

## **NOTICE OF PUBLIC WORKSHOP**

NOTICE IS HEREBY GIVEN that the Division of Public and Behavioral Health will hold a public workshop to consider amendments to Nevada Administrative Code (NAC) Chapter 432A. The workshop will be conducted via videoconference beginning at 9:00 AM on Friday, September 30, 2016, at the following locations:

Desert Regional Center 1391 S. Jones Blvd. Las Vegas, NV 89146	Division of Public and Behavioral Health 4150 Technology Way, Ste. 303, Carson City, NV 89706
Early Intervention Services 1020 Ruby Vista Drive, Suite 102 Elko, NV 89801	

These workshops will be conducted in accordance with NRS 241.020, Nevada's Open Meeting Law.

### **AGENDA**

1. Introduction of workshop process
2. Public comment on proposed amendments to Nevada Administrative Code Chapter 432A.
3. Public Comment

The purpose of the workshops is to solicit comments from interested persons on proposed amendments to regulations regarding Child Care Facilities. The proposed changes will revise Chapter 432A of the Nevada Administrative Code and can be reviewed at the following link: <http://www.leg.state.nv.us/Register/2016Register/R092-16P.pdf>.

LCB file No R092-16 is being proposed in accordance with NRS 449.0302.

Members of the public may make oral comments at this meeting. Persons wishing to submit written testimony or information may submit the material to:

Child Care Licensing  
3811 W. Charleston Blvd Suite 210,  
Las Vegas, NV. 89102

Members of the public who require special accommodations or assistance at the workshops are required to notify Latisha Brown, in writing at the Division of Public and Behavioral Health, Bureau of Health Care Quality and Compliance, Child Care Licensing 3811 W. Charleston Blvd., Suite 210, Las Vegas, NV 89102, at least five (5) working days prior to the date of the public workshop.

A copy of the notice and the proposed regulations are on file for inspection and/or may be copied at the following locations during normal business hours:

Division of Public and Behavioral Health  
727 Fairview Drive, Suite E  
Carson City, NV

Division of Public and Behavioral Health  
3811 W. Charleston Blvd., Suite 210  
Las Vegas, NV

Nevada State Library and Archives  
100 Stewart Street  
Carson City, NV

A copy of the regulations and small business impact statement can be found on-line by going to:  
[http://dpbh.nv.gov/Reg/MedicalLabs/Notice\\_of\\_Public\\_Workshops\\_and\\_Proposed\\_Regulations/](http://dpbh.nv.gov/Reg/MedicalLabs/Notice_of_Public_Workshops_and_Proposed_Regulations/)

Copies of the proposed regulations may also be obtained in person, by mail, or by contacting Child Care Licensing, 3811 W. Charleston Blvd. Suite 210, Las Vegas, NV. 89102, phone 702-486-3822.

A copy of this notice has been posted at the following locations:

1. Division of Public and Behavioral Health, 4150 Technology Way, First Floor Lobby, Carson City
2. Nevada State Library and Archives, 100 Stewart Street, Carson City
3. Legislative Building, 401 S. Carson Street, Carson City
4. Grant Sawyer Building, 555 E. Washington Avenue, Las Vegas
5. Washoe County District Health Department, 9<sup>TH</sup> and Wells, Reno

Copies may also be obtained from any of the public libraries listed below:

Carson City Library  
900 North Roop Street  
Carson City, NV 89702

Churchill County Library  
553 South Main Street  
Fallon, NV 89406

Clark County District Library  
833 Las Vegas Boulevard North  
Las Vegas, NV 89101

Douglas County Library  
1625 Library Lane  
Minden, NV 89423

Elko County Library  
720 Court Street  
Elko, NV 89801

Esmeralda County Library  
Corner of Crook and 4<sup>th</sup> Street  
Goldfield, NV 89013-0484

Eureka Branch Library  
210 South Monroe Street  
Eureka, NV 89316-0283

Henderson District Public Library  
280 South Water Street  
Henderson, NV 89105

Humboldt County Library  
85 East 5<sup>th</sup> Street  
Winnemucca, NV 89445-3095

