REQUIRED ANNUAL TRAINING FOR CURRENT PROVIDERS:

MN STATUTE 245A.50				
TITLE	ONLINE/IN	WHERE TO	REQUIRED	NOTES
	PERSON	FIND	HOURS	
CPR	In Person	Anywhere	Times Vary	Must include techniques on infants/children. Must be a certified trainer through the American Heart Association or the American Red Cross.
First Aid	In Person	Anywhere	*Required every two years	
Sudden Unexpected Infant Death Syndrome (SUIDS)	Either	eagertolearn.org developtoolmn.org	1 hour	Can be done in person by registering for a class through Develop or can be done online through Eager to Learn. *Required annually but only required to do in person every other year. *Links have been sent for the training requirement on the year it is not required to be "in person." They can also be found on the Winona County Website.
Abusive Head Trauma (AHT)	Either	eagertolearn.org developtoolmn.org	1 hour	
Child Passenger	In Person	developtoolmn.org	3 hours	Only required if you plan to
Restraint Training		Or dps.mn.gov (under divisions choose Office of Traffic Safety, then Child Passenger Safety)	*Required every 5 years	transport the children. Scheduled in Winona periodically.
Child Growth and Development**	Either	eagertolearn.org developtoolmn.org	2 hours**	Training must be approved through the MN Center for Professional Development. Check with the trainer/training agency to ensure it is approved if unsure! If you are taking the training through Develop or Eager to Learn they are approved trainings.
Behavior Guidance**	Either	eagertolearn.org developtoolmn.org	2 hours**	
Supervision Training (called "Active Supervision" for current providers)	Either	eagertolearn.org developtoolmn.org	2 hours	
**Child Growth and Development and Behavior Guidance Training may be a combined 2 hour training				
if the training is meets criteria to be listed under KCF II.C (Knowledge & Competency Frame Work				

Area – Promoting Social & Emotional Development) on registration information**

You are required to do 16 hours of training annually. Any training taken to meet the training requirements prior to licensure <u>cannot</u> be counted towards your annual required hours. The required training topics above will not equal 16 hours every year. You will need to take other training in addition to the above topics. Please see the attached statute 245A.50 subd. 7 on acceptable training topics. Please check with your licensor if you are unsure if the training will be acceptable. You must have 16 hours of training annually and your training must not expire (example: Supervision Training was done on May 8th, 2015 – you must take another Supervision Training by May 31st, 2016)

245A.50 FAMILY CHILD CARE TRAINING REQUIREMENTS.

Subdivision 1.Initial training.

(a) License holders, caregivers, and substitutes must comply with the training requirements in this section.

(b) Helpers who assist with care on a regular basis must complete six hours of training within one year after the date of initial employment.

Subd. 2. Child growth and development and behavior guidance training.

(a) For purposes of family and group family child care, the license holder and each adult caregiver who provides care in the licensed setting for more than 30 days in any 12-month period shall complete and document at least four hours of child growth and development and behavior guidance training prior to initial licensure, and before caring for children. For purposes of this subdivision, "child growth and development training" means training in understanding how children acquire language and develop physically, cognitively, emotionally, and socially. "Behavior guidance training" means training in the understanding of the functions of child behavior and strategies for managing challenging situations. Child growth and development and behavior guidance training must be repeated annually. Training curriculum shall be developed or approved by the commissioner of human services by January 1, 2014.

(b) Notwithstanding paragraph (a), individuals are exempt from this requirement if they:

(1) have taken a three-credit course on early childhood development within the past five years;

(2) have received a baccalaureate or master's degree in early childhood education or school-age child care within the past five years;

(3) are licensed in Minnesota as a prekindergarten teacher, an early childhood educator, a kindergarten to grade 6 teacher with a prekindergarten specialty, an early childhood special education teacher, or an elementary teacher with a kindergarten endorsement; or

(4) have received a baccalaureate degree with a Montessori certificate within the past five years.

Subd. 3.First aid.

(a) When children are present in a family child care home governed by Minnesota Rules, parts 9502.0315 to 9502.0445, at least one staff person must be present in the home who has been trained in first aid. The first aid training must have been provided by an individual approved to provide first aid instruction. First aid training may be less than eight hours and persons qualified to provide first aid training include individuals approved as first aid instructors. First aid training must be repeated every two years.

