

Impact Analysis – CCDF Amendments October 2025

Agency:	DHHS/Division of Child Development and Early Education	
Contact:	Alison Keisler through Cheryl Johnson, DCDEE Rulemaking Coordinator	
Rule Citations:	10A NCAC 09 .1101	New Staff Orientation Requirements
	10A NCAC 09 .1102	Health and Safety Training Requirements
	10A NCAC 09 .1703	On-Going Requirements for Family Child Care Home Operators
	10A NCAC 09 .1729	Additional Caregiver and Substitute Provider Qualifications
	10A NCAC 09 .2101	Religious Sponsored Child Care Center Requirements
Statutory Authority:	42 USCS 9858c, 9858e, 45 CFR 98.15, 98.41. 98.44 N.C. G.S. 110-91(1)(8)(11) N.C. G.S. 110-106	
Impact Summary:	State Government Impact:	Yes but minimal
	Local Government Impact:	None
	Substantial Economic Impact:	No
	Private Sector Impact:	Yes but minimal

Background:

This set of rule amendments is being submitted in order to come into full compliance with requirements of the federal Child Care Development Block Fund Grant, 42 U.S.C. §9858 (CCDBG). The CCDBG Act is the primary federal law supporting child care programs for low-income working families. It provides discretionary funding to state, territorial, and tribal agencies to subsidize child care costs for eligible children and enhance the quality and availability of child care. Discretionary CCDBG funds are combined with mandatory Child Care Entitlement to States (CCES) funds, which are permanently authorized under Section 418 of the Social Security Act and must follow CCDBG rules. Together, these funding streams form the Child Care and Development Fund (CCDF), which is administered by the U.S. Department of Health and Human Services. The CCDF provides federal subsidies for low-income families with a parent who is working or continuing their education and training. These subsidies help families pay for child care services.

To receive CCDF funds, states must set educational, health, and safety standards in 11 areas, which CCDF child care providers must follow. These areas are:

- prevention and control of infectious diseases (including immunizations);
- prevention of sudden infant death syndrome and use of safe sleeping practices;

- administration of medication;
- prevention of and response to emergencies due to food and allergic reactions;
- building and physical premises safety (including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic);
- prevention of shaken baby syndrome and abusive head trauma;
- emergency preparedness and response planning for emergencies;
- the handling and storage of hazardous materials;
- for providers that offer transportation, if applicable, appropriate precautions in transporting children;
- first aid and cardiopulmonary resuscitation (CPR); and
- recognition and reporting of child abuse and neglect.

States must have both pre-service (or during an orientation period) and on-going minimum health and safety training requirements (appropriate to the provider setting) for providers serving CCDF children in the topic areas listed above. The CCDBG law does not require any specific number of pre-service and ongoing training hours for CCDF health and safety training. The NC Child Care Commission addressed the CCDBG requirements by stating all health and safety topics are covered over a specified period of time but maintain the currently required number of on-going training hours.

The health and safety standards required by CCDF are designed to benefit children, parents, child care workers, and the State. The benefit to children and parents is avoiding illness and injury to children in care. The benefit to child care workers is improved quality of child care and support for the child care workforce. Finally, the benefit to the State is ensuring continued federal CCDF Discretionary funds, which are used for child care subsidies and for activities to improve the quality and accessibility of child care.

In 2017, the NC Child Care Commission adopted rules to support the federal requirements. A recent federal audit of NC's program and rules found that NC was not in compliance with the following CCDF requirements:

- Requiring all persons who are expected to have contact with children to complete the required health and safety training as part of their orientation. This must include all employees, substitute providers, and volunteers.
 - For child care centers, NC's existing rules exempt substitute providers who provide services for less than 10 days in a 12-month period as well as staff members who do not have caregiving responsibilities for children. The existing rule for child care centers does not address volunteers and, as such, effectively exempts volunteers from these training requirements as well. The proposed amendments to **10A NCAC 09 .1101 and .1102** will expand the health and safety training requirement to volunteers and all substitute providers in child care centers.
 - For family child care homes, NC's existing rules exempt substitute providers who provide services for less than 10 days in a 12-month period. The existing rule for

family child care homes does apply to volunteers. The proposed amendments to **10A NCAC 09 .1703 and .1729** will expand the health and safety training requirements to all substitute providers in family child care homes.

- Requiring in rule that the topic of child development is covered in an employee's new staff orientation . NC's existing rules, do not specifically list child development as a topic area for new staff orientation. The proposed rule amendments will add child development to the new staff orientation requirements that must be provided within six weeks of employment to all staff (including substitutes and volunteers) at child care centers and family child care homes as required and outlined in our response to a federal audit.