Lander County Library  
625 South Broad Street  
Battle Mountain, NV 89820-0141

Lincoln County Library  
93 Maine Street  
Pioche, NV 89043-0330

Lyon County Library  
20 Nevin Way  
Yerington, NV 89447-2399

Mineral County Library

Pahrump Library District

110 1<sup>st</sup> Street  
Hawthorne, NV 89415-1390

Pershing County Library  
1125 Central Avenue  
Lovelock, NV 89419-0781

Tonopah Public Library  
167 Central Street  
Tonopah, NV 89049-0449

701 East Street  
Pahrump, NV 89041-0578

Storey County Library  
95 South R Street  
Virginia City, NV 89440-0014

Washoe County Library  
301 South Center Street  
Reno, NV 89505-2151

Per NRS 233B.064(2), upon adoption of any regulations, the agency, if requested to do so by an interested person, either prior to adoption or within 30 days thereafter, shall issue a concise statement of the principal reasons for and against its adoption, and incorporate therein its reason for overruling the consideration urged against its adoption.

# PROPOSED REGULATION OF THE STATE BOARD OF HEALTH

LCB File No. R092-16

## Child Care Licensing Proposed Regulation Amendments

Section 1. Chapter 432A of NAC is hereby amended by adding thereto the following definitions.

### GENERAL PROVISIONS

*Physical Activity defined. (NRS432A.077) "Physical Activity" means moderate to vigorous movements of the body that are developmentally appropriate.*

*Sedentary activity defined. (NRS432A.077) "Sedentary Activity" has the meaning ascribed to in AB 152 of the 2015 session.*

Section 2. NAC 432A.190 is amended to read as follows:

#### **Inspections; investigations. (NRS 432A.077, 432A.180)**

1. Inspections of any building or premises of a facility pursuant to NRS 432A.180 may be unannounced and must be made at least two times during the 12-month licensing period or once every 6 months. Any authorized member or employee of the Division may enter and inspect any building or premises of a facility at any time pursuant to NRS 432A.180 to secure compliance with or prevent a violation of any provision of this chapter or chapter 432A of NRS.

2. In conducting inspections and investigations, the Division may call upon political subdivisions and governmental agencies for assistance. The licensee or applicant shall cooperate with the person conducting the investigation by providing *records as required by other regulations in this chapter*, access to the buildings ~~[-, records]~~ and staff of the facility. Failure to provide such access is a ground for revocation of a license or denial of an application for a license.

3. *The Division may charge and collect a fee from any licensee involved in a complaint, to recover the costs of investigating the complaint, if the complaint is substantiated. The fee will be based on the hourly rate established for surveyors of child care facilities as determined by the budget of the Division. As used in this section "substantiated complaint" means a notice of violation was generated regarding a regulatory violation.*

~~3-4~~4. On confirmation of the operation of an unlicensed operator of a facility, the Division or the local licensing agency shall investigate and attempt to license the operator of the facility, force discontinuance of the operation of the facility or prosecute the violation.

[Bd. for Child Care, Child Care Facilities Reg. §§ 2.5-2.7, eff. 2-28-80]—(NAC A 11-1-94; R112-06, 4-23-2009)

**Section 3. NAC432A.304 is amended to read as follows:**

**Responsibilities of director. (NRS 432A.077)**

1. The director of a child care facility is responsible for screening, scheduling and supervising the staff of the facility and for the conduct of each member of the staff at the facility.

2. The director shall:

(a) Provide a program for child care for the facility which meets the requirements of this chapter.

*(b) Be present in the facility a sufficient amount of time to assure compliance with these regulations.*

~~[(b)]~~(c) Provide space for an office, the storage of records, conferences with parents, meetings of the staff and all other needs of the program for child care.

~~[(e)]~~(d) Maintain organized separate records for each employee that include, without limitation, documents related to training. Such records must include, without limitation:

(1) Documents verifying that the employee has, if applicable:

(I) Completed the training required pursuant to NRS 432A.177;

(II) Received the orientation and basic training required pursuant to NAC 432A.320;

(III) Completed the training required pursuant to NAC 432A.323; and

(IV) Completed the training required pursuant to NAC 432A.326; and

(2) A copy of the documentation concerning, and the results of, the investigation of the employee's background and personal history which is conducted pursuant to NRS 432A.170, including, without limitation, a clearance letter from the Division or a current child care work card, and a release form for this information completed by the employee.

(d) Ensure that each member of the staff of the facility who is not a caregiver, but whose job duties may directly impact children cared for in the facility, has the training necessary to protect the health and safety of the children and the health and safety of the other members of the staff, including, without limitation, training concerning proper nutrition, methods of sanitation and procedures for maintaining a safe environment in the facility.

