

ASSEMBLY BILL

No. 290

Introduced by Assembly Member Alejo

February 11, 2013

An act to amend Sections 1596.865, 1596.866, and 1596.8661 of the Health and Safety Code, relating to child day care.

LEGISLATIVE COUNSEL'S DIGEST

AB 290, as introduced, Alejo. Child day care: childhood nutrition training.

Existing law, the California Child Day Care Act, requires that, as a condition of licensure and in addition to any other required training, at least one director or teacher at each day care center, and each family day care home licensee who provides care, have at least 15 hours of health and safety training, covering specified components, including preventative health practices courses.

This bill would provide that for licenses issued on or after January 1, 2015, a director or teacher who receives the health and safety training shall also have at least one hour of childhood nutrition training as part of the preventive health practices course or courses. The bill would require the childhood nutrition training to include content on age-appropriate meal patterns, as specified, and information about participation in the federal Child and Adult Care Food Program.

This bill would also make legislative findings and declarations.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. The Legislature finds and declares all of the
2 following:

3 (a) Nearly 25 percent of California’s preschool age children are
4 overweight or obese and at risk of developing chronic diseases,
5 which contribute to escalating health care costs.

6 (b) Child care participation in the United States is at an all-time
7 high. There are more than 45,000 licensed child care facilities in
8 California that serve over one million children.

9 (c) Research demonstrates that taste preferences and lifelong
10 nutrition habits are formed during the early childhood years.

11 (d) Research shows that the diets of most children in the United
12 States do not meet the recommendations of the Dietary Guidelines
13 for Americans. Children’s diets tend to be low in fruits, vegetables,
14 calcium-rich foods, and fiber and high in total fats, saturated and
15 trans fats, salt, and added sugar.

16 (e) Research supports that training for child care providers can
17 improve the quality of early childhood programs.

18 (f) The state has a strong policy and financial involvement in
19 the licensed child care system and in the health and safety of
20 children while they are engaged in that system.

21 SEC. 2. Section 1596.865 of the Health and Safety Code is
22 amended to read:

23 1596.865. It is the intent of the Legislature to encourage any
24 person who provides child care in a child day care facility licensed
25 pursuant to this chapter, Chapter 3.5 (commencing with Section
26 1596.90), or Chapter 3.6 (commencing with Section 1597.30) to
27 have the following elementary health care training:

28 (a) Cardiopulmonary resuscitation.

29 (b) Pediatric first aid.

30 (c) Preventive health practices, including food preparation,
31 *childhood nutrition*, and sanitation ~~practices~~, *practices that support*
32 *overall health and* reduce the spread of infectious diseases.

33 SEC. 3. Section 1596.866 of the Health and Safety Code is
34 amended to read:

35 1596.866. (a) (1) In addition to other required training, at
36 least one director or teacher at each day care center, and each
37 family day care home licensee who provides care, shall have at
38 least 15 hours of health and safety ~~training~~ *training, and if*

1 *applicable, at least one additional hour of training pursuant to*
2 *clause (ii) of subparagraph (C) of paragraph (2).*

3 (2) The training shall include the following components:

4 (A) Pediatric first aid.

5 (B) Pediatric cardiopulmonary resuscitation (CPR).

6 (C) (i) ~~A preventative~~ *preventive health practices course or*
7 *courses that include instruction in the recognition, management,*
8 *and prevention of infectious diseases, including immunizations,*
9 *and prevention of childhood injuries.*

10 (ii) *For licenses issued on or after January 1, 2015, at least one*
11 *director or teacher at each day care center, and each family day*
12 *care home licensee who provides care, shall have at least one hour*
13 *of childhood nutrition training as part of the preventive health*
14 *practices course or courses.*

15 (3) The training may include instruction in sanitary food
16 handling, ~~child nutrition~~, emergency preparedness and evacuation,
17 caring for children with special needs, and identification and
18 reporting of signs and symptoms of child abuse.

19 (b) Day care center directors and licensees of family day care
20 homes shall ensure that at least one staff ~~member~~ *member*, who
21 has a current course completion card in pediatric first aid and
22 pediatric CPR issued by the American Red Cross, the American
23 Heart Association, or by a training program that has been approved
24 by the Emergency Medical Services Authority pursuant to this
25 section and Section 1797.191, shall be onsite at all times when
26 children are present at the facility, and shall be present with the
27 children when children are offsite from the facility for facility
28 activities. Nothing in this subdivision shall be construed to require,
29 in the event of an emergency, additional staff members, who are
30 onsite when children are present at the facility, to have a current
31 course completion card in pediatric first aid and pediatric CPR.

32 (c) (1) The completion of health and safety training by all
33 personnel and licensees described in subdivision (a) shall be a
34 condition of licensure.

