(2101.I) In regards to monthly inspection of vehicles, a yearly inspection with a car care professional should suffice	On motion of Ms. Loar, seconded by Mr. Young, the recommendation was approved Mr. Evans was recorded as being opposed to the motion.

Mr. Evans requested a comparison of safety standards between all early learning center types, including public schools.

Mr. Evans requested the creation of a task force to study perceived challenges related to the criminal background check state statutes, including clarification related to who qualifies as a volunteer or visitor.

- 3 On motion of Mr. Young, and seconded by Ms. Blanco, and with no further business to come before the council, the November 5, 2014 meeting of the Early Childhood Care and Education Advisory Council was adjourned at 9:11 P.M.