(e) Work with parents and include them, whenever possible, in the programming and functioning of activities.

(f) Cooperate with the Division and other agencies of government to improve the quality of child care and the competence of caregivers.

(g) Designate a member of the staff who is responsible for the operation of the facility when the director is not present at the facility.

3. If the facility is in operation 25 hours or less, the director must be present in the facility during at least half the hours of operation.

(Added to NAC by Bd. for Child Care, eff. 6-5-84; A 11-19-85; 12-19-89; R112-06, 4-23-2009)

**Section 4. NAC432A. 310 is amended to read as follows:**

**Staff: Personal health. (NRS 432A.077)**

1. Every member of the staff ~~[(of a facility)]~~, including a volunteer *or resident of a facility*, shall present to the director of the facility, to be placed in the employee's file, written evidence that the employee is free from communicable tuberculosis. The evidence must be in the form of a report which states that the employee is free from active tuberculosis as required pursuant to subsection ~~[(2)]~~ 3 or 4 ~~[(3)]~~.



*2. Paragraph 1 above does not apply to a child receiving services within the facility or a child resident of the facility not employed or volunteering in the facility.*

~~{2-}~~3 Before a person, including a person who has received a bacillus Calmette-Guerin (BCG) vaccination, begins employment at a facility, he or she must have submitted to a:

- (a) ~~{Mantoux}~~ tuberculin ~~{skin}~~ test; or
- (b) Chest radiograph and examination by a provider of health care who is authorized to diagnose active tuberculosis, within the 12 months immediately preceding the first day of employment at the facility.

~~{3-}~~4. Every member of the staff of a facility, including a volunteer, shall submit to:

- (a) A ~~{Mantoux}~~ tuberculin ~~{skin}~~ test; or
- (b) An examination by a provider of health care who is authorized to diagnose active tuberculosis, at least once every 24 months after the date the skin test or chest radiograph and examination were conducted pursuant to subsection 2.

~~{4-}~~5. Each caregiver or member of the staff of a facility who has an identified health problem that may affect his or her ability to provide adequate care to children in a facility shall:

- (a) Report the problem to the director of the facility or, if self-employed, to his or her licensing agency; and
- (b) Submit to the director or, if self-employed, to his or her licensing agency, a written statement from a licensed physician attesting to the fact that the health of the caregiver does not endanger the children who are under his or her care in the facility.

~~{5-}~~6. Each director shall report to his or her licensing agency any health problem reported to him or her pursuant to subsection 4.

~~{6-}~~7. Each director or caregiver, if self-employed, shall immediately report to his or her licensing agency any person residing at his or her facility who contracts a serious communicable disease.

~~{7-}~~8. Each caregiver or member of the staff of a facility who has herpetic gingivostomatitis, a cold sore or herpes labialis shall:

- (a) Refrain from engaging in close contact with children cared for in the facility;
- (b) Refrain from sharing food or drink with children cared for in the facility or with other caregivers or members of the staff of the facility;
- (c) Avoid touching the lesions;
- (d) Wash his or her hands frequently; and
- (e) Cover any skin lesion with a bandage, clothing or other appropriate dressing.

[Bd. for Child Care, Child Care Facilities Reg. § 13.1, eff. 2-28-80; A 2-5-82; § 13.2, eff. 2-28-80; A 3-17-82; § 13.3, eff. 3-17-82]—(NAC A 12-17-87; 3-11-92; R072-98, 8-3-98; R112-06, 4-23-2009)

**Section 5. NAC432A. 323 is amended to read as follows:**

**Initial courses of training in child care. (NRS 432A.077, 432A.177)**

1. Except as otherwise provided in subsection 4 and NAC 432A.521 and NRS 432A.177, within 90 days after commencing his or her employment or position in a child care facility, each person who is employed in a child care facility, other than a person employed in a facility that provides care for ill children, and each director of a child care facility shall complete:

- (a) Any training required by the facility in which the director serves or in which the person is employed for the purposes of obtaining certification in the administration of cardiopulmonary resuscitation as required pursuant to NAC 432A.322;

(b) Three or more hours of training in child development or guidance and discipline specific to the age group served by the facility in which the director serves or in which the person is employed;

(c) Two or more hours of training in the administration of first aid;

(d) Two or more hours of training in the recognition of signs and symptoms of illness, which must include, without limitation, training in the prevention of exposure to bloodborne pathogens;

(e) Two or more hours of training in the recognition and reporting of child abuse and neglect; and

(f) If the person or director works with infants under 12 months of age, at least 2 hours of training concerning Sudden Infant Death Syndrome.

