



IDAHO CHILD CARE LICENSING

Idaho Department of Health & Welfare
Provider and Stakeholder Meetings - May 2019



Objectives

1. Share child care updates since our last statewide tour
2. Discuss the future of Child Care in Idaho
3. Gather your feedback, comments, and questions
4. Share our next steps



Introduction

Our purpose:

Promote and Protect the
Health and Safety of Idaho's
youngest citizens





Since we last visited...

Changes for **ICCP** families:

- Updated notices
- Current Local Market Rates (updated in 2016 and 2019)
- New Family Friendly Policies:
 - 12 month certification periods
 - Qualifying Activity protection for 3 months (job loss rule)
 - Phase out payments for families who go over income



Since we last visited...

Changes for **ICCP** providers:

- Safe sleep practices
- Emergency preparation plans (YIKES)
- 12 hours of professional development
- Updated background check requirements (all providers)
- Development of RISE system for providers



Licensing Laws Required Updates

- **Pediatric CPR / Pediatric First Aid**
 - For every staff person
- **Background checks and fingerprints**
 - Comprehensive check every 5 years
- **Annual health and safety inspection**
- **Consumer Education**
 - IdahoChildCareCheck.org and aggregate counts

The City of Pocatello is making a difference

- City issued child care license renewal required annually
- Child care worker license required for any person working or volunteering at center or group facility
- In addition to CPR/First aid, each provider must also receive twelve (12) additional hours of training per licensing year
- Providers must pass annual health inspection



The City of Chubbuck is making a difference

- City issued child care license renewal required annually
- Child care worker license required for any person working or volunteering at center or group facility
- Providers must pass annual health inspection
- Twelve (12) hours of ongoing training, which may include the CPR and first aid training, each year; PT and temp employees must obtain 4 hours each licensing year.
- All daycare providers and employees shall view a tape on the effects of "shaken baby syndrome" within thirty (30) days of licensing or employment





Inquiry

- What policies will **you** support in strengthening child care licensing laws for Idaho?
- Areas to increase standards:
 - Provider training hours
 - Emergency prep plan
 - Group size
 - Safe sleep
 - Transportation





Small Group Discussions

- Please have someone take notes on the big post-its.
 - How does this rule support children?
 - What worries you about this rule?
 - Other feedback?
- Standards to address:
 - Provider training hours
 - Emergency prep plan
 - Group size
 - Safe sleep
 - Transportation



What's next

- State Tour May 2019
- Minutes posted on ICCP webpage June 2019
- Follow up survey to providers June 2019
- Policy summary drafted July 2019
- Public Comment Period TBD
- Legislative Session Begins January 2020



Contacts

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Thank You!



Meeting Summary

Idaho State Daycare Licensing – Public Meetings

Region 6- Police Substation- 800 Yellowstone Ave. Pocatello, ID 83201

Tuesday, May 7, 2019 - 6:30 - 8:00pm (Local Time)

Attendance:

Ericka Rupp – Program Manager – Idaho Child Care Program – Dept. of Health and Welfare
Aubrie Hunt – Program Specialist – Idaho Child Care Program – Dept. of Health and Welfare
Allison Demarest-Mays – Program Specialist – Idaho Child Care Program – Dept. of Health and Welfare
Marilyn Peoples – Program Specialist – Idaho Child Care Program – Dept. of Health and Welfare
IdahoSTARS staff- Malia Woessner, Judy Boren, Laura Thomas, Teresa Stockwell

19 Local stakeholders on the sign-in sheets. Sign-in sheets are available if a list of attendees is needed.

Meeting Agenda:

Ericka Rupp and Aubrie Hunt spent the first 25 minutes sharing the attached presentation. Attendees were split into five small groups and asked to rotate between each topic presented. Small groups spent 10 minutes on each topic, with someone recording their comments and feedback on large posters.

Each poster asked the following questions:

- *How does this support children?*
- *What worries you about this change?*
- *Any feedback you have on this topic?*

The meeting reconvened for the last 5 minutes to share the “next steps” slide, contact information and to thank everyone for their attendance and participation.

Participant Feedback by Topic

Emergency Preparedness-

- **How does this support children?**
 - *Drills help children feel comfortable.*
 - *Having a YIKES plan benefits providers preparedness in case of a real disaster.*
 - *Educates and prepares children so that when they go to elementary school they are ready for drills.*
 - *Benefits special needs children and their providers.*
 - *Saves lives.*

- **What worries you about this change?**
 - *Cost can be a lot for owners/directors when they start up.*
 - *Emergency prep drills can frighten children.*
 - *Drills can be a challenge for smaller childcare homes because 1 person cannot hold 6 infants.*
 - *It can be hard to remember to update parents.*
 - *Some suggestions may not fit for all providers (ex. Suggestion to evacuate to a neighbor's home-- we don't know all of our neighbors)*
 - *YIKES expectations can be unrealistic (ex. Amount of water you're supposed to have on hand, rolls of plastic and duct tape, etc.)*
 - *Not all providers have storage available for all required items.*
 - *Evacuations can be hard in inclement weather (snow, etc.). Some providers do evacuation drills without children in coats and shoes, etc.*
 - *YIKES book can be hard to follow/ understand for small providers.*
 - *It would be helpful if YIKES was separated for In home and center child cares. They are too different.*
 - *Safely relocating without creating more danger is difficult (ex. Bringing children into a parking lot, or busy street, etc.)*
 - *It can be hard to find a safe place to relocate.*

- **Any feedback you have on this topic?**
 - *Logs of when and what drills have been practiced are required.*
 - *Facility uses color coded drill system so children are less fearful (ex. A "red drill" is a for fires).*
 - *Facility partnered with fire and police depts who came out when they had a drill and suggested ways they could improve/change.*
 - *It would be helpful if the Health Inspector brought a clean copy of the YIKES plan when they came for their annual Health Inspection.*
 - *Facility makes a game out of hiding for active shooter drills, "Rabbit in the hole".*
 - *It would be nice to have an anonymous place to suggest feedback.*
 - *Every provider statewide should be required to have a YIKES.*
 - *A checklist with tips from other facilities would be helpful. Health Inspector could bring it.*
 - *It would be helpful to have suggested language to use during drills (some providers say "a bad guy is coming" during active shooter drills).*
 - *For children with sensory issues and special needs, alternative methods of alarms are helpful (ex. Turning the lights on and off instead of a loud alarm)*

Transportation-

- **How does this support children?**
 - *Increased insurance can be a good thing but it can be cost prohibitive for a facility.*
 - *As a provider you have kids lives in your hands, so we should have requirements.*
 - *Saves lives.*
 - *Licensing should protect children during transportation not just while they're on site.*

- **What worries you about this change?**
 - *A lot of insurance companies won't insure a Child Care.*
 - *Would the consequence (getting a ticket, etc.) go to the driver or the whole facility? It should go to the individual driver.*
 - *There is no connection between law enforcement and licensing, and no way for licensing to know what has happened with a provider.*

- *There should be steps taken to change an infraction before going straight to losing a child care license.*
 - *One person driving does not have the ability to supervise children.*
 - *Would Child Care owners need specific insurance?*
 - *Public school bus drivers who makes mistakes get fired, the school does not have a consequence.*
 - *Child Care owner should have to hold the employee accountable, but facility should not have the consequence.*
- **Any feedback you have on this topic?**
 - *Childcare transportation insurance should be higher than the minimum.*
 - *Commercial insurance is too expensive.*
 - *Getting a ticket for not wearing seat belts should make a provider lose their license.*
 - *Insurance and liability insurance should be required.*
 - *State transportation laws, not just law enforcement driving rules, should be examined.*
 - *There should be education for providers about booster seats, car seats, restraints.*
 - *There should be arrival and departure regulations.*
 - *There should be separate protocols for buses and vans.*
 - *The whole state should do the same thing.*
 - *Safe transportation needs to include proper vehicle insurance.*

Annual Health Inspections-

- **How does this support children?**
 - *Safety and cleanliness ensured by inspections benefit children.*
 - *Safe playground, toys, and equipment are benefit to children.*
 - *A standardized specific safety checklist used statewide would help all children.*
 - *Statewide consistency reinforces continuity of care.*
- **What worries you about this change?**
 - *Getting inspected for anything is a worry.*
 - *If a facility wasn't already doing something it could be hard to implement it. Maybe changes could happen in phases.*
 - *Inspectors aren't consistent. I passed something last year, and got dinged for it this year.*
- **Any feedback you have on this topic?**
 - *State licensing staff could create a clear cut specific checklist so that it's not up to the whim and preference of inspectors.*
 - *Provide a checklist for providers (similar to the fire safety checklist)*
 - *It would be better to have 2 inspectors at each inspection*
 - *H&S inspections are the hardest because the target changes every time. Inspectors should "stay in their lane".*
 - *A standardized checklist should be included in the annual renewal packet.*
 - *Inspectors should introduce themselves to staff before inundating them with questions.*

Safe Sleep-

- **How does this support children?**
 - *Keeps infants alive.*
 - *It is the safest thing for everyone.*
 - *Protects providers.*
 - *Provides peace of mind for parents.*

- *Keeps providers on their toes.*
- **What worries you about this change?**
 - *Currently, it is not safe for children at facilities that don't have safe sleep requirement.*
 - *Can be expensive to implement at first.*
 - *Can be tough for infants to adjust to.*
 - *It can be hard for babies to sleep without their blanket, or in a different way than they sleep at home.*
 - *Parents get upset if child doesn't sleep at child care.*
 - *Hard for babies under 1.*
- **Any feedback you have on this topic?**
 - *It would be helpful to have a flyer/materials for parents.*
 - *Safe sleep should be the law for everyone (parents and providers).*
 - *Blankets and babies go together.*
 - *Provider has given handouts to parents but parents refuse training.*
 - *Parents should have to go to a similar training.*
 - *Hospitals should be the start of safe sleep/ campaign to inform everyone.*
 - *A refresher training should be offered annually.*

Professional Development (Training Requirements)-

- **How does this support children?**
 - *With more training comes knowledge of child development, so providers see less behaviors or staff have the support and skills to handle it.*
 - *CARE courses are great for in home providers.*
 - *All provider should be on the same page, and do training.*
- **What worries you about this change?**
 - *Need to have new material for trainings to ensure growth and advanced material for long term providers.*
 - *When you change target to 12 hours at first people will say that it will be hard to get. Show them ways to build relationships w their consultant.*
 - *There should be a 25 cent raise for any time staff finish their 12 hours. (Lucky duck- Chubbuck)*
- **Any feedback you have on this topic?**
 - *Stewards of Children training should be available for credit hours every time you take it.*
 - *Lee Pesky trainings are great. After a few years you should be able to retake them for credit.*
 - *FEMA training should be "dumbed" down a little.*
 - *Advanced courses should be available for long term/ higher educated staff.*
 - *There should be information about how to share information with parents.*
 - *There should be more education available on current events (i.e.. measles, whopping cough).*
 - *Live trainings are important.*
 - *Owners/directors should encourage staff to stay on top of it.*
 - *There should be an incentive to owners to hire staff with more training.*