35 (2) Training in pediatric first aid and pediatric CPR by persons
36 described in subdivisions (a) and (b) shall be current at all times.
37 Training in preventive health practices as described in subparagraph
38 (C) of paragraph (2) of subdivision (a) is a ~~one-time-only~~ *one-time*
39 *only* requirement for persons described in subdivision (a).

1 (3) The department shall issue a provisional license for otherwise
2 qualified applicants who are not in compliance with this section.
3 This provisional license shall expire 90 days after the date of
4 issuance and shall not be extended.

5 (4) A notice of deficiency shall be issued by the department at
6 the time of a site visit to any licensee who is not in compliance
7 with this section. The licensee shall, at the time the notice is issued,
8 develop a plan of correction to correct the deficiency within 90
9 days of receiving the notice. The facility's license may be revoked
10 if it fails to correct the deficiency within the 90-day period. Section
11 1596.890 shall not apply to this paragraph.

12 (d) Completion of the training required pursuant to subdivisions
13 (a) and (b) shall be demonstrated, upon request of the licensing
14 agency, by the following:

15 (1) Current pediatric first aid and pediatric CPR course
16 completion cards issued by the American Red Cross, the American
17 Heart Association, or by a training program approved by the
18 Emergency Medical Services Authority pursuant to Section
19 1797.191.

20 (2) (A) A course completion card for a preventive health
21 practices course or courses as described in subparagraph (C) of
22 paragraph (2) of subdivision (a) issued by a training program
23 approved by the Emergency Medical Services Authority pursuant
24 to Section 1797.191.

25 (B) Persons who, prior to the date on which the amendments to
26 this section enacted in 1998 become operative, have completed a
27 course or courses in preventive health practices as described in
28 *clause (i) of* subparagraph (C) of paragraph (2) of subdivision (a),
29 and have a certificate of completion of a course or courses in
30 preventive health practices, or certified copies of transcripts that
31 identify the number of hours and the specific course or courses
32 taken for training in preventive health practices, shall be deemed
33 to have met the training in preventive health practices.

34 (3) In addition to training programs specified in paragraphs (1)
35 and (2), training programs or courses in pediatric first aid, pediatric
36 CPR, and preventive health practices offered or approved by an
37 accredited college or university are considered to be approved
38 sources of training that may be used to satisfy the training
39 requirements of paragraph (2) of subdivision (a). Completion of
40 this training shall be demonstrated to the licensing agency by a

1 certificate of course completion, course completion cards, or
2 certified copies of transcripts that identify the number of hours
3 and the specified course or courses taken for the training as defined
4 in paragraph (2) of subdivision (a).

5 (e) The training required under subdivision (a) shall not be
6 provided by a home study course. This training may be provided
7 through in-service training, workshops, or classes.

8 (f) All personnel and licensees described in subdivisions (a) and
9 (b) shall maintain current course completion cards for pediatric
10 first aid and pediatric CPR issued by the American Red Cross, the
11 American Heart Association, or by a training program approved
12 by the Emergency Medical Services Authority pursuant to Section
13 1797.191, or shall have current certification in pediatric first aid
14 and pediatric CPR from an accredited college or university in
15 accordance with paragraph (3) of subdivision (d).

16 (g) The department shall have the authority to grant exceptions
17 to the requirements imposed by this section in order to meet the
18 requirements of the Americans with Disabilities Act of 1990 (42
19 U.S.C. Sec. 12101 et seq.).

20 (h) The department shall adopt regulations to implement this
21 section.

22 SEC. 4. Section 1596.8661 of the Health and Safety Code is
23 amended to read:

24 1596.8661. (a) For purposes of the training required pursuant
25 to paragraph (4) of subdivision (a) of Section 1596.798, pediatric
26 first aid training pursuant to Section 1596.866 shall include a
27 component of training in the administration of inhaled medication
28 described in paragraph (4) of subdivision (a) of Section 1596.798.

29 (b) The Emergency Medical Services Authority shall establish,
30 consistent with Section 1797.191, minimum standards for a
31 component of pediatric first aid training that satisfies the
32 requirements of paragraph (4) of subdivision (a) of Section
33 1596.798. For purposes of this subdivision, the Emergency Medical
34 Services Authority is encouraged to consult with organizations
35 and providers with expertise in administering inhaled medication
36 and nebulizer care, including, but not limited to, the American
37 Lung Association, respiratory therapists, and others.

38 (c) *For purposes of the training required pursuant to clause (ii)*
39 *of subparagraph (C) of paragraph (2) of subdivision (a) of Section*
40 *1596.866, instruction in childhood nutrition shall be at least one*

1 *hour in length and shall include content on age-appropriate meal*
2 *patterns based on the most current Dietary Guidelines for*
3 *Americans. In order to increase providers' capacity to serve*
4 *healthy foods at a lower cost, the training shall inform prospective*
5 *providers about eligibility, enrollment, and reimbursement for*
6 *participating in the United States Department of Agriculture's*
7 *Child and Adult Care Food Program (CACFP) (7 C.F.R. 226.20).*

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