*(g) Two or more hours of training in the administration of medication which must include, without limitation, training in the prevention and response to food and allergic reactions.*

*(h) Two or more hours of training in building and physical Premises Safety, which must include without limitation, training in the storage of hazardous materials and bio contaminants.*

*(i) If the facility provides care for infants 12 months and under staff must have 1 hour of training in the prevention of shaken baby syndrome and abusive head trauma.*

*(j) Two or more hours of training in emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man caused event.*

*(k) One or more hours of training for providers that offer transportation, if applicable, appropriate precautions in transporting children.*

*(l) Two or more hours of lifelong wellness, health, safety of children which must include training relating to childhood obesity, nutrition and physical activity.*

2. Except as otherwise provided in NAC 432A.521, within 12 months after commencing employment, each person described in subsection 1 shall, in addition to completing any training required pursuant to subsection 1 and completing any course in the development of children required pursuant to NAC 432A.306, complete at least ~~15~~ 24 hours of training in professional development as required pursuant to NAC 432A.326. *Initial trainings taken pursuant to subsection 1 will be included to count towards annual training requirements as required pursuant to section 1 of NAC432A.326.*

3. Except as otherwise provided in NAC 432A.521, within 12 months after commencing employment as a member of the staff of a facility, ~~each member of the staff of a facility who works in a nursery for infants and toddlers shall, in addition to completing any training required pursuant to subsections 1 and 2, and~~ will complete any course in the development of children required pursuant to NAC 432A.306. ~~complete at least 2 hours of training concerning Sudden Infant Death Syndrome.~~

4. A new employee of a child care facility is not required to complete the training required pursuant to subsection 1 if he or she has completed that training within the previous 24 months.

5. The training concerning the administration of first aid and the recognition of signs and symptoms of illness that is required to be completed pursuant to subsection 1 must be provided by one of the persons, agencies or institutions listed in NAC 432A.308 as qualified to provide such training.

6. The training required pursuant to subsections 1, 2 and 3 must be designed to:

(a) Ensure the protection of the health and safety of each child enrolled in the facility; and

(b) Promote the physical, moral and mental well-being of each child enrolled in the facility.



7. If the facility is a special needs facility, the training required pursuant to subsections 1, 2 and 3 must also be designed to provide information on the characteristics of handicapping conditions and appropriate programs for children with special needs. The training must be approved by:

(a) The Nevada Registry or its successor organization, or any other agency designated by the Director of the Department to approve such training; or

(b) If the training has not been approved by The Nevada Registry or its successor organization, and the Director of the Department has not designated another agency to approve such courses, the Division or the local licensing agency.

8. Evidence that an employee has completed the training required pursuant to subsections 1, 2 and 3 must be included in his or her personnel file and must be kept at the facility. With regard to training concerning the administration of first aid and the recognition of signs and symptoms of illness, the evidence listed in NAC 432A.308 as adequate evidence of compliance is adequate evidence of compliance for the purposes of this section.

(Added to NAC by Bd. for Child Care, eff. 8-31-84; A 5-14-90; 3-11-92; R203-97, 4-1-98; R203-03, 7-1-2004; R032-07, 4-23-2009)

**Section 6. NAC432.374 is amended to read as follows:**

**NAC 432A.374 Medical care: Isolation of ill or injured child; transportation of child. (NRS 432A.077)**

1. If a child becomes seriously ill or injured in a child care facility, other than a facility that provides care for ill children, the child must be immediately isolated from other children and placed under appropriate supervision. A parent, a person designated by a parent or a physician designated by a parent, must be promptly notified and the child must be removed from the facility as quickly as possible. Members of the staff of a facility shall not administer any medical treatment, except emergency first aid and prescribed medications to the child.

*2. The facility must generate written documentation of any illness accident or injury and must provide a copy to the parent and a copy of written documentation must be retained in the child's file. The written documentation must be generated within 24 hours after the illness, accident or injury. In addition, the facility must generate records as prescribed by the Division which may include employee statements.*

~~{2-}~~ 3. If a member of the staff transports or accompanies a child for professional emergency care, he or she shall remain with the child until the parents assume responsibility for the care of the child.