In addition to the above rule changes required to comply with federal CCDF requirements, the Child Care Commission is proposing the following amendment to 10A NCAC 09 .2101:

- Clarify that religious-sponsored child care centers are not exempt from the health and safety training requirements if they participate in the child care subsidy assistance program. By law, religious-sponsored child care centers are exempt from other requirements related to licensing and employee qualifications. The proposed amendment to **10A NCAC 09 .2101** will align the rule with a declaratory ruling and longstanding practice. As such, this change will have no impact other than from incremental improvement to rule clarity.

Fiscal Impacts:

Child Care Centers and Family Child Care Homes

The proposed amendments to 10A NCAC 09 .1101 and .1102 will expand the new staff orientation requirements and health and safety training requirements to volunteers and all substitute providers in **child care centers**. As of February 2025, there are 4,219 licensed child care centers in North Carolina. The proposed amendments to 10A NCAC 09 .1703 and .1729 will expand the new staff orientation requirements and health and safety training requirements to all substitute providers in **family child care homes** (volunteers are already subject to these requirements under the existing family child care home rules). As of February 2025, there are 1,102 licensed family child care homes in North Carolina. The amendments for both types of facilities will provide foundational knowledge for caregivers and ensure compliance with federal rules. While the new training requirements may discourage some individuals from becoming substitutes or volunteers, the overall impact is expected to be minimal. Most child care centers and family child care homes already require health and safety training for all substitutes and volunteers, regardless of how many days they work. Additionally, due to ongoing workforce shortages, it is rare for substitutes or volunteers to work fewer than ten days and qualify for the previous exemption. Nonetheless, these amendments are required.

Proposed rule amendments will also add child development to the new staff orientation that must be provided within six weeks of employment to all staff (including substitutes and volunteers). In practice, these proposed changes are expected to have minimal impacts on child care centers and family child care homes as compared to the status quo.

- Costs for completing the training depend on individual choices, such as whether staff opt for free online modules or alternative options like face-to-face training or college coursework. Health and safety training is already available at no cost through the DCDEE Moodle Learning Platform, which offers self-paced, self-enrolled courses. For those staff for whom completing the health and safety training modules will be new, there will be an opportunity cost that varies depending on their role at the facility:
 - Administrators: \$11.00 time cost per module (based on \$22.00/hour median wage for 30 minutes).
 - Lead teachers: \$7.00 time cost per module (based on \$14.00/hour median starting wage for 30 minutes).
 - These estimates are derived from the "[Working in Early Care and Education in NC, 2023 Workforce Study](#)."

The entire health and safety training package of modules can be completed over a span of eight to nine hours, and individuals have 12 months to complete them.

- The new child development module will be added to the Moodle platform and will take approximately 30 minutes to complete. It is likely that most, if not all, staff at family child care homes will use either the free Moodle platform or they will satisfy this requirement through existing college coursework that already incorporates a child development module at no additional cost. It is likely that a majority of existing staff have already completed training that would satisfy this requirement. The addition of child development as a topic area to the rule will, however, make it a clearly identified and enforceable requirement. Regulatory staff currently monitor required trainings and this will become part of an already established list to monitor. It is not likely to create an increase in monitoring time.
- Under the proposed amendments, it is likely that more **substitutes** will complete health and safety training as compared to the status quo. DHHS believes that many facilities already require these health and safety trainings for all their substitutes, however, even those substitutes who work fewer than 10 days in a 12-month period. Further, given the workforce challenges in hiring and retaining staff, it is relatively uncommon that a substitute provider would work for fewer than 10 days in a year. For these reasons, we expect the total number of additional individuals for whom this training will be new to be small. Plus, not every facility uses substitutes, which would further reduce the overall impact of this rule change.
- The same scenario is likely true for **volunteers**. The child care rules define “volunteers” as a person who works in a facility and is not counted in staff/child ratio, does not have unsupervised contact with children, and is not monetarily compensated by the facility. This is not a required position and, similar to substitutes, if a facility has a volunteer who has transitioned to a caregiving role on a regular basis, they have likely already taken the health and safety trainings. Not every facility has volunteers, and volunteering is an individual choice, not a requirement.

Rule 10A NCAC 09 .2101 applies to the subset of child care centers that are religious sponsored in accordance with G.S. 110-106. The proposed changes to this rule clarify that religious-sponsored child care centers participating in the Child Care Development Fund (CCDF) program

(i.e., accepting subsidy reimbursements) must complete the required health and safety trainings. Since these requirements are already enforced, the rule change primarily improves clarity without imposing additional costs. As of February 2025, there are 467 religious-sponsored child care centers operating under a Notice of Compliance in North Carolina.

State Government

The creation of the child development module to be added to the Moodle platform incurred minimal costs as it was developed by Division staff as part of their regular responsibilities. Approximately 10 hours were spent on research and development at an estimated one-time total staff opportunity cost of \$457.50¹. Future, ongoing maintenance of the child development module will require minimal staff time.

One major benefit of the proposed amendments will be from coming into full compliance with the requirements of the federal CCDBG, upon which a significant amount of federal funding is contingent. In Fiscal Year 2024-2025, funding under this program allocated to North Carolina is about \$404.7 million.

Finally, broadening the rule to include all volunteers and substitutes, regardless of the amount of time they work in a 12-month period, will simplify the administrative process for Division staff. Staff will no longer have to monitor the number of days worked by substitutes and volunteers. This will decrease the time Division and facility staff spend on reviewing files for substitutes and volunteers as they will now meet the same health and safety training requirements as other staff.

Children and Families

The proposed changes aim to enhance health and safety standards in child care facilities, indirectly benefiting children and families by ensuring safer environments. Under the proposed amendments, it is likely that more volunteers and substitutes will complete health and safety training. Health and safety trainings should better equip child care providers in areas such as preventing accidents, injuries, and the spread of infectious diseases and improving emergency preparedness. This creates a safer environment for children. Many facilities already require this training of all their volunteers and substitutes, so we expect the number of additional individuals receiving this training to be small. The impact on families is primarily tied to improved clarity in regulations and consistent enforcement of existing standards.

There are likely benefits associated with the requirement for staff at child care facilities to complete a specific child development training module. It will provide foundational knowledge of brain development and the developmental domains of child development outlined in [NC Foundations for Early Learning and Development](#). This is already a requirement of Child Care Rule 10A NCAC 09 .0511 and is required to be used as a lead teacher plans activities for groups

¹ Staff compensation rate of \$45.75 per hour was calculated using [NC OSHR: Total Compensation Calculator](#) and includes salary and benefits. Salary was based on the average state employee salary of an employee with 12 years of service as reported in the May 2024 [Compensation and Benefits Report](#).

of children in care. A stronger knowledge of a child's development will support the caregiving responsibilities of early educators and that will, in turn, have a positive impact on children in their care.

Summary:

In summary, the proposed amendments will satisfy federal requirements related to training on health, safety, and child development and clarify when a religious-sponsored center must participate in training. These amendments will help ensure continued compliance with the CCDF program that provides federal subsidies to low-income families for child care; support the early educators in this state by ensuring they receive foundational training on child development; and provide health and safety training to more individuals, namely volunteers and some substitute providers, that are working in child care centers and family child care homes. The amendments expand training to more volunteers and substitutes (8–9 hours training over 12 months) but will likely impact few individuals, as most already complete such training. DHHS estimates a one-time \$457 (10-hour) cost to develop the child development module, with minimal ongoing maintenance. Improved rule clarity and broader training access are expected to enhance child safety and learning at child care centers and family child care homes.

Attachment of Rules

SECTION .1100 – CONTINUING EDUCATION AND PROFESSIONAL DEVELOPMENT

10A NCAC 09 .1101 is proposed for amendment as follows:

10A NCAC 09 .1101 NEW STAFF ORIENTATION REQUIREMENTS

(a) Each center shall ensure that each new employee and volunteer who is expected to have contact with children receives 16 hours of ~~on-site~~ orientation within the first six weeks of employment. As part of this orientation, each new employee and volunteer shall complete six hours of orientation within the first two weeks of employment.

(b) New staff orientation shall include an overview of the following topics, focusing on the operation of the center:

New staff orientation within first two (2) weeks of employment	New staff orientation within first six (6) weeks of employment
Information regarding recognizing, responding to, and reporting child abuse, neglect, or maltreatment pursuant to G.S. 110-105.4 and G.S. 7B-301	Firsthand observation of the center's daily operations <u>Overview of child development, including the five major domains of learning: Approaches to Play and Learning, Emotional and Social Development, Health and Physical Development, Language Development and Communication, and Cognitive Development.</u>
Review of the center's operational policies, including the center's safe sleep policy for infants, the center's policy for transportation, the center's identification of building and premises safety issues, the Emergency Preparedness and Response Plan, and the emergency medical care plan	Instruction in the employee's assigned duties
Adequate supervision of children in accordance with 10A NCAC 09 .1801	Instruction in the maintenance of a safe and healthy environment
Information regarding prevention of shaken baby syndrome and abusive head trauma and child maltreatment	Instruction in the administration of medication to children in accordance with 10A NCAC 09 .0803
Prevention and control of infectious diseases, including immunization	Review of the center's purposes and goals
<u>Firsthand Observation of the center's daily operations</u>	Review of the child care licensing law and rules
	<u>Review of Quality Rating Improvement System standards Section .2800 of this Chapter</u> if the center has a two-through five- star license at the time of employment
	An explanation of the role of State and local government agencies in the regulation of child care, their impact on the operation of the center, and their availability as a resource
	An explanation of the employee's obligation to cooperate with representatives of State and local government agencies during visits and investigations
	Prevention of and response to emergencies due to food and allergic reactions

New staff orientation within first two (2) weeks of employment	New staff orientation within first six (6) weeks of employment
	Review of the center's handling and storage of hazardous materials and the appropriate disposal of biocontaminants

History Note: Authority G.S. 110-85; 110-91(11); 143B-168.3;
Eff. October 1, 2017;
Amended Eff. March 1, 2019.

10A NCAC 09 .1102 is proposed for amendment as follows:

10A NCAC 09 .1102 HEALTH AND SAFETY TRAINING REQUIREMENTS

(a) Child care administrators and staff members shall complete health and safety training within one year of employment. ~~unless the staff member has completed the training~~ Any administrator or staff member who has completed the health and safety trainings as a result of prior employment, and can show proof of completion, shall not be required to repeat the health and safety trainings, except as required by 10A NCAC 09 .1103. Any administrator or staff who has completed some, but not all, trainings due to prior employment or as part of the ongoing training requirements set forth in 10A NCAC 09.1103(b), and can provide proof of completion, shall not be required to repeat the course already completed .1103, within the year prior to beginning employment. Health and safety training shall be in addition to the new staff orientation requirements set forth in Rule .1101 of this Section. ~~The following persons~~ Service providers such as speech therapists, occupational therapists, and physical therapists shall be exempt from this requirement:

- (1) ~~staff members that do not have caregiving responsibilities for a child or group of children;~~
- (2) ~~service providers such as speech therapists, occupational therapists, and physical therapists; and~~
- (3) ~~substitute providers who provide services for less than 10 days in a 12-month period.~~

(b) The health and safety training shall include the following topic areas:

- (1) Prevention and control of infectious diseases, including immunization;
- (2) Administration of medication, with standards for parental consent;
- (3) Prevention of and response to emergencies due to food and allergic reactions;
- (4) Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic;
- (5) Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event;
- (6) Handling and storage of hazardous materials and the appropriate disposal of biocontaminants;
- (7) Precautions in transporting children, if applicable;
- (8) Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment;
- (9) CPR and First Aid training as required in Paragraphs (c) and (d) of this Rule;
- (10) Recognizing and reporting child abuse, child neglect, and child maltreatment; and

1 (11) Prevention of sudden infant death syndrome and use of safe sleeping practices.

2 (c) All staff who provide direct care or accompany children when they are off premises shall successfully complete
3 certification in First Aid appropriate to the ages of children in care. The training shall be completed by June 30, 2018,
4 or for new staff hired on or after September 1, 2017, training must be completed within 90 days of employment.
5 Distance learning shall not be permitted for First Aid training. At all times when children are in care at least one staff
6 member present must have successfully completed First Aid training, as evidenced by a certificate or card from an
7 approved training organization. First Aid training shall be renewed on or before expiration of the certification.
8 "Successfully completed" is defined as demonstrating competency, as evaluated by the instructor. Verification of each
9 required staff member's completion of this course from an approved training organization shall be maintained in the
10 staff member's file in the center. The Division shall post a list of approved training organizations on its website at
11 http://ncchildcare.nc.gov/providers/pv_sn2_ov_pd.asp.

12 (d) All staff who provide direct care or accompany children when they are off premises shall successfully complete
13 certification in a cardiopulmonary resuscitation (CPR) course appropriate to the ages of children in care. At all times
14 when children are in care one staff member present must have successfully completed CPR training. The training shall
15 be completed by June 30, 2018 or for new staff hired on or after September 1, 2017 training must be completed within
16 90 days of employment. Distance learning shall not be permitted for CPR training. CPR training shall be renewed on
17 or before the expiration of the certification. Verification of each staff member's completion of this course from an
18 approved training organization shall be maintained in the staff member's file in the center. The Division shall post a
19 list of approved training organizations on its website at http://ncchildcare.nc.gov/providers/pv_sn2_ov_pd.asp.

20 (e) One staff member shall complete training in playground safety. This training shall address playground safety
21 hazards, playground supervision, maintenance and general upkeep of the outdoor learning environment, and age and
22 developmentally appropriate playground materials and equipment. Distance learning shall not be permitted for
23 playground safety training. Completion of playground safety training shall be included in the number of hours needed
24 to meet annual on-going training requirements in this Section. Staff counted to comply with this Rule shall have six
25 months from the date of employment, or from the date a vacancy occurs, to complete the required safety training. A
26 certificate of each designated staff member's completion of this course shall be maintained in the staff member's file
27 in the center.