(b) A family child care provider is exempt from the first aid training requirements under this subdivision related to any substitute caregiver who provides less than 30 hours of care during any 12-month period.

(c) Video training reviewed and approved by the county licensing agency satisfies the training requirement of this subdivision.

Subd. 4. Cardiopulmonary resuscitation.

(a) When children are present in a family child care home governed by Minnesota Rules, parts 9502.0315 to 9502.0445, at least one caregiver must be present in the home who has been trained in cardiopulmonary resuscitation (CPR), including CPR techniques for infants and children, and in the treatment of obstructed airways that includes CPR techniques for infants and children. The CPR training must have been provided by an individual approved to provide CPR instruction, must be repeated at least once every two years, and must be documented in the staff person's records.

(b) A family child care provider is exempt from the CPR training requirement in this subdivision related to any substitute caregiver who provides less than 30 hours of care during any 12-month period.

(c) Persons providing CPR training must use CPR training that has been developed:

(1) by the American Heart Association or the American Red Cross and incorporates psychomotor skills to support the instruction; or

(2) using nationally recognized, evidence-based guidelines for CPR training and incorporates psychomotor skills to support the instruction.

Subd. 5.Sudden unexpected infant death and abusive head trauma training.

(a) License holders must document that before staff persons, caregivers, and helpers assist in the care of infants, they are instructed on the standards in section 245A.1435 and receive training on reducing the risk of sudden unexpected infant death. In addition, license holders must document that before staff persons, caregivers, and helpers assist in the care of infants and children under school age, they receive training on reducing the risk of abusive head trauma from shaking infants and young children. The training in this subdivision may be provided as initial training under subdivision 1 or ongoing annual training under subdivision 7.

(b) Sudden unexpected infant death reduction training required under this subdivision must, at a minimum, address the risk factors related to sudden unexpected infant death, means of reducing the risk of sudden unexpected infant death in child care, and license holder communication with parents regarding reducing the risk of sudden unexpected infant death.

(c) Abusive head trauma training required under this subdivision must, at a minimum, address the risk factors related to shaking infants and young children, means of reducing the risk of abusive head trauma in child care, and license holder communication with parents regarding reducing the risk of abusive head trauma.

(d) Training for family and group family child care providers must be developed by the commissioner in conjunction with the Minnesota Sudden Infant Death Center and approved by the Minnesota Center for Professional Development. Sudden unexpected infant death reduction training and abusive head trauma training may be provided in a single course of no more than two hours in length.

(e) Sudden unexpected infant death reduction training and abusive head trauma training required under this subdivision must be completed in person or as allowed under subdivision 10, clause (1) or (2), at least once every two years. On the years when the license holder is not receiving training in person or as allowed under subdivision 10, clause (1) or (2), the license holder must receive sudden unexpected infant death reduction training and abusive head trauma training through a video of no more than one hour in length. The video must be developed or approved by the commissioner.

Subd. 6. Child passenger restraint systems; training requirement.

(a) A license holder must comply with all seat belt and child passenger restraint system requirements under section 169.685.

(b) Family and group family child care programs licensed by the Department of Human Services that serve a child or children under nine years of age must document training that fulfills the requirements in this subdivision.

(1) Before a license holder, staff person, caregiver, or helper transports a child or children under age nine in a motor vehicle, the person placing the child or children in a passenger restraint must satisfactorily complete training on the proper use and installation of child restraint systems in motor vehicles. Training completed under this subdivision may be used to meet initial training under subdivision 1 or ongoing training under subdivision 7.

(2) Training required under this subdivision must be at least one hour in length, completed at initial training, and repeated at least once every five years. At a minimum, the training must address the proper use of child restraint systems based on the child's size, weight, and age, and the proper installation of a car seat or booster seat in the motor vehicle used by the license holder to transport the child or children.

(3) Training under this subdivision must be provided by individuals who are certified and approved by the Department of Public Safety, Office of Traffic Safety. License holders may obtain a list of certified and approved trainers through the Department of Public Safety Web site or by contacting the agency. (c) Child care providers that only transport school-age children as defined in section <u>245A.02</u>, <u>subdivision 19</u>, paragraph (f), in child care buses as defined in section <u>169.448</u>, subdivision 1, paragraph (e), are exempt from this subdivision.