(Added to NAC by Bd. for Child Care, eff. 6-5-84; A 3-11-92)

**Section 7. NAC432A.378 is amended to read as follows:**

**NAC 432A.378 Reports of accident, injury, communicable disease or death. (NRS 432A.077)**

1. Upon the occurrence of any accident or injury which requires emergency professional medical care of a child, the director, operator or owner of each facility shall report the occurrence to the Division or local licensing agency ~~{as soon as possible}~~ *within 48 hours after the accident or injury* and shall keep on file at the facility a *written* report *detailling* ~~{o}~~ the occurrence *of the accident or injury*.



2. If the director, operator or owner of a facility finds that any reportable communicable disease may be present in the facility, he or she shall report that condition to the Division or local licensing agency as soon as possible. The Division or local licensing agency shall provide the list of reportable communicable diseases to all licensees and applicants.

3. The director, operator or owner of each facility shall report as soon as possible to the Division or local licensing agency the death of any child who attends or lives in the facility.

(Added to NAC by Bd. for Child Care, eff. 6-5-84; A 11-1-94)

**Section 8. NAC 432A.380 is amended to read as follows:**

**Nutrition. (NRS 432A.077)**

1. To the extent set forth in subsections 3 and 4, a licensee of a facility shall meet the daily nutritional needs of each child. Meals and snacks must be of a quality and quantity which supplement the food served at home. Cultural and ethnic foods which are appropriate for children must be considered in planning meals. To the extent possible, information provided by parents concerning their child's eating habits and preferences or special needs regarding food must be considered in planning for meals.

2. ~~{A licensee of a facility shall consult the Division or local licensing agency or some other public agency for nutritional information which is applicable to children of ages receiving care at the facility.}~~ *When a child care facility provides meals or snacks, the meals and snacks must be age appropriate and follow the current meal guidelines as issued by the United States Department of Agriculture (USDA) Child and Adult Care Food Program.*

3. A child who stays in a facility:

(a) For 10 hours or less in 1 day must be offered at least one meal and two snacks or two meals and one snack; and

(b) For more than 10 hours in 1 day must be offered at least two meals and two snacks or one meal and three snacks.

4. A nutritious snack must be offered to all children in the midmorning and the midafternoon. Each child must be offered food at intervals that are at least 2 hours apart and, unless the child is asleep during that time, are not more than 3 hours apart.

5. Foods and beverages which are sweet or have little nutritional value must not be served to children except as an addition to the meals or snacks served to comply with the requirements of subsections 3 and 4.

6. Every menu must be in writing, dated, planned a week in advance, and kept on file in the facility for at least 90 days after the corresponding meal is served. The licensee of a facility shall post the current menu, including any changes, in the kitchen and in a public place within the facility convenient for parental inspection. Family homes and group homes are exempt from the requirements of this subsection.

7. Meals may be brought from home to a facility for a child to consume at the facility. The bag or other container used to bring the meal to the facility must be labeled with the child's first and last name. A facility shall inform the parents of each child who is cared for in the facility that perishable items must be stored or packed in a manner that maintains the temperature of the contents.

8. A child is not allowed in the kitchen of any facility unless he or she is supervised.

9. ~~{Whenever possible,}~~ Members of the staff of the facility must ~~{eat with the children and}~~ encourage *children to* ~~{them to}~~ eat a variety of food and observe table manners.

10. Drinking water must be freely available to all children at all times.

11. Food must not be used as a basis for discipline or reward. Children should be encouraged, but must not be forced, to eat.

[Bd. for Child Care, Child Care Facilities Reg. §§ 12.1-12.10, eff. 2-28-80]—(NAC A 6-5-84; R032-07, 4-23-2009)