28 (f) In centers that are licensed to care for infants, the child care administrator and any child care provider scheduled
29 to work in the infant room shall complete ITS-SIDS training. ITS-SIDS training shall be completed within two months
30 of an individual assuming responsibilities in the infant room and every three years thereafter. Child care
31 administrators, as defined in G.S. 110-86(2a), shall complete ITS-SIDS training within 90 days of employment and
32 every three years thereafter. Completion of ITS-SIDS training shall be included once every three years in the number
33 of hours needed to meet on-going training requirements in this Section. At all times, one child care provider who has
34 completed ITS-SIDS training shall be present in the infant room while children are in care. A certificate of each staff
35 member's completion of this course shall be maintained in the staff member's file in the center.

36 (g) The child care administrator and all staff members shall complete Recognizing and Responding to Suspicious of
37 Child Maltreatment training within 90 days of employment. This training shall count toward requirements set forth in

1 Rule .1103 of this Section. Recognizing and Responding to Suspicions of Child Maltreatment training is available at
2 <https://www.preventchildabusenc.org/services/trainings-and-professional-development/rrcourse>. A certificate of each
3 staff member's completion of this course shall be maintained in the staff member's file in the center.

4
5 *History Note: Authority G.S. 110-85; 110-91(1),(8), (11); 143B-168.3;*
6 *Eff. October 1, 2017.*
7

8 **10A NCAC 09 .1703 is proposed for amendment as follows:**

9
10 **10A NCAC 09 .1703 ON-GOING REQUIREMENTS FOR FAMILY CHILD CARE HOME**
11 **OPERATORS**

12 (a) After receiving a license, family child care home operator shall:

- 13 (1) Update the health questionnaire annually. The Division may request an evaluation of the operator's
14 emotional and physical fitness to care for children when there is reason to believe that there has
15 been a deterioration in the operator's emotional or physical fitness to care for children. This request
16 may be based upon factors such as observations by the director or center staff, reports of concern
17 from family, reports from law enforcement or reports from medical personnel. The Division may
18 require the operator to obtain written proof that he or she is free of active tuberculosis when the
19 Division determines that the operator was exposed to a person with active tuberculosis;
- 20 (2) Renew First Aid training on or before expiration of the certification appropriate for the ages of
21 children in care;
- 22 (3) Renew CPR course on or before the expiration of the certification appropriate for the ages of
23 children in care;
- 24 (4) Renew ITS-SIDS training every three years from the completion of previous ITS-SIDS training;
25 and
- 26 (5) Complete Recognizing and Responding to Suspicions of Child Maltreatment training within 90 days
27 of licensure. This training shall count toward requirements set forth in Paragraph (d) of this Rule.
28 Recognizing and Responding to Suspicions of Child Maltreatment training is available at
29 <https://www.preventchildabusenc.org/>.

30 (b) Family child care home operators, additional caregivers and substitutes ~~and staff members~~ shall complete health
31 and safety training within one year of employment. Any family child care home operator or staff member who has
32 completed the health and safety trainings as a result of prior employment and can show proof of completion, shall not
33 be required to repeat the health and safety trainings, except as required by 10A NCAC 09 .1703. Any family child
34 care home operator, additional caregiver or substitute who has completed some, but not all, trainings due to prior
35 employment or as part of the ongoing training requirements set forth in 10A NCAC 09 .1703(d)(2), and can provide
36 proof of completion, shall not be required to repeat the courses already completed, except as required by .1703. unless
37 the operator or staff member has completed the training within the year prior to beginning employment or within the

~~year prior to receiving a license.~~ Health and safety training shall be in addition to orientation topics reviewed during the pre-licensing visit and new staff orientation requirements set forth in Rules ~~.1702(d) and .1729(c)~~ of this Section. The following persons shall be exempt from this requirement: service providers such as speech therapists, occupational therapists and physical therapists.

~~(1) service providers such as speech therapists, occupational therapists, and physical therapists; and~~

~~(2) substitutes who provide services for less than 10 days in a 12 month period.~~

(c) The health and safety training shall include the following topic areas:

- (1) Prevention and control of infectious diseases, including immunization;
- (2) Administration of medication, with standards for parental consent;
- (3) Prevention of and response to emergencies due to food and allergic reactions;
- (4) Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic;
- (5) Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event;
- (6) Handling and storage of hazardous materials and the appropriate disposal of biocontaminants;
- (7) Precautions in transporting children, if applicable;
- (8) Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment;
- (9) CPR and First Aid training as required in Rule .1102(c) and (d) of this Chapter;
- (10) Recognizing and reporting child abuse, child neglect, and child maltreatment; and
- (11) Prevention of sudden infant death syndrome and use of safe sleeping practices.

(d) After the first year of employment, the family child care home operator, and staff who work with children shall complete on-going training activities as follows:

(1)

Education and Experience	Required Training
Four-year degree or higher advanced degree in a child care related field of study from a regionally accredited college or university	5 clock hours
Two-year degree in a child care related field of study from a regionally accredited college or university, or persons with a North Carolina Early Childhood Administration Credential	8 clock hours
Certificate or diploma in a child care related field of study from a regionally accredited college or university, or persons with a North Carolina Early Childhood Credential	10 clock hours
10 years documented experience as a teacher, director, or caregiver in a licensed child care arrangement	15 clock hours
If none of the other criteria in this chart apply	20 clock hours

- (2) complete health and safety training as part of on-going training so that every five years, all the topic areas set forth in Paragraph (c) of this Rule will have been covered;

- (3) cardiopulmonary resuscitation (CPR) and First Aid training shall not be counted toward meeting annual on-going training activities in Subparagraph (d)(1) of this Rule;
- (4) any staff working less than 40 hours per week may choose to complete on-going training requirements as outlined in Paragraph (d)(1) of this Rule or the training requirement may be prorated as follows:

WORKING HOURS PER WEEK	CLOCK HOURS REQUIRED
0-10	5
11-20	10
21-30	15
31-40	20

(e) For purposes of this Rule, "regionally accredited" means a college or university accredited by one of the following accrediting bodies:

- (1) Middle States Association of Colleges and Schools;
- (2) New England Association of School and Colleges;
- (3) North Central Association of Colleges and Schools;
- (4) Northwest Accreditation Commission;
- (5) Southern Association of Colleges and Schools; or
- (6) Western Association of Schools and Colleges.

(f) For every three hours of countable technical assistance provided, one hour may be counted toward annual training requirements set forth in Subparagraph(d)(1) of this Rule, not to exceed 50 percent of the total required so long as:

- (1) the family child care home has a 3-5 star rated license; and
- (2) the participating operator or staff member has earned at least 18 semester hours in early childhood education.

(g) For purposes of this Rule, "countable technical assistance" means technical assistance provided to operator or caregiving staff members at a family child care home by a person who has been endorsed by the NC Institute for Child Development Professionals as a technical assistance provider and shall include:

- (1) a cycle of observation;
- (2) identified goals based on the observation;
- (3) a timeline for completion of identified goals;
- (4) evaluation and feedback for each participant;
- (5) technical assistance time in the family child care home; and
- (6) one-on-one consultation with each participant at a time when they are not responsible for a child or group of children.

(h) A combination of college coursework, Continuing Education Units (CEU's), clock hours, or countable technical assistance shall be used to complete the requirements in Subparagraph (d)(1) of this Rule.

(i) The family child care home operator and staff members shall complete a professional development plan within one year of employment and at least thereafter. The plan shall:

- (1) document the individual's professional development goals;
- (2) be appropriate for the ages of children in their care;
- (3) include the continuing education, coursework or training needed to meet the individual's planned goals;
- (4) be completed by the operator and staff member in a collaborative manner; and
- (5) be maintained in their personnel file.

Sample professional development plan templates may be found on the Division's website at http://ncchildcare.nc.gov/providers/pv_provideforms.asp. Another form may be used other than the sample templates provided by the Division as long as the form includes the information set forth in this Rule.

(j) Each family child care home operator shall have a record of training activities in which each staff member participates, including copies of training certificates or official documentation provided by the trainer. That record shall include the subject matter, topic area in G.S. 110-91(11), training provider, date provided, hours, and name of staff who completed the training. This documentation shall be on file and current.

(k) Each family child care home operator shall have a record of countable technical assistance in which the operator and each staff member participates, including copies of documentation, observations and evaluations provided by the person who has been endorsed by the NC Institute for Child Development Professionals as a technical assistance provider. That record shall include the dates and times of technical assistance with the operator or staff, names of all participating staff members and the name of the technical assistance provider. This documentation shall be on file and current.

(l) The family child care home operator and staff members may meet on-going training requirements by attending child-care workshops, conferences, seminars, or courses, provided each training activity satisfies the following criteria:

- (1) Prior approval from the Division shall not be required for training offered by a college or university with nationally recognized regional accreditation, a government agency, or a state, or international professional organization or its affiliates, provided the content complies with G.S. 110-91(11). Government agencies or state or national professional organizations who provide training shall submit an annual training plan for review by the Division. The plan is not required for any state, national, or international conferences sponsored by a professional child care organization.
- (2) Prior approval from the Division shall be required for any agencies, organizations, or individuals not specified in Subparagraph (1) of this Paragraph who wish to provide training for child care operators and staff. To obtain such approval, the agency, organization, or individual shall:
 - (A) complete and submit on-going training approval forms provided by the Division 15 business days prior to the training event that includes the name and qualifications of the trainer, name of training, target audience and content of the training;

- (B) submit a training roster, to the Division, listing the attendees' name, the county of employment, and day time phone number no later than 15 days after the training event;
- (C) provide training evaluations to be completed by attendees; and
- (D) keep the training rosters and evaluations on file for two years.
- (3) Distance learning shall be permitted from trainers approved by the Division or offered by an accredited post-secondary institution, as listed on the United States Department of Education's Database of Accredited Post-Secondary Institutions and Programs at <http://ope.ed.gov/accreditation/>. Distance learning shall not be permitted for Cardiopulmonary Resuscitation (CPR) and First Aid.
- (m) The Division shall approve training based upon the following factors:
- (1) the trainer's education, training, and experience relevant to the training topic;
- (2) content that is in compliance with G.S. 110-91(11); and
- (3) contact hours for the proposed content and scope of the training session.
- (n) The Division shall deny approval of training to:
- (1) Agencies, organizations, or individuals not meeting the standards listed in this Rule and in G.S. 110-91(11); and
- (2) Agencies, organizations, or individuals who intentionally falsify any information submitted to the Division.
- (o) Agencies, organizations, or individuals who intentionally falsify any information submitted to the Division pursuant to this Rule shall be permanently ineligible to apply for approval of training.
- (p) Denial of approval of training or a determination of falsification is appealable pursuant to G.S. 110-94 and the North Carolina Administrative Procedure Act, G.S. 150B-23.

History Note: Authority G.S. 110-85; 110-88; 110-91; 143B-168.3;
Eff. January 1, 1986;
Amended Eff. July 1, 2015; July 1, 2008; May 1, 2004; July 1, 1998; November 1, 1989; January 1, 1987;
Temporary Amendment Eff. September 23, 2016;
Readopted Eff. October 1, 2017 (Transferred from 10A NCAC 09 .1705);
Amended Eff. February 1, 2021.

10A NCAC 09 .1729 is proposed for amendment as follows:

**10A NCAC 09 .1729 ADDITIONAL CAREGIVER AND SUBSTITUTE PROVIDER
QUALIFICATIONS**

- (a) An individual who provides care for five hours or more in a week during planned absences of the family child care home operator shall:

- (1) be 21 years old;
- (2) have a high school diploma or GED;
- (3) have completed a First Aid and cardiopulmonary resuscitation (CPR) course within 12 months prior to caring for children;
- (4) have completed a health questionnaire;
- (5) have proof of negative results of a tuberculosis test or screening completed within 12 months prior to the first day of providing care;
- (6) have submitted criminal background check forms as required in Rule .2703 of this Chapter;
- (7) have documentation of annual on-going training as described in Rule .1703(d) of this Section after the first year of employment;
- (8) have completed ITS-SIDS training, if licensed to care for infants;
- (9) have completed Recognizing and Responding to Suspensions of Child Maltreatment training; and
- (10) have documentation that the operator has reviewed the requirements found in this Chapter, including the Emergency Preparedness and Response Plan, and in G.S. Chapter 110, Article 7.

While the individual provides care at a family child care home, copies of information required by Subparagraphs (1) through (10) of this Paragraph shall be on file in the home and available for review by the Division.

(b) An individual who provides care for less than five hours in a week during planned absences of the operator shall be literate and meet all requirements listed in Paragraph (a) of this Rule except the requirements for annual training and a high school diploma or GED.

(c) The operator shall conduct 16 hours of orientation with all caregivers, prior to the individual caring for children, including substitute providers, volunteers, and uncompensated providers, who are providing care. The orientation shall include an overview of the following topics, specifically focusing on the operation of the facility:

- (1) recognizing, responding to, and reporting child abuse, neglect, or maltreatment pursuant to G.S. 110-105.4 and G.S. 7B-301;
- (2) Overview of child development, including the five major domains of learning: Approaches to Play and Learning, Emotional and Social Development, Health and Physical Development, Language and Development and Communications, and Cognitive Development;
- ~~(2)~~(3) review of the home's operational policies, including the written plan of care, safe sleep policy, the transportation policy, identification of building and premises safety issues, the emergency medical care plan, and the Emergency Preparedness and Response Plan;
- ~~(3)~~(4) adequate supervision of children in accordance with Rule .1711(a) of this Section;
- ~~(4)~~(5) information regarding prevention of shaken baby syndrome, abusive head trauma, and child maltreatment;
- ~~(5)~~(6) prevention and control of infectious diseases, including immunization;
- ~~(6)~~(7) firsthand observation of the home's daily operations;
- ~~(7)~~(8) instruction regarding assigned duties;
- ~~(8)~~(9) instruction in the maintenance of a safe and healthy environment;

- (9)(10) instruction in the administration of medication to children in accordance with Rule .1720(b) of this
Section;
(10)(11) review of the home's purposes and goals;
(11)(12) review of G.S. 110, Article 7 and 10A NCAC 09;
(12)(13) review of ~~Section .2800 of this Chapter~~ Quality Rating Improvement System standards if the
operator has a two- through five- star license at the time of employment;
(13)(14) an explanation of the role of State and local government agencies in the regulation of child care,
their impact on the operation of the center, and their availability as a resource;
(14)(15) an explanation of the individual's obligation to cooperate with representatives of State and local
government agencies during visits and investigations;
(15)(16) prevention of and response to emergencies due to food and allergic reactions; and
(16)(17) review of the home's handling and storage of hazardous materials and the appropriate disposal of
biocontaminants.

The operator and individual providing care shall sign and date a statement that attests that this review was completed.
This statement shall be kept on file in the home and available for review by the Division.

(d) An individual who provides care during unplanned absences of the operator, such as medical emergencies, shall
be 18 years old and submit criminal records check forms as required in Rule .2703(j) of this Chapter. The children of
an emergency caregiver shall not be counted in the licensed capacity for the first day of the emergency caregiver's
service.

(e) After the first year of employment, additional caregivers and substitutes shall complete ongoing training as
outlined in rule .1703.

*History Note: Authority G.S. 110-85; 110-88; 110-91; 143B-168.3;
Eff. October 1, 2017;
Amended Eff. February 1, 2021; March 1, 2019.*

SECTION .2100 - RELIGIOUS-SPONSORED CHILD CARE CENTER REQUIREMENTS

10A NCAC 09 .2101 is proposed for amendment as follows:

10A NCAC 09 .2101 CENTERS OPERATING UNDER G.S. 110-106

(a) At least 30 days prior to the first day of operation of a new religious-sponsored child care center, the prospective
operator shall send a "Letter of Intent to Operate" to the Division. That letter shall include the following:

- (1) the name, address, and telephone number of the operator and the center, if known;
- (2) the proposed number and age range of children to be served;
- (3) the center's scheduled opening date; and

(4) required criminal history records check documentation for the prospective operator and all known staff members as set forth in G.S. 110-90.2.

A representative of the Division shall contact the prospective operator no later than seven calendar days after the Letter of Intent is received to advise the prospective operator of the applicable requirements and procedures in G.S. 110, Article 7 and this Chapter.

(b) A prospective operator who has not previously operated a religious-sponsored child care center in North Carolina shall attend a pre-licensing workshop provided by the Division before the center's opening date. Prospective operators shall download, complete, and submit the pre-licensing registration form to the Division. The Division provides regularly scheduled pre-licensing workshops for potential operators. A schedule of these workshops may be found online at

https://ncchildcare.ncdhhs.gov/Portals/0/documents/pdf/P/Prelicensing_Workshops_Child_Care_Centers.pdf?ver=2019-06-05-112026-907. The pre-licensing registration form contains demographic information and workshop location preferences. The pre-licensing registration form can be found online at https://ncchildcare.ncdhhs.gov/Portals/0/documents/pdf/P/Prelicensing_Workshops_Child_Care_Centers.pdf?ver=2019-06-05-112026-907.

(c) The Division shall conduct an announced pre-licensing visit prior to the opening of the center, an unannounced visit within 30 days after the facility opens, and unannounced visits annually thereafter in order to ensure compliance with applicable requirements in G.S. 110, Article 7 and this Section.

(d) Within 30 days of opening, the prospective operator shall submit reports indicating that the facility meets the minimum standards for facilities as specified in G.S. 110-91 regarding local ordinances, including a building inspection, a fire inspection, and a sanitation inspection.

(e) The Division shall send a Notice of Compliance letter to the prospective operator when compliance with minimum standards for facilities as specified in G.S. 110, Article 7 has been determined. The Notice of Compliance letter shall be issued instead of a star rated license. The Notice of Compliance is not required to be posted at the child care facility.

(f) Religious-sponsored child care centers shall comply with all child care center requirements in this Chapter except as follows:

Age Appropriate Activities	Rules .0508, through .0510, <u>.0513 through .0516</u> and .2508
Staff Qualifications and Training Requirements	Rules .0703(c) through (f), .0704, .0710, .0711, .0714(a) through (d) and .1101, .1102(a), (b), (e), and (g), and .1103 through .1106. <u>For programs enrolled in the Subsidized Child Care Assistance Program, the exemption related to Rules .1101, .1102, and .1103(b) do not apply and the requirements must be met.</u>

Staff Qualifications if working with school aged children only	Rule .2510
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Compliance shall be documented annually using the same forms and in the same manner as for all other centers.

(g) The Division shall notify the prospective operator in writing as to whether the facility complies or does not comply with the requirements.

History Note: Authority G.S. 110-85; 110-88; 110-106; 143B-168.3;

Eff. January 1, 1986;

Amended Eff. August 1, 2011; April 1, 2001; April 1, 1992; January 1, 1991; November 1, 1989;

July 1, 1988;

Readopted Eff. October 1, 2017;

Amended Eff. September 1, 2109.

