REPORT OF THE CHILD DAY CARE COUNCIL

Impact of Proposed Revisions to the Minimum Standards for Licensed Child Day-Care Centers in Virginia

TO THE GOVERNOR AND
THE GENERAL ASSEMBLY OF VIRGINIA



HOUSE DOCUMENT NO. 36

COMMONWEALTH OF VIRGINIA RICHMOND 2005



COMMONWEALTH OF VIRGINIA Child Day-Care Council

January 12, 2005

TO: The Honorable Mark R. Warner

and

The General Assembly of Virginia

Report Mandate

This report is submitted pursuant to House Resolution 18 (HR 18), passed by the House of Delegates during the 2004 General Assembly. House Resolution 18 requires the Child Day-Care Council (Council) to review the impact of proposed revisions to the Minimum Standards for Licensed Child Day Centers (22 VAC 15-30) on providers and families. The resolution requests that implementation of revised standards pertaining to staff-to-child ratios, educational requirements, square footage and group size be delayed until July 1, 2005. Further, HR 18 requires the Council to report on progress in meeting the request of the resolution, no later than the first day of the 2005 Regular Session of the General Assembly. A copy of HR 18 is included as Attachment A.

Review of Impact by Council

The Council carefully considered the impact of proposed changes to 22 VAC 15-30 in three separate arenas: prior to the Notice of Intended Regulatory Action, following the 60-day public comment period, and in response to legislative action. The Council's efforts to assess the impact of the changes are addressed below.

In October 2000, the Council sent a survey on the child care center regulation to approximately 2,600 child day center operators and licensing staff concerned with these programs. Three hundred and seventy-one surveys were returned representing 440 licensed centers and licensing staff. The survey was conducted to prepare for the required periodic review due in 2001. Indications that the regulation should be revised were based on comments from the survey, comments received during the periodic review public comment period, and comments received during the 30-day public comment period for the Notice of Intended Regulatory Action. Revisions were also based on comments the Council received on the regulation since its last effective date, feedback from issues encountered during technical assistance, new developments in research, and feedback from regional licensing staff. The

Report on Child Care Regulation January 12, 2004 Page 2

Council adopted a final regulation in May 2004, and in doing so, made changes to some provisions from the proposed regulation to the final. The final regulation is currently pending with the Governor.

When the proposed child care regulation was published for public comment, over 3,000 comments were received and reviewed. In addition, the Council held public comment periods during meetings, all of which were heavily attended. In adopting the final regulation, Council members spent many hours considering the public comment, applicable research and current practice. Their deliberations focused most intensely on the proposed changes to staff-to-child ratios, educational requirements, square footage and group size, and the impact of these changes on providers, parents and children. The information in Attachment B represents a culmination of the Council's review, as it considered the impact of proposed changes. For each key proposed changed, the Council considered a comparison of Virginia to other states, current research, impact analyses, public comments, recommendations, and options.

In addition to the Council's review of the proposed regulation, the Joint Legislative Audit and Review Commission (JLARC) was directed by the 2004 General Assembly to study and report on the impact of changes to the regulation on parents, providers and children. Staff from JLARC reported their findings to the Commission on September 13, 2004. The JLARC report, "Special Report: Impact of Proposed Child Day Care Regulations in Virginia (September 2004)" is available at http://jlarc.state.va.us/Meetings/September04/DayCare.pdf.

Implementation Schedule

The resolution requests that implementation of revised standards pertaining to staff-to-child ratios, educational requirements, square footage and group size be delayed until July 1, 2005. In voting on a final regulation in May 2004, the Council adopted a gradual implementation schedule for most of these provisions, in response to public comments. In the final regulation, the Council voted to strike proposed standards for maximum group size, keeping group size unregulated. Attachment C provides the implementation schedule for the remaining relevant provisions.

The Child Day Care Council took action on this report on November 18, 2004.

Respectfully submitted,

Gail Johnson

Chairman

c: Maurice A. Jones, Commissioner

Attachment A House Resolution No. 18 2004 General Assembly

House Resolution No. 18

Requesting the Child Day-Care Council to review the impact of proposed revisions to the Minimum Standards for Licensed Child Day Centers on providers and families, and to defer the implementation of the provisions of such revised regulations pertaining to staff-to-child ratios, educational requirements, square footage, and group size until July 1, 2005. Report.

Agreed to by the House of Delegates, March 11, 2004

WHEREAS, child-care services in Virginia represent a vital part of the human services spectrum; and

WHEREAS, the regulation of child-care services is important to the health and safety of children enrolled in such programs; and

WHEREAS, the Department of Social Services noted in its report, A Study of the Quality Affordability and Accessibility of Child Care in the Commonwealth of Virginia, Senate Document 4 (2000), that 95 percent of parents are satisfied with the quality of child-care services, and that Virginia enjoys low staff turnover and a stable workforce in child care; and

WHEREAS, the Department's report stated, "This study finds no discernible failure in the market for child-care services in Virginia. The market for child-care services in Virginia appears to be highly competitive with producers showing considerable sensitivity to consumer (parent's) preferences. The market for child-care services in Virginia functions efficiently for households with children age six and under"; and

WHEREAS, the reported findings clearly do not lend support for wide-scale policy initiatives for the child-care market in Virginia; and

WHEREAS, the Child Day-Care Council has proposed regulations that may reduce capacity in licensed child care settings statewide and significantly raise the cost to parents; and

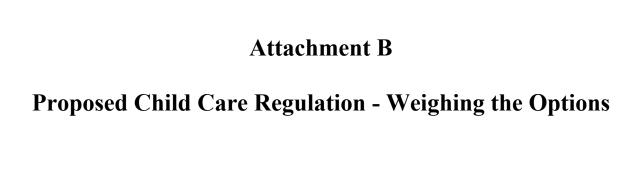
WHEREAS, the Child Day-Care Council's proposed regulation, 22 VAC 15-30-230, establishes the requirements for the child development credential and those requirements are clearly the accreditation standards of one national professional child care organization; and

WHEREAS, the Child Day-Care Council's proposed regulation, 22 VAC 15-30-230, appears to be in conflict with § 63.2-1734 of the Code of Virginia, which stipulates that "such regulations shall not require the adoption of a specific teaching approach or doctrine or require the membership, affiliation or accreditation services of any single private accreditation or certification agency"; now, therefore, be it

RESOLVED by the House of Delegates, That the Child Day-Care Council be requested to review the impact of proposed revisions to the Minimum Standards for Licensed Child Day Centers on providers and families, and to defer the implementation of the provisions of such

revised regulations pertaining to staff-to-child ratios, educational requirements, square footage, and group size until July 1, 2005.

The Child Day-Care Council shall submit to the Division of Legislative Automated Systems an executive summary and report of its progress in meeting the requests of this resolution no later than the first day of the 2005 Regular Session of the General Assembly. The executive summary and report shall be submitted as provided in the procedures of the Division of Legislative Automated Systems for the processing of legislative documents and reports and shall be posted on the General Assembly's website.