**Section 9. NAC432A.385 is amended to read as follows:**

**Snacks and meals. (NRS 432A.077)**

1. The staff of each facility shall:
  - (a) Provide appropriate and adequate seating for the children at the facility during snacks and meals;
  - (b) If a high chair is used, ensure that the chair:
    - (1) Is in good condition;
    - (2) Has a wide base; and
    - (3) Has a safety belt for the child;
  - (c) Wash ~~{with a detergent and disinfect after each use}~~ any chair or table that is used during a snack or meal *before and after each use with detergent and disinfectant*;
  - (d) Allow, encourage and assist each child to feed himself or herself, including, without limitation, encouraging a child to hold and drink from a cup, use a spoon and use his or her fingers to feed himself or herself;
  - (e) Offer each child drinking water at times other than during his or her regular feedings;
  - (f) Discard any food that is left in a dish after a meal;
  - (g) Ensure that bottles and containers of food are not kept in water longer than 5 minutes, and stir, shake and test a bottle or container of food before using the bottle or container to feed an infant;
  - (h) Not hold an infant while preparing food;
  - (i) On a daily basis, empty, clean and sanitize any pot used to warm a bottle or food;
  - (j) Store each bottle of formula and container of food in accordance with the instructions from the manufacturer of the formula or food;
  - (k) Label each bottle of formula and container of food with the name of the child to whom it belongs and the date the formula or food was prepared by the facility or was prepared or purchased by the parent;
  - (l) Immediately refrigerate and label each container of breast milk provided by a parent;
  - (m) Return each bottle to the appropriate parent each day;
  - (n) Return any unused, open container of food to the appropriate parent each day if the child was not fed directly from the container of food; and
  - (o) Develop with the parents of a child a plan for feeding the child, which must include, without limitation:
    - (1) Instructions for feeding;
    - (2) Any special dietary restrictions, including, without limitation, any allergies to food;
    - (3) A schedule of times for feeding;
    - (4) Whether the child will be fed breast milk, formula or solid food;
    - (5) If the child will be fed breast milk or formula, when to begin feeding solid food; and
    - (6) Likes and dislikes of certain foods.
2. A child who is fed with a bottle and does not hold his or her own bottle must be held by a caregiver while being fed with a bottle. The bottle must not be propped for feeding. A child who

demonstrates a preference for holding a bottle during feeding may hold his or her own bottle and need not be held by a caregiver if the caregiver is directly observing the child.

3. The staff of a facility may feed a child commercially prepared baby food directly from the jar in which it was packaged or from a separate dish. If the staff feeds the child from the jar, the staff shall discard the jar after it is used.

(Added to NAC by Bd. for Child Care by R203-97, eff. 4-1-98; A by R047-98, 6-10-98; R072-98, 8-3-98; R112-06, 4-23-2009)

#### **Section 10. NAC432A.390 Standards for programs is amended to read as follows:**

##### **Standards for programs. (NRS 432A.077)**

1. Every licensee of a facility shall develop a program to meet the basic needs of children for:

- (a) Good health and normal physical development;
- (b) Optimal mental growth;
- (c) Stimulating language and communicative experiences;
- (d) The attention, acceptance and affection of others;
- (e) Opportunities to experience success and to test mental, physical and social skills;
- (f) Self-identity and a sense of competence and worth;
- (g) The security provided by gentle discipline;
- (h) Relations with others which set forth the rights of adults and the rights of children;
- (i) Learning experiences planned with the aid of the child's parents which ensure harmony with the life style and cultural background of the child;
- (j) Activities which facilitate social growth and adjustment; and
- (k) The time and opportunity to learn independence and personal care.

2. A licensee of a facility shall teach each child personal hygiene. The licensee of a facility shall require all children to wash before meals and after using a toilet.

3. If the weather permits, all children must have a daily period of outdoor play. A licensee of a facility shall provide opportunities for ~~active play~~ *physical activity* which builds muscles such as climbing, jumping, running and playing with toys which have wheels. The quantity and quality of materials and equipment must be sufficient to avoid excessive competition between the children and long waiting periods to use the materials or equipment.

4. Every child who is in a facility for more than 5 hours per day must have a period for a nap during the day. A child who cannot sleep must rest during the period provided for a nap. The licensee of a facility shall provide a cot, mat or bed for each child.

5. The amount, variety and arrangement and use of materials and equipment used in a facility must be appropriate to the developmental needs of the children cared for in the facility. Materials must be stored in a manner that allows children to select, remove and replace the materials independently or with minimal assistance.

6. Furniture must be durable, safe and intended for use by children or appropriately adapted for use by children.

7. A licensee of a facility shall provide space for the storage of the children's clothing and the storage must be within easy reach of the children.

[Bd. for Child Care, Child Care Facilities Reg. §§ 6.1-6.8, eff. 2-28-80]



**Section 11 NAC 432A.400 is amended to read as follows:**

**Discipline. (NRS 432A.077)**

1. A licensee of a facility shall enhance a child's behavior through positive guidance, redirection of the child's behavior and the setting of clear-cut limits on behavior.

2. A member, employee or other person associated with a facility shall not, for any reason:

- (a) Inflict physical punishment, in any manner or form, upon any child;
- (b) Verbally abuse or threaten a child;
- (c) Make derogatory remarks about the child or the child's family;
- (d) Threaten a child with the loss of love of any person;
- (e) Threaten a child with punishment by a deity;
- (f) Subject a child to any form of punishment which pertains to food or rest or restricts the use of a toilet or other bathroom fixture; or

(g) Subject a child to any form of punishment by other children. Parental consent to allow any person within the facility to punish a child contrary to the provisions of this section is void;

*(h) Withhold or use physical activity as a form of punishment or discipline;*

*(i) Confine a child by any means such as a car seat, highchair, infant carrier, jump seat, etc.*

3. Disciplinary measures used in a facility must be consistent with supportive, positive action, and may include:

- (a) Holding a child's arm to prevent hitting;
- (b) Bodily picking up the child and removing him or her from the group, and:
  - (1) Sitting with the child until he or she is ready to play without hitting; or
  - (2) Isolating the child under observation for no more than 10 minutes;
- (c) Informing the child in a simple, positive manner what conduct is expected while the child is in the facility;
- (d) Praising and recognizing a child who behaves in the expected manner; and
- (e) Directing a child who is in a situation that is creating problems to a new activity.

[Bd. for Child Care, Child Care Facilities Reg. §§ 7.1 & 7.2, eff. 2-28-80]

**Section 12. NAC432A.415 is amended to read as follows:**

**NAC 432A.415 Safety and sanitation of toys, equipment and other objects and material used for play. (NRS 432A.077)**

1. Equipment and any material other than a toy that is used for play in a facility must be durable and free from characteristics that may be hazardous or injurious to a child who is less than 2 years of age, including, without limitation, such characteristics as sharp or rough edges, toxic paint or objects that are small enough for a child of that age to swallow and choke on.

2. Any object, toy or component of a toy that is accessible by a child who is less than 3 years of age at a facility must meet the federal size requirements set forth in 16 C.F.R. § 1501.4.

3. Toys with sharp points or edges, plastic bags and objects made from Styrofoam must not be accessible to a child who is less than 3 years of age.

4. A toy or any other piece of equipment that is used for play must be made of a material that is capable of being disinfected and must be cleaned and disinfected promptly after the toy or other piece of equipment has been soiled or put into the mouth of a child, or not less than one time each day.



5. The staff of a facility shall not provide a stuffed animal to any child unless the stuffed animal is laundered or disinfected not less than one time each day or more often if necessary.

6. ~~{Toys placed}~~ *No toys will be placed* in a crib *at any time.* ~~{at a facility must be appropriate for the age of the child using the crib.}~~ The staff of a facility shall adhere to any requirement set forth on the label of a toy regarding the safe use of the toy.

7. Each room at a facility that is used for play and other activities for children must have:

(a) Low, open shelves to store toys;

(b) An adequate supply of toys that are in good condition and appropriate for the age of the children;

(c) Tables and chairs that are the appropriate size for the children; and

(d) Any other equipment that is necessary to meet the needs of the children.

8. Any toy that is broken or has a missing part must be repaired or replaced before the toy may be used in the facility.

9. Walkers for children that are designed to be moved across the floor must not be used in a facility.

(Added to NAC by Bd. for Child Care by R203-97, eff. 4-1-98; A by R112-06, 4-23-2009)

### Section 13. NAC432A.420 is amended to read as follows:

**NAC 432A.420 Nurseries for infants and toddlers: Part of larger facility; director.** (NRS 432A.077)

~~{1. A nursery for infants and toddlers may be a part of another type of facility if each part of the facility meets the requirements of this chapter. If such a nursery is a part of a larger facility, the director or one caregiver who meets the qualifications of a director must spend at least one-half of his or her time in the nursery.}~~

~~—2.}~~ *1.* In a facility where a director is not required, the director of the nursery for infants and toddlers shall ensure that the required number of persons on the staff is maintained.

[Bd. for Child Care, Child Care Facilities Reg. §§ 17.1-17.15, eff. 2-28-80]—(NAC A 6-5-84; 11-19-85; 5-29-86; R203-97, 4-1-98; R112-06, 4-23-2009)

### Section 14. NAC 432A.425 is amended to read as follows:

**Nurseries for infants and toddlers: General requirements.** (NRS 432A.077)

1. The director or a designated member of the staff of a nursery for infants and toddlers or other facility that enrolls infants and toddlers shall discuss policies concerning the health of an infant or toddler with the parents before enrollment of the child. Every parent must be given a description of and agree in writing to the following matters concerning the child:

(a) Feeding;

(b) Diapering;

(c) Changes of clothing, which are to be provided by the parents;

(d) Bathing, including, without limitation, the kind of soap to be used;

(e) Precautions against infectious disease;

(f) Sleeping;

(g) Toilet training;

(h) Daily reports to the parents;

(i) Any special precautions regarding the health and safety of the child; and

(j) Any other information deemed necessary by the facility or the Division.

2. A caregiver must be assigned to a specific group of infants on a continuing basis.
3. Except as otherwise provided in paragraph (n) of subsection 3 of NAC 432A.416, each infant and toddler must be under direct visual observation by a qualified caregiver at all times.
4. Each infant and toddler must be given undivided attention by the same caregiver for at least 30 minutes in the morning and 30 minutes in the afternoon, including periods of feeding and bathing. The caregiver shall, during this time:
  - (a) Hold and talk to the child;
  - (b) Encourage the development of the child's coordination by allowing him or her to reach for, grasp, creep, crawl or pull up;
  - (c) Give toddlers the opportunity to develop the large muscles of the body by activities such as climbing and walking; and
  - (d) Encourage the child to interact socially through playing, using language and solving problems using materials and equipment that are appropriate for the age of the child. Infants under 6 months of age must be provided an additional period of not less than 2 hours of activity each day out of the crib, for example, in a playpen or other suitable area.
5. Each licensee of a facility shall provide an indoor area which is covered by a soft or nonabrasive material and is protected from traveled walkways where crawling children can be on the floor for at least a part of the day.
6. A caregiver may take the infant or toddler assigned to him or her outside or to areas of the facility other than their usual room for a part of each day to provide a change in their physical environment and to increase opportunities for social interaction.
7. When weather permits, each toddler over 12 months of age must be taken outside for a portion of each day. If the weather is extremely hot, the toddler must be kept in a shaded area while outdoors.
8. An infant who is awake must not be left in a crib for long periods without direct adult care and never for more than ~~30~~15 minutes at a time.
9. The staff of a nursery for infants and toddlers shall separate the infants from the toddlers while the toddlers are engaging in physical activities.
10. There must be a resilient surface under equipment that is used for playing and climbing at a nursery for infants and toddlers. Such equipment must be appropriate for the age of the children using the equipment.
11. The staff of a nursery for infants and toddlers shall promote the healthy development of toddlers by:
  - (a) Expressing feelings with words;
  - (b) Giving directions that are worded in a positive manner;
  - (c) Modeling desirable behavior; and
  - (d) Redirecting behavior.
12. The staff of a nursery for infants and toddlers shall not discipline or punish an infant or toddler by confining him or her to a crib, high chair, playpen or other such piece of furniture or equipment.
13. The staff of a nursery for infants and toddlers shall prepare a daily report for each infant less than ~~12~~ 24 months of age for whom it provides care. The report must be posted in a conspicuous place in each room used to care for the infants and must include, without limitation, information concerning the feeding, diapering and sleeping of each infant.

*14. Breastfeeding accommodations must be provided in accordance with (AB 152 section 3(a) of the 2015 Session).*

(Added to NAC by Bd. for Child Care, eff. 6-5-84; A by R203-97, 4-1-98; R047-98, 6-10-98; R112-06, 4-23-2009)

**Section 15. NAC 432A.430 is amended to read as follows:**

**Early care and education programs. (NRS 432A.077)**

1. Each facility, including, without limitation, a family home and a group home, shall have an early care and education program.

2. Each facility described in subsection 1 shall develop a written assessment plan which is designed to, without limitation:

- (a) Identify the interests and needs of each child enrolled in the facility;
- (b) Describe the developmental and educational progress of each child enrolled in the facility who is not attending public or private elementary school;
- (c) Identify the need for and referral of a child enrolled in the facility for developmental screening and the referral of the child for diagnostic assessment, if appropriate;
- (d) Describe the methodology for developing curriculum for the children enrolled in the facility;
- (e) Adapt teaching practices and the environment to the children enrolled in the facility;
- (f) Facilitate the early care and education program required pursuant to subsection 1; and
- (g) Promote communication with the family of a child enrolled in the facility.

3. In addition to the written assessment plan which is developed pursuant to subsection 2, each facility described in subsection 1 shall, within 3 months after a child enrolls in the facility, assess the child by use of, without limitation, portfolios, observations, