

Representative Pryor, Elizabeth Fraser, Members of the Committee

In Regards to HF 3737:

AMFCCL is an association that has been around since the mid-1980s. We are an organization made up of family child care licensing workers throughout the state of MN. We have representation from most areas of the state.

Thank you for the time and effort put into this bill. We have been in frequent contact with Beth Fraser from DHS regarding our concerns about this bill. There have been some points of clarification, but we do not support the bill in its entirety. Specifically, 245A.149, Supervision of Family Child Care License Holder's Own Child. While we realize the intent of the bill was to allow visiting family members to care for the provider's child in other areas of the home, that is not how it is being interpreted in the child care community. The way the bill is written, it would allow for any person of any age to "supervise" the provider's child in unlicensed and potentially unsafe areas of the home. This would also allow for any person of any age to put an infant to sleep in an unsafe sleep environment because they are not required to take SUID training and therefore do not have to follow those guidelines. There have been many licensing actions against providers when they have placed their own children in unsafe situations, as according to DHS, provider's own children are "afforded the same care and protection" as unrelated enrolled children. As well as provider's own children, no matter where they are in the home, are counted in the capacity numbers. Family Child Care is a very serious profession and there is a society wide struggle to realize that it's more than babysitting. Some of the professionalism could be minimized by loosening standards on safety of ALL children present during operating business hours. We do not feel this is in the best interests of the safety of all children in a family child care business.

We are also not in support of 245A.149, subdivisions 3 and 4 as written in the bill. CPR and First Aid training developed by the American Heart Association, the American Red Cross or another organization that uses national recognized, evidence-based guidelines gives certification/training for 2 years. The way this bill is written would allow for family child care provider's CPR and First Aid expiration to go much beyond that 2 year mark, based on when their child care license expires. While this may work in child care centers, as there is always someone present with CPR and First Aid, most times the family child care provider is the only person caring for children, therefore the only one with CPR and First Aid training. While we recognize there may be hardship in finding these trainings, allowing them to lapse for many

months is not in the best interest of children in care. There is always the option to take the training before it expires.

We also want to make sure that 245A.149, subdivision 7e is clear that providers are not required to only take training through Develop and/or with a KCF value. Develop is the tool used to house required provider training. There are many other venues a provider can receive training, such as, community education, county trainings, out of state conferences, public school trainings and various online resources. The way the language reads is, “(e) Additional ongoing training subjects to meet the annual 16-hour training **must** be selected from training in the following content areas of the MN KCF:...” That appears to mean that the non-required training selected must have a KCF value. Clarification of this is important.

Again, thank you for your hard work on behalf of children living in the state of MN.

Respectfully Submitted,

AMFCCL Board