Proposed CDC Standards

Weighing the

Options



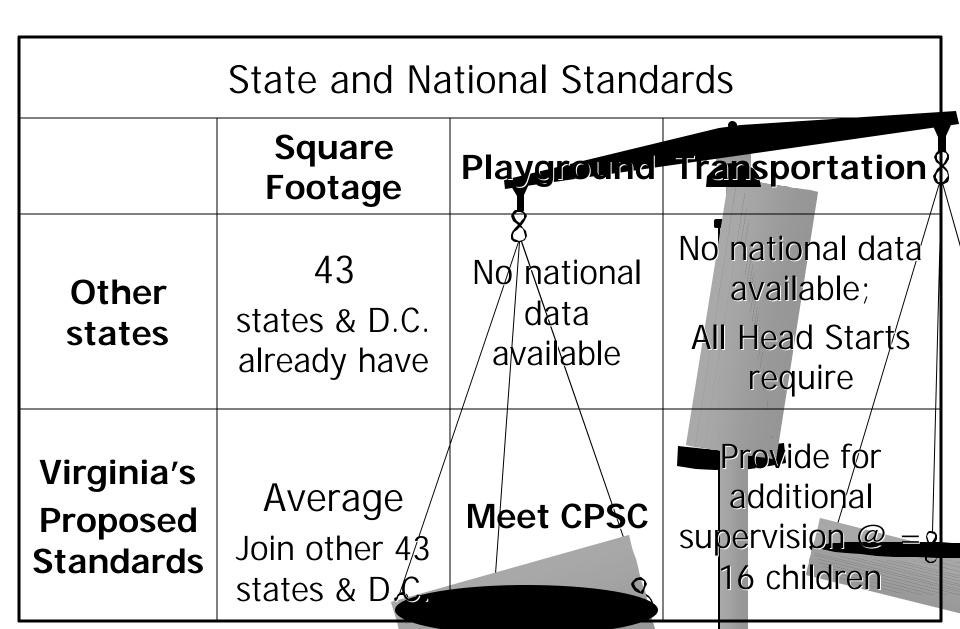
Presentation Overview

- Comparison of Virginia to nation
- Research and review on 7 key proposed standards
- Impact analyses
- Review of Public Comments
- Recommendation and options

Standards Being Addressed

Square Footage ■ Ratios and Group Size ■ Training and Qualifications > Staff > Program Leader > Director Resilient Surfacing (playground) Transportation

State and National Standards			
	Square Footage	Playground	Transportation 8
Other states	43 states & D.C. already have 35 square feet per child	No national data available	No national data available; All Head Starts require
Virginia's Current Standards	Bottom 8	Below CPSC	for additional supervision @ = 0

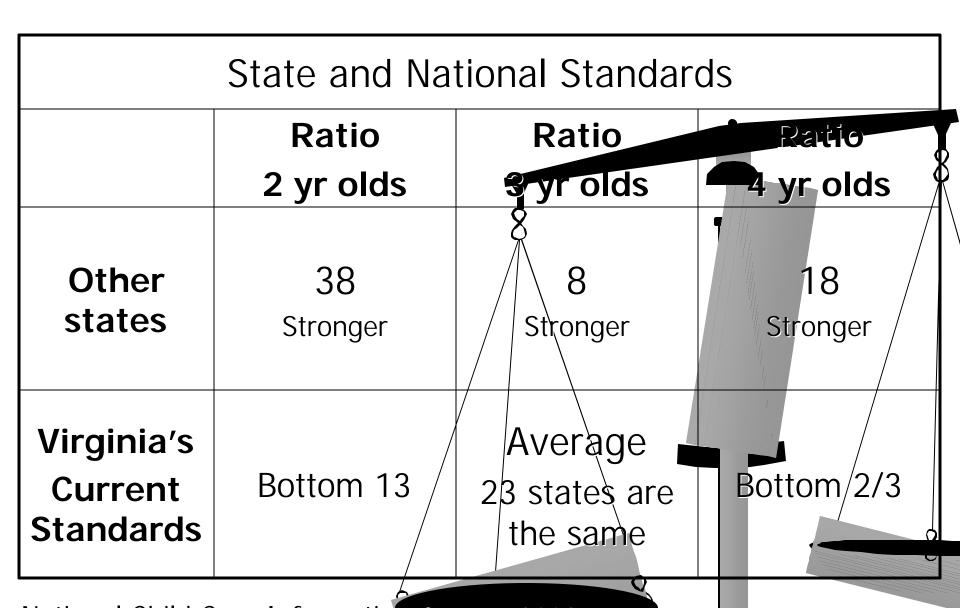


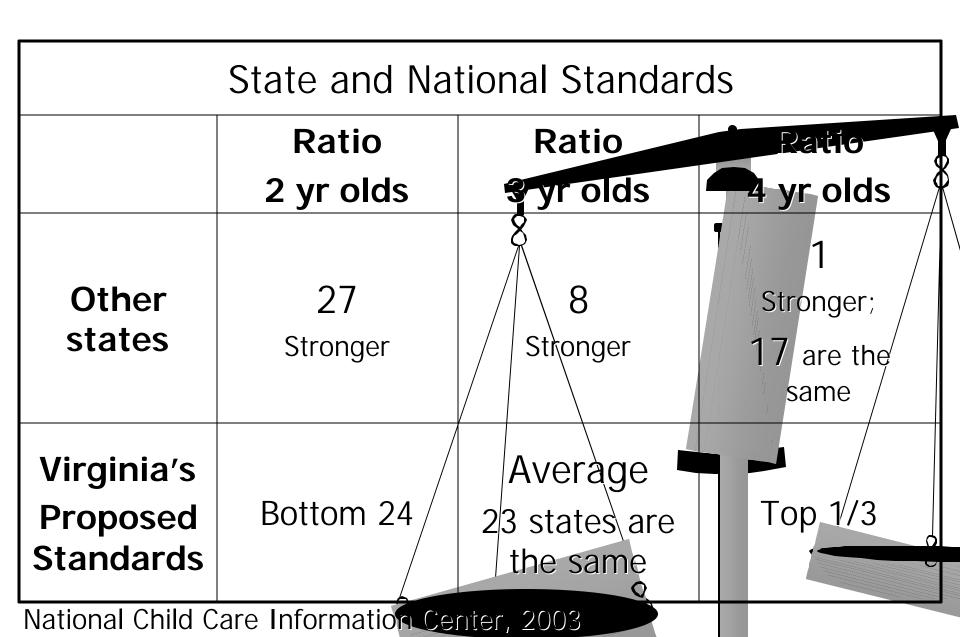
State and National Standards			
	Staff Training	Director Tr <u>aining</u>	Leader Fraining 8
Other states	35 states have stronger	11 states require admin. training beyond pre-service & ongoing training	 11 states require preservice & ongoing; 8 states have = stronger
Virginia's Current Standards	Bottom 15	Average 41 states are the same	Average 43 states are same or lower

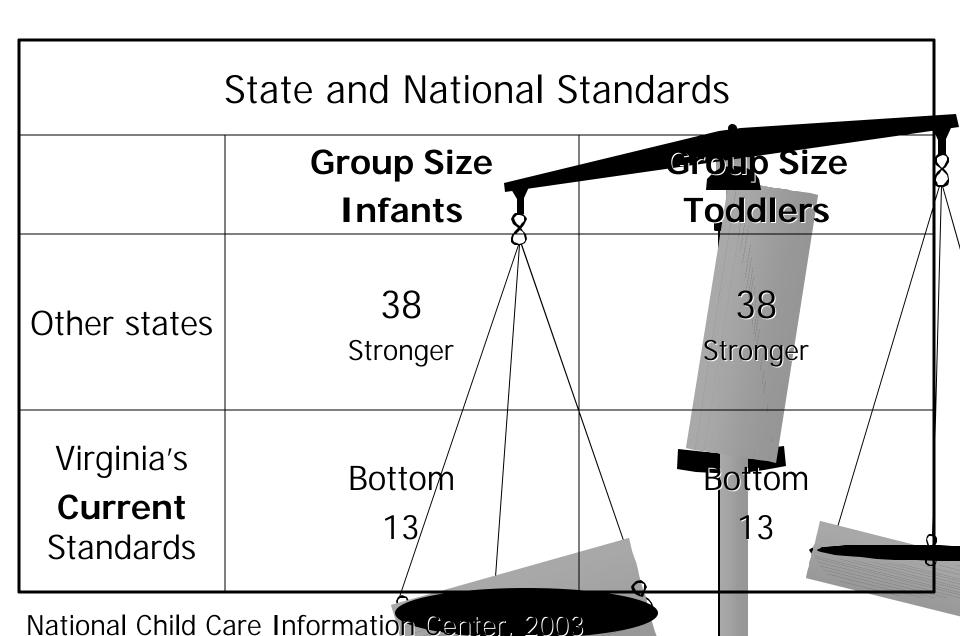
State and National Standards			
	Staff Training	Director Tr <u>aining</u>	Leader
Other states	9 states have stronger	11 states require admin. training beyond pre-service & ongoing training	11 states require pre- service & ongoing; 8 states have = stronger
Virginia's Proposed Standards	Top 10	Top 12	Top_9

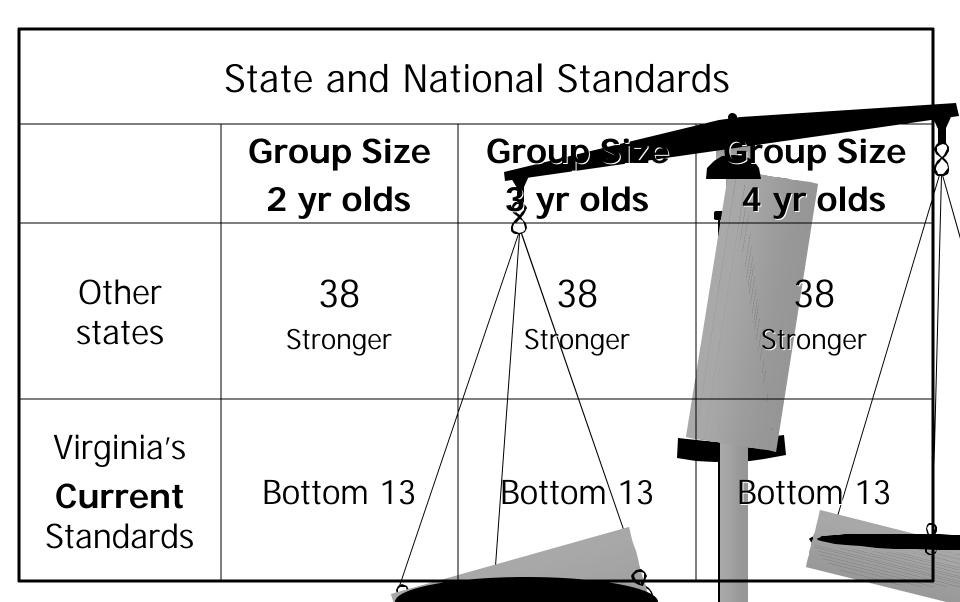
Consumer Product Safety Council; National Child Care Information

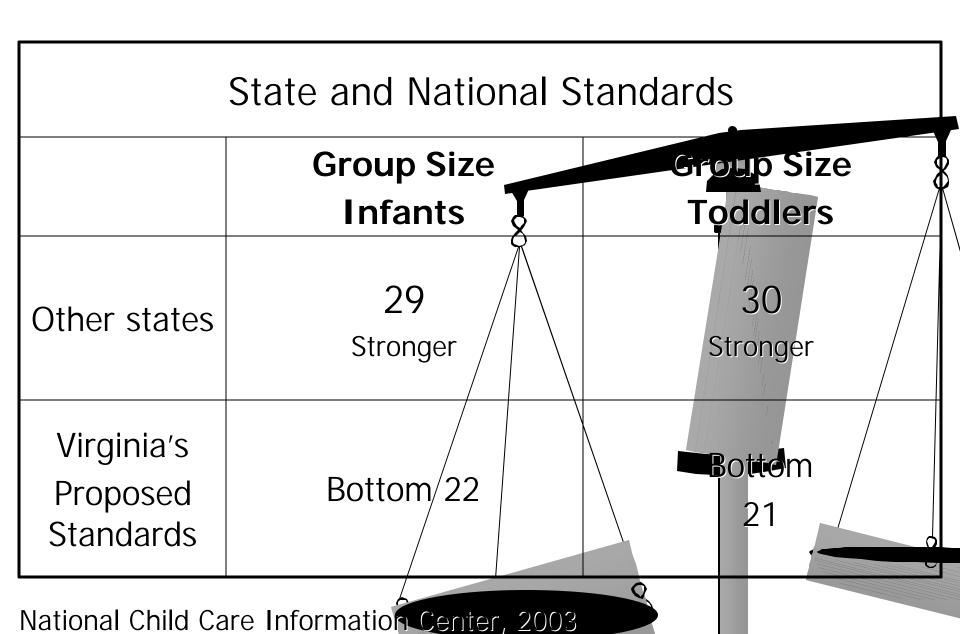
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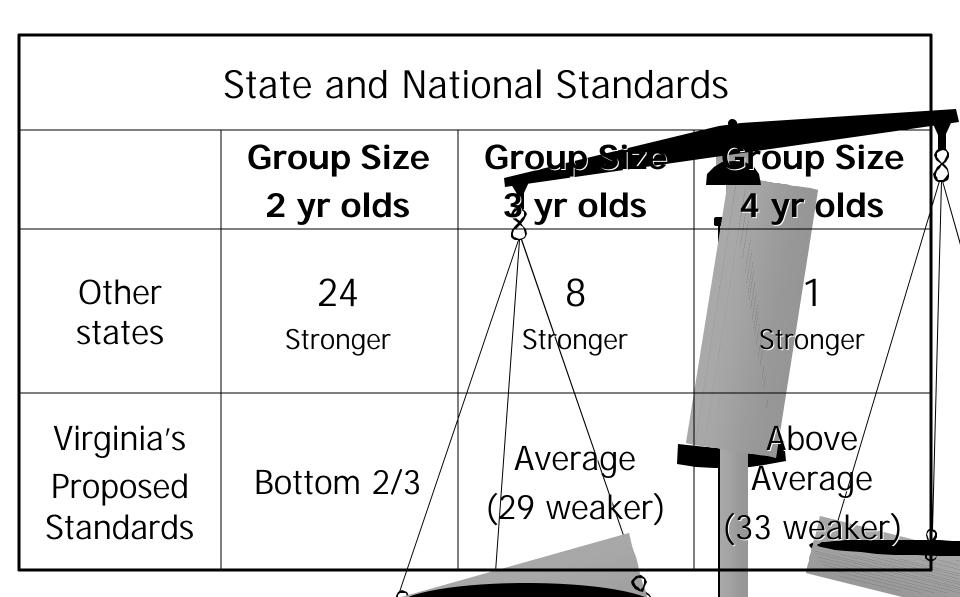




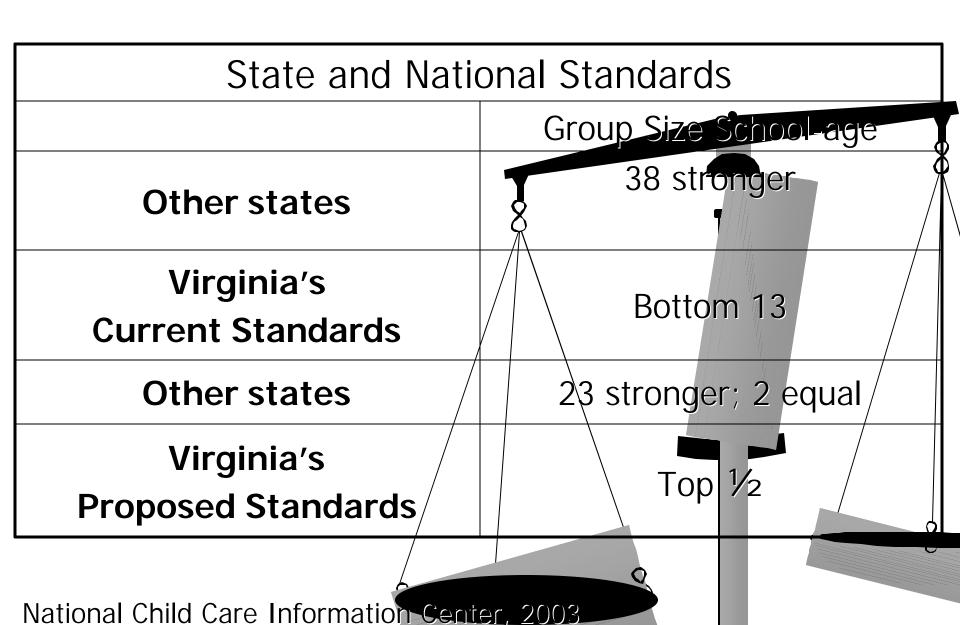








National Child Care Information Center, 2003



Proposed Changes to Standards

Age	Staff-to-child ratios		Group Size
	Current	Proposed	Proposed
0 to 16 mo.	1:4	Ş ame	• 12
16 to 24 mo.	1:5	\$ame	15
2 yrs	1:10	1:8	16
3 yrs	1:10	/ Same	20
4 – 5 yrs	1:12	1:10	20
School-age	1:20	1:18	36
3-6 in BMAG	1:15	1:14	27
Effective Date		Immediate	2 Yrs



- Activity space for children
- Adequate space in child care settings
 - ✓ Reduces children's physiclegical stress reactions
 - Immune system, resistance to illness
 - ✓ Benefits children's social/& behavioral development
 - Reduces confusion, disorder, & discipline problems in classroom
 - ✓ Reduces noise in the classroom
 - Provides privacy, prevents irritation & discomfort
 - Increases participation, cooperation, & constructive behavior

^{*} National Health & Safety Standards recommend = 35 SF per child

Staff-to-child ratios and group sizes

- > Children who experience smaller group sizes and low adult:child ratios...
 - ✓ have larger vocabularie

 §
 - ✓ are better prepared to learn how to read
 - are more likely to experience affectionate, positive attention from their teachers
 - have a greater ability to learn and use new information to solve problems
 - are better able to form friendships, help resolve, conflicts, and comfort or assist another child in difficulty

Staff qualifications and training

- > Enhanced training in child development results in caregivers who are...
 - more sensitive in their interactions with infants and young children
 - more positive in their relationships with children
 - ✓ less detached with children than caregivers/ without child development training
 - ✓ better able to create higher overall quality classroom environments

Staff qualifications and training (continued)

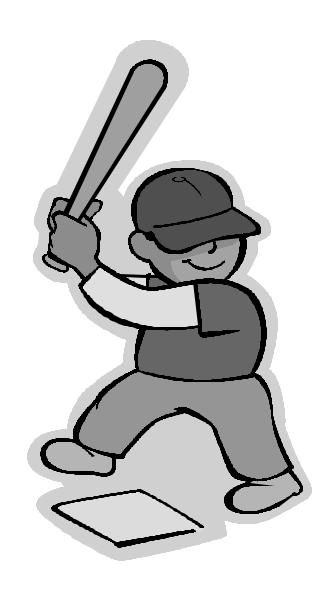
- Children in classrooms with caregivers trained in child development...
 - ✓ have larger vocabularies
 - ✓ are better prepared to begin reading and writing
 - ✓ are better able to get along with others
 - exhibit more socially acceptable behaviors
 - have better shape, object, and concept recognition

Resilient Surfacing

- > Facts:
- ✓ Most common injuries in child care:
 - Playground (51%)
- ✓ Falls from climbing equipment
 - Injuries (18%)
 - Fractures & concussions (53%)
- Most important risk/fa¢tors\for injuries =
 - Lack of adequate resilient surfacing
 - ✓ Height of climbing equipment



Impact Analyses



Virginia Population Projections

	1990 to	2000 to	2010 to	2020 to
	2000	2010	2020	2030
Age Band	% Change	% Change	% Change	% Change
< 5	4.27%	10.22%	9.93%	7.64%
5 to 9	16.70 %	-0/16%	9.48%	8.05%
10-14	24.49 %	/2.51%	9.81%	9.36%

Source: Virginia Employment

Square Footage Research

Sample selection

- Seven geographic regions:
 - Central, Eastern, Fairfax, Piedmont, Verona, Northern, Western

large

• Simple random sample design small 0 - 50 children medium 51 - 100 children

Sample characteristics

- N = 62 child day centers
- Non-Head Start
- Does not conform to more stringent square footage requirements via participation in an accreditation body
- Does not conform to more stringent square footage requirements via governance by a local ordinance

26

101 or more children

Methodology

- Documentation required
 - Maximum capacity at 25 square feet per child (SFR)
 - Total granted licensing capacity at 25 SFPC
 - Most recently documented total enfollment
- Estimated impact on enrollment
 - Calculation of enrollment loss =
 - Total enrollment at 25 SFPC maximum capacity at 35 SFPC
 - Converted to proportion (%)\of enrollment loss
 - Total proportion of child day center sample that would lose at least one child (> 0%)

Methodology (continued)

- Calculation of projected impact on all licensed child day centers in Virginia
 - Total number of licensed child day centers
 - **2587**
 - Total number of Head Start child day centers
 - **188**
 - Total number of child day centers with accreditation standards that meet or exceed 35 SFPC
 - **265**
 - Total number of child day centers in a local ordinance that requires at least 35 SFPC
 - **4**3

Methodology (continued)

 Calculation of projected impact on all licensed child day centers in Virginia Cross-referenced 3 lists for common centers; total is unique ■ Calculated total number/of child day centers found already meeting or exceeding 35 SFPC **496**

29

2009 Projection Square Footage

- The number of centers affected by changing square footage from 25 to 35 per child on enrollment
- Actual licensed centers
- Actual centers that cannot be affected.
- Actual centers that could be affected
- Actual licensed centers

Corrected as of 0.2/20/0.4

- Projected centers unaffected due to enrollment/ [(67.8% of 2091=1417) /+ (496)] - 1913
- Total projected centers affected
 (26% of 2587)

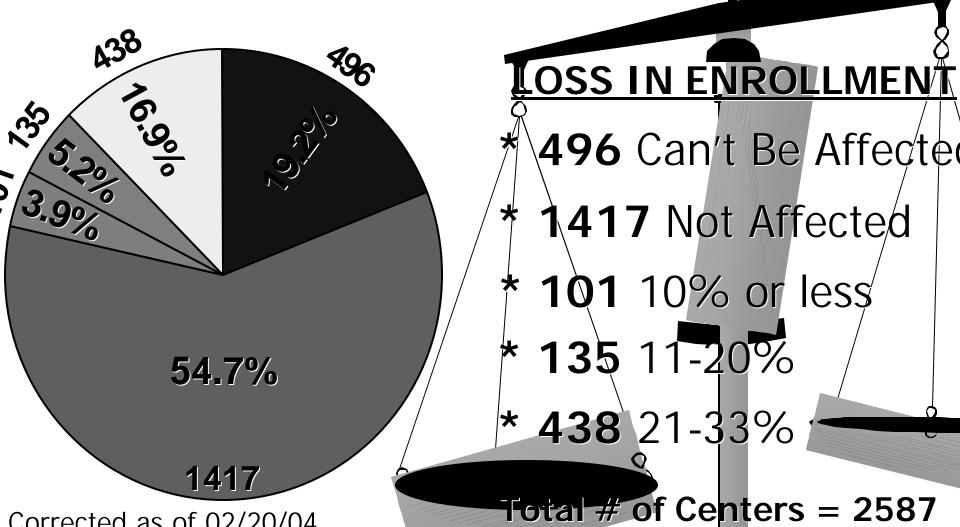
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2097

25/87

2009 Projection Square Footage

74% would not be affected 26% would be affected.



Ratio & Group Research

Sample selection

- Seven geographic regions:
 - Central, Eastern, Fairfax, Piedmont, Verona, Northern, Western

large

 Simple random sample design 0 - 50 children small medium 51 - 100 children 101 or more children

Sample characteristics

- N = 62 child day centers
- Non-Head Start
- Does not conform to more \$tringent ratio or group size requirements via participation in an accreditation body
- Does not conform to more stringent ratio or group size requirements via governance by a local ordinance

Methodology

- Documentation required
 - Total enrollment
 - Ratios of teachers per age group of children
 - Total number of classrooms available and their respective child capacities
- Estimated impact on ratio
 - Calculation of enrollment loss =
 - Current ratio propøsed katio within age grøup
 - Sum of ratio enrollment loss across age groups
 Total enrollment within center
 - Converted to proportion of ratio enrollment loss
 - Total proportion of child day center sample that would be affected by at least a 1% enrollment loss

Methodology (continued)

- Calculation of projected impact on all licensed child day centers in Virginia
 - Total number of licensed child day centers
 - **2587**
 - Total number of Head Start child day centers
 - **188**
 - Total number of child day centers with accreditation standards that meet or exceed proposed ratios
 - **265**
 - Total number of child day centers in a local ordinance that requires meet or exceed proposed ratios
 - **4**3

Methodology (continued)

 Calculation of projected impact on all licensed child day centers in Virginia

Cross-referenced 3 lists for common centers;
 total is unique

 Calculated total number of child day centers found already meeting or exceeding proposed ratios

496

2004 Projection Ratios

- The number of centers affected by changing ratios
- Actual licensed centers
- Actual centers that cannot be affected 496
- Actual centers that could be affected
- Actual licensed centers
- Projected centers unaffected due to ratios change
 - [(92% of 2091) = 1924 + /(496)]
- Total projected centers affected (6.5% of 2587)

Corrected as of 02/20/04

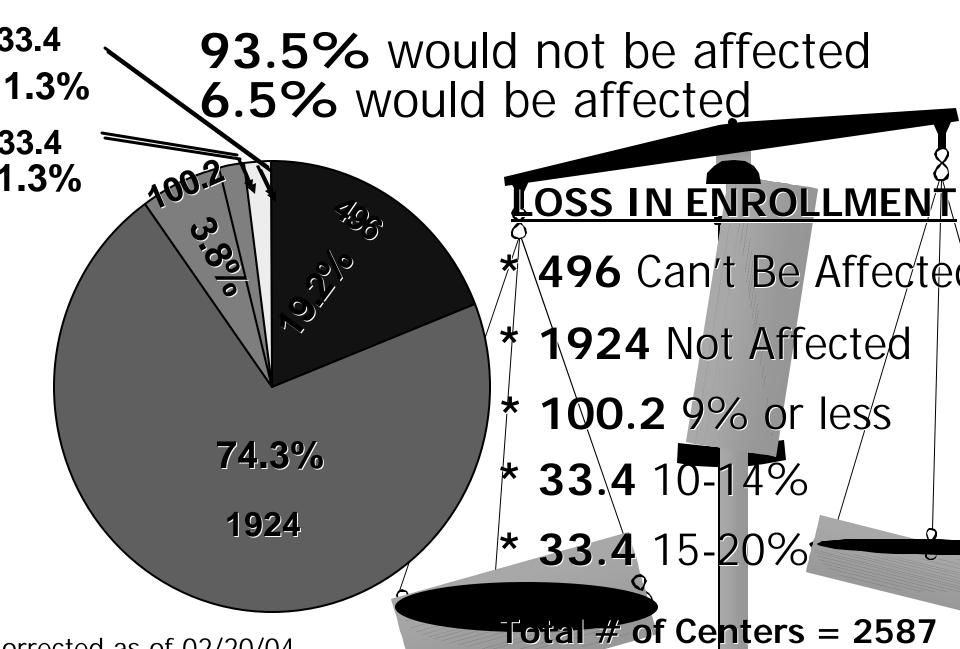
2587

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2587

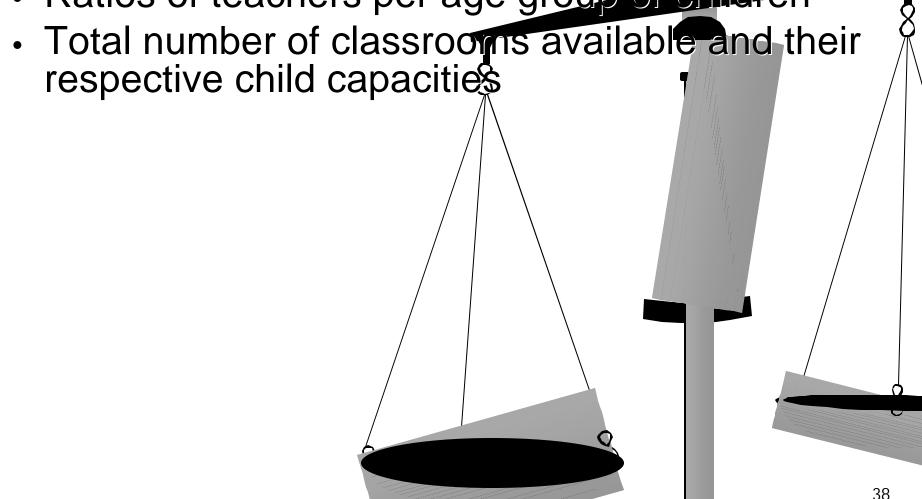
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2004 Projection Ratios



Methodology

- Documentation required
 - Total enrollment
 - Ratios of teachers per age group of children



Methodology

- Estimated impact on group size
 - Calculation of enrollment loss =
 - Number of children per group within classroom 8 and age group – proposed group size within age group
 - Sum group size enrollment loss across age groups
 Total enrollment within center
 - Converted to proportion of group size enrollment loss
 - Total proportion of child day center sample that would be affected by at least a 1% enrollment loss

2004 Projection Group Size

- The number of centers affected by changing group size
- Actual licensed centers
- Actual centers that cannot be affected.
- Actual centers that could be affected
- Actual licensed centers
- Projected centers unaffected due to group size changes [(82.3% of 2091=1720) + (496)]
- Total projected centers affected

(14.3% of 2587)

25/87

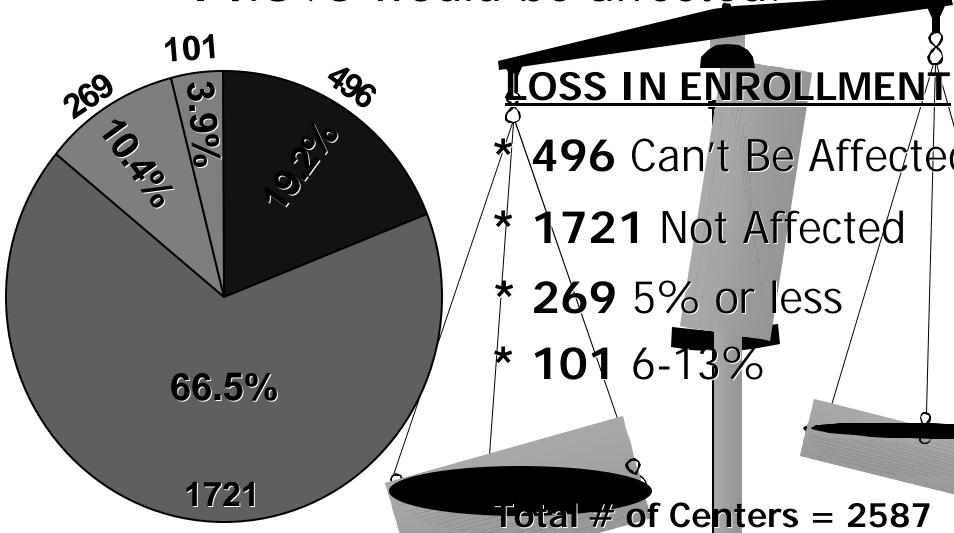
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2097

40

2006 Projection Group Size

85.7% would not be affected 14.3% would be affected.



2006 Projection Ratios & Group Sizes Combined

- Cumulative ratio and group size changes unlikely
- No sample centers were affected by both ratio and group size changes

2004 and 2009 Projections Ratios & Square Footage Combined

- Cumulative ratio and square footage changes unlikely
- 4.8% of centers affected by both ratio and square footage changes
- Losses were not cumulative
- Losses incurred by square footage cancelled out ratio losses

2004 & 2009 Projections Ratios & Square Footage Combined

Sample Center	Square Footage Effects	Ratio Effects	Change Type	Total	8
Α	22%	14%	Not cumulative	22%	
В	6%	5%	Not cumula <u>tiv</u> e	6%	
С	5%	3%	Not cumulative	5%	0

Projected 4.8% of total center

2004 & 2009 Projections Group Size & Square Footage Combined

- Cumulative group size and square footage changes unlikely
- 4.8% of centers affected by both group size and square footage changes
- Losses were not cumulative
- Losses incurred by square footage cancelled out ratio losses

2004 & 2009 Projections Group Size & Square Footage Combined

Sample Center	Square Footage Effects	Group Size * Effects	Change Type	Total
Α	21%	13%	Not cumulative* With a room switch	21%
В	16%	4%	Not\cumulative	16%
С	4%	1%	Not cumulative	4.0%

Projected 4.8% of total centers = 102 centers of 2587

Public Comments



Public Comments

Distribution of Comments Across Letter type						
		Form.	Original Letters	Total 8		
"CON"	Opposed 3-4 specific standards, silent on remainder	92.1%	7.9%	100%		
"PRO"	Supported / standards	28.9%	71.1%	100%		
"SPLIT"	Opposed some standards; supported others	18.5%	81.5%	100%		

48

Public Comments

Distribution of Original Letters							
	Ratio & Group Size	Square Footage	Staff Training	Transportation	Playground	Director Training	Leader Training
Total	49.3	49.3	38.5	3.9	7.2	16.1	8.6
CON	38.3	58.2	21.9	4.6	9.2	6.6	6.1
PRO	72.9	27.1	76.5	1.2	1.2	35.3	/12.9

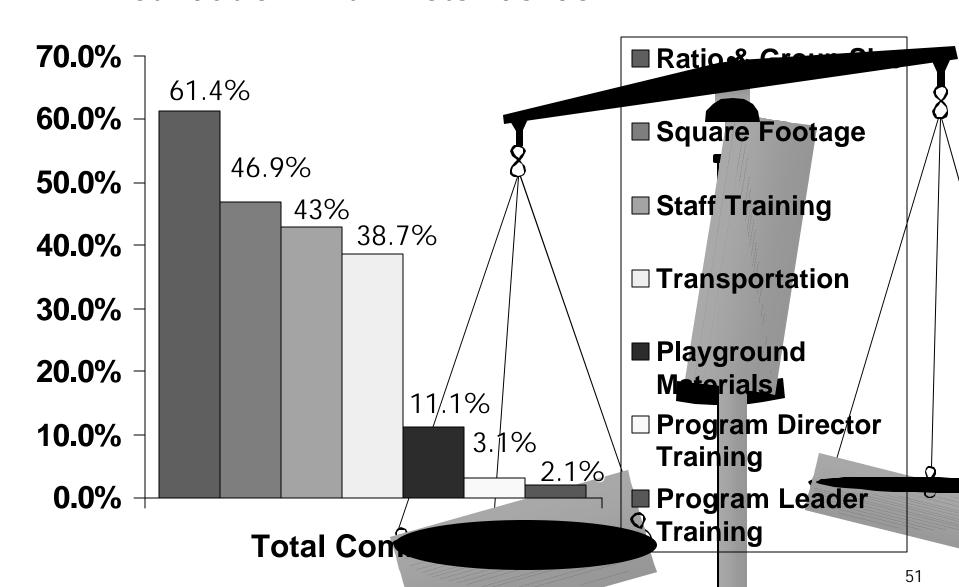
^{*} All numbers listed are percentages of comments that addressed these specific standards

Split Comments

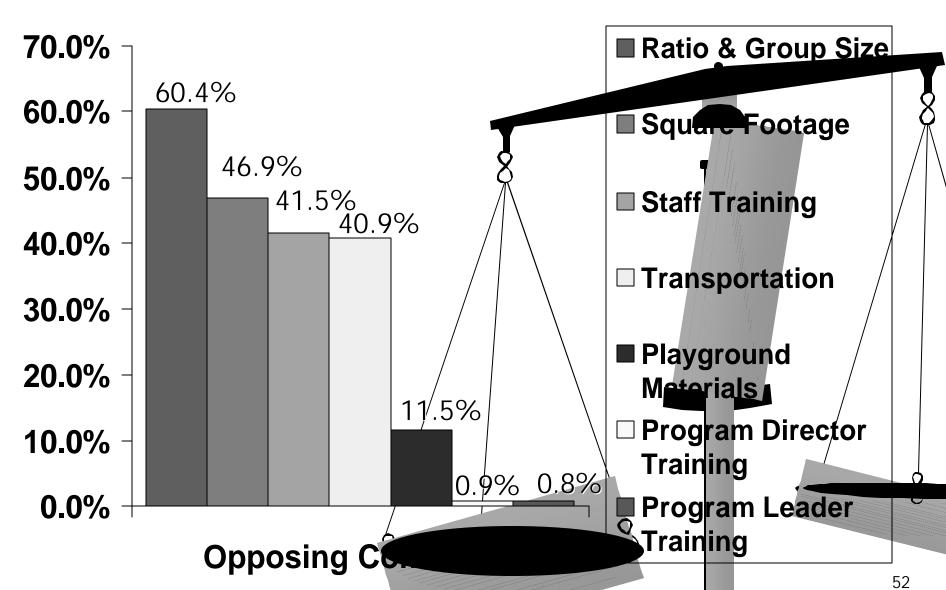
Distribution of Original Letters							
	Ratio & Group Size	Square Footage	Staff Training	Transportation	Playground	Director Training	Leader Training
Total	77.3	59.1	77.3	36.4	45.5	36.4	27/3
CON	31.8	45.4	13.6	/.09	.09	.09	.05
PRO	45.4	13.6	63.6	/27.2	.01	27.2	/.23

^{*} All numbers listed are percentages of comments that addressed these specific standards; additional decimal points were rounded up at .5

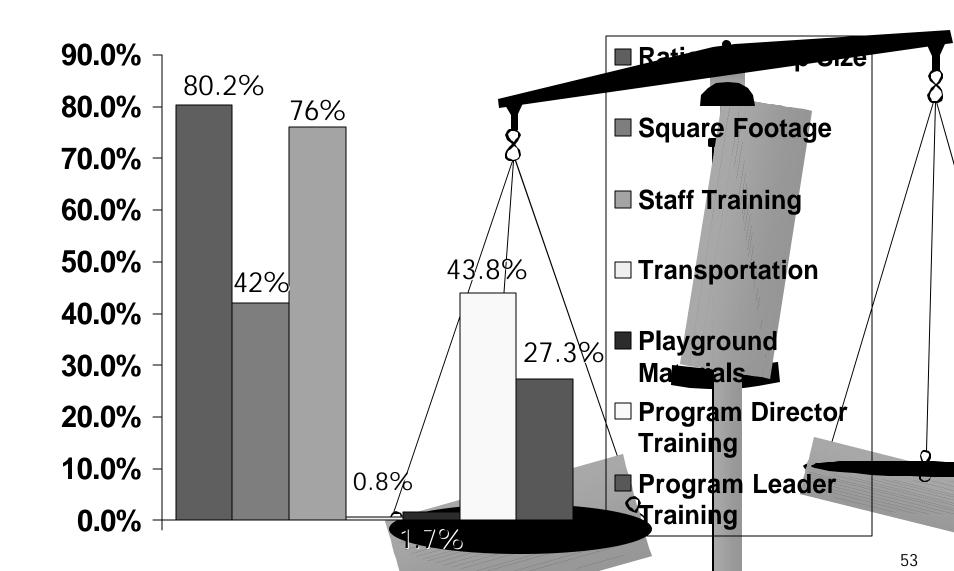
Total Comments



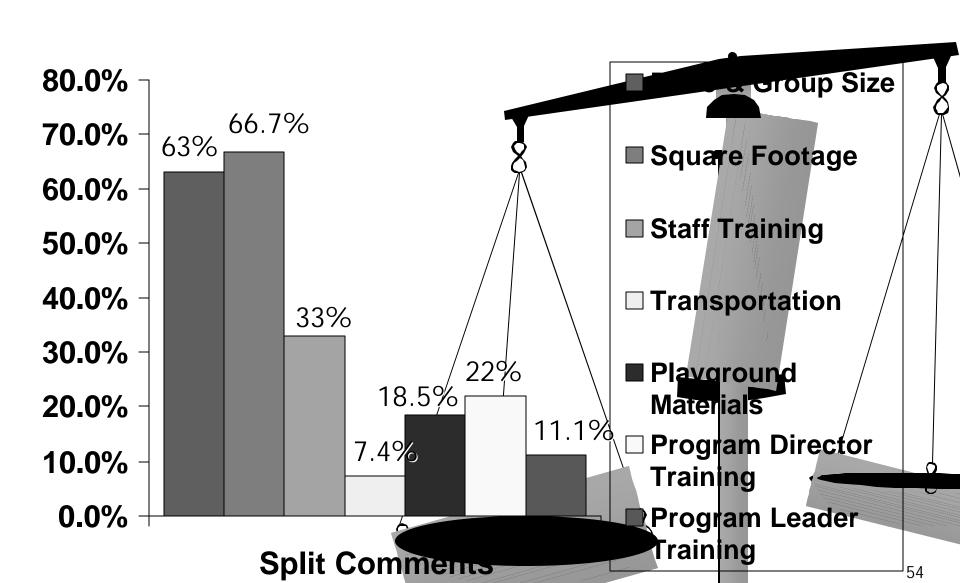
Opposing Comments

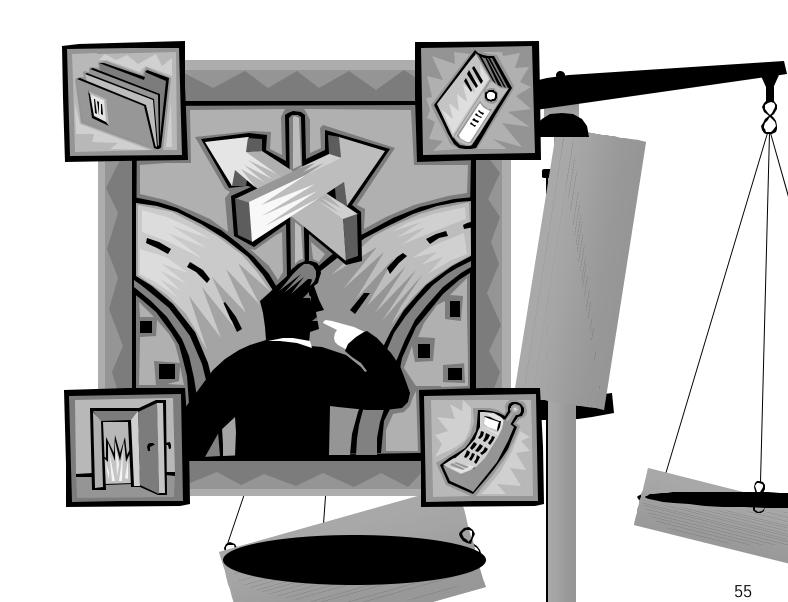


Supporting Comments



Split Comments





How does the Council decide what to adopt?

Suggested Path:

Determine

- What do you already have that you should keep?
- What needs to be amended, consistent with your goal?
 - To promote the health, safety, and long-range well-being of children in child day centers

Where does the Council go from here?

Options for each standard

- Keep proposed standards intact
- Adjust specific provisions
- What will the department do to support you?
 - Provide recommendations and options
 - Draft the final document
 - Provide analysis where needed and requested
 - Other tasks requested

Square footage

- Revise proposed standard:
 - Remove incremental change at 2 yrs
- Other options for consideration:
 - Allow full <u>5 yrs</u> to implement 35 square feet
 - Allow more than 5 yrs to implement 35 square feet
 - Allow 3 yrs and stop at 30\square feet
 - Remove increase in square footage requirement

Ratios and Group Size

- Revise proposed standard:
 - □ Increase BMAG from 27 to 28
 - Specify acceptable group separation methods for multiple groups of children in large, open/ spaces
- Additional options for consideration:
 - □ Delay implementation (1 yr) for ratios |
 - ✓ Keep current ratio 1:20 for 9-12 yr olds

Staff training

- Keep proposed standard as written
- Additional options for consideration:
 - Delay implementation (1) yr)
 - Allow up to 2 hrs of CPR training to count toward annual training
 - Allow parents in cooperative centers to complete 2 hrs of orientation training.

Note: Increased training support by the department to include alternative delivery methods

Program Leader Training

- Keep proposed standard as written
- Additional options for consideration:
 - □ Delay implementation (yr)
 - Lengthen time to meet new standard to 4 yrs

Note: Allows portion of training to be completed via inservice options under qualified trainers

Program Director Training

- Keep proposed standard as written
- Additional options for consideration:
 - Delay implementation (1/yr)
 - Lengthen time to meet hew standard to 4 yrs

Note: Allows portion of training to be completed via alternative delivery methods under qualified trainers

Playground

- Simplify language describing critical height value
- Additional option for consideration:
 - Delay implementation (6 mos.)
 - Require 6" shredded/rubber or approved mats under equipment to eliminate compaction
 - Ban all equipment over 6 ft and keep 6" of any acceptable surfacing

Transportation

- Keep proposed standard as written
- Additional options for consideration:
 - □ Delay implementation (1 yr)
 - Eliminate extra person if all children are school-age

Summary

- National ranking across standards
- Empirical advantages of proposed standards
- Impact analyses show limits of the effects
- Public Comments
- Recommendation and options

Challenges

To see beyond all the formal language and tedious processes. To see, instead, the impact of regulations:

- On the safety and optimum development of young children
- > On their families
- > On the future of Virginia



Remember who is watching, waiting, and depending on you for good days and ter tomorrows

66

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Child Care quality and group size

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71

Attachment C Final Child Care Regulation Implementation of Key Standards

Minimum Standards for Licensed Child Day Centers 22 VAC 15-30

Implementation of Key Standards

Current Regulation for Licensed Child Day Centers	Final Regulation for Licensed Child Day Centers Adopted by the Child Day-Care Council
2 to 4 years = 10:1 4 years to the age of eligibility to attend public school (5 years by September 30) = 12:1 School-age = 20:1 Balanced mixed-age (3-6 years) = 15:1	2 year olds = 8:1 3 year olds to the age of eligibility to attend public school (5 years by September 30) = 10:1 (no change for 3 year olds) Age of eligibility to attend public school through eight years = 18:1 9 through 12 years = 20:1 Balanced mixed-age = 14:1 Effective one year after regulation becomes effective.
There must be 25 square feet of indoor space available per child older than 16 months. There must be 35 square feet of indoor space available for infants from birth to 16 months.	Applicants and current licensees who add new additions must have 35 square feet of indoor wall-to-wall space per child three years after the effective date of the regulation. At the ninth year after the effective date of the regulation, current licensees must provide 35 square feet of indoor wall to-wall space per child.
Directors 1. A graduate degree in a child-related field and six months of programmatic experience; or 2. An endorsement or bachelor's degree in a child-related field and one year of programmatic experience; or 3. Forty-eight semester hours of college credit in a child-related field and one year of programmatic experience; or 4. Two years of programmatic experience with one year in a staff supervisory capacity and at least one of the following educational backgrounds: a. A one-year early childhood certificate that consists of at least 30 semester hours; b. A child development credential; or c. A certification of qualification from an interpretionally or notionally.	Three years after the effective date of the regulation, program directors that qualify using the fifth criterion must meet a qualification as stated in numbers one through four. Current directors must begin working toward one of the other criteria. In addition, these same program directors must complete 120 hours of training during their three years of programmatic experience. Ten hours of management training are required for directors without management experience. New directors with at least six months of prior management experience do not have to meet this training requirement.
	2 to 4 years = 10:1 4 years to the age of eligibility to attend public school (5 years by September 30) = 12:1 School-age = 20:1 Balanced mixed-age (3-6 years) = 15:1 There must be 25 square feet of indoor space available per child older than 16 months. There must be 35 square feet of indoor space available for infants from birth to 16 months. Directors 1. A graduate degree in a child-related field and six months of programmatic experience; or 2. An endorsement or bachelor's degree in a child-related field and one year of programmatic experience; or 3. Forty-eight semester hours of college credit in a child-related field and one year of programmatic experience; or 4. Two years of programmatic experience with one year in a staff supervisory capacity and at least one of the following educational backgrounds: a. A one-year early childhood certificate that consists of at least 30 semester hours; b. A child development credential; or

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	recognized Montessori organization; or 5. Three years of programmatic experience with one year in a staff supervisory capacity and a high school diploma or G.E.D. or verification of completion of a home school program approved by the state.	
Initial Qualifications and Preservice Training	Program Leaders 1. Three months of programmatic experience and at least one of the following educational backgrounds:	Program leaders A qualified program leader must have fulfilled a high school program completion or the equivalent of such.
Program Leaders	a. A one year early childhood certificate that consists of at least 30 semester hours; b. A child development credential; or c. A teaching diploma from an internationally or nationally recognized Montessori organization; or 2. A high school diploma or G.E.D. or verification of completion of a home school program approved by the state, and six months of supervised programmatic experience. Within one month after being promoted or beginning work, a minimum of 12 hours of training related to the care of children.	Training hours required for program leaders will gradually increase, such that three years after the effective date of the regulation, 24 hours of training would be required. Child-related training taken within six months of becoming a program leader can count toward the required hours of training.
Ongoing Training	Annual training for all staff who work directly with children = 8 hours	Annual training for all staff who work directly with children = 10 hours In addition, the amount of annual training hours required for all staff will gradually increase, such that three years after the effective date of the regulation, 16 hours of annual training would be required.
	There must always be at least one staff member on duty who has obtained instruction in performing the daily health observation of children; training must be updated every three years.	Two years after the effective date of the regulation, prescribed or over-the-counter medications must be administered by a staff member who has completed a course approved by DSS. Staff required to have the training must be retrained every three years, with interim

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		refresher training and practice demonstrations.