Subd. 7. Training requirements for family and group family child care.

For purposes of family and group family child care, the license holder and each primary caregiver must complete 16 hours of ongoing training each year. For purposes of this subdivision, a primary caregiver is an adult caregiver who provides services in the licensed setting for more than 30 days in any 12-month period. Repeat of topical training requirements in subdivisions 2 to 8 shall count toward the annual 16-hour training requirement. Additional ongoing training subjects to meet the annual 16-hour training requirement must be selected from the following areas:

(1) child growth and development training under subdivision 2, paragraph (a);

(2) learning environment and curriculum, including training in establishing an environment and providing activities that provide learning experiences to meet each child's needs, capabilities, and interests;

(3) assessment and planning for individual needs, including training in observing and assessing what children know and can do in order to provide curriculum and instruction that addresses their developmental and learning needs, including children with special needs and bilingual children or children for whom English is not their primary language;

(4) interactions with children, including training in establishing supportive relationships with children, guiding them as individuals and as part of a group;

(5) families and communities, including training in working collaboratively with families and agencies or organizations to meet children's needs and to encourage the community's involvement;

(6) health, safety, and nutrition, including training in establishing and maintaining an environment that ensures children's health, safety, and nourishment, including child abuse, maltreatment, prevention, and reporting; home and fire safety; child injury prevention; communicable disease prevention and control; first aid; and CPR;

(7) program planning and evaluation, including training in establishing, implementing, evaluating, and enhancing program operations; and

(8) behavior guidance, including training in the understanding of the functions of child behavior and strategies for managing behavior.

Subd. 8. Other required training requirements.

(a) The training required of family and group family child care providers and staff must include training in the cultural dynamics of early childhood development and child care. The cultural dynamics and disabilities training and skills development of child care providers must be designed to achieve outcomes for providers of child care that include, but are not limited to:

(1) an understanding and support of the importance of culture and differences in ability in children's identity development;

(2) understanding the importance of awareness of cultural differences and similarities in working with children and their families;

(3) understanding and support of the needs of families and children with differences in ability;

(4) developing skills to help children develop unbiased attitudes about cultural differences and differences in ability;

(5) developing skills in culturally appropriate caregiving; and

(6) developing skills in appropriate caregiving for children of different abilities.

The commissioner shall approve the curriculum for cultural dynamics and disability training.

(b) The provider must meet the training requirement in section <u>245A.14</u>, <u>subdivision 11</u>, paragraph (a), clause (4), to be eligible to allow a child cared for at the family child care or group family child care home to use the swimming pool located at the home.

Subd. 9. Supervising for safety; training requirement.

Effective July 1, 2014, all family child care license holders and each adult caregiver who provides care in the licensed family child care home for more than 30 days in any 12-month period shall complete and document at least six hours of approved training on supervising for safety prior to initial licensure, and before caring for children. At least two hours of training on supervising for safety must be repeated annually. For purposes of this subdivision, "supervising for safety" includes supervision basics, supervision outdoors, equipment and materials, illness, injuries, and disaster preparedness. The commissioner shall develop the supervising for safety curriculum by January 1, 2014.

Subd. 10. Approved training.

County licensing staff must accept training approved by the Minnesota Center for Professional Development, including:

(1) face-to-face or classroom training;

(2) online training; and

(3) relationship-based professional development, such as mentoring, coaching, and consulting.

Subd. 11. Provider training.

New and increased training requirements under this section must not be imposed on providers until the commissioner establishes statewide accessibility to the required provider training.

History:

<u>2007 c 112 s 22; 2009 c 26 s 4; 2009 c 142 art 2 s 21; 2010 c 329 art 1 s 11; 2013 c 108 art 3 s 21; 2014 c 228 art 2 s 14; 2014 c 291 art 1 s 4</u>

NOTE: The amendment to subdivision 5 by Laws 2014, chapter 291, article 1, section 4, is effective January 1, 2015. Laws 2014, chapter 291, article 1, section 4, the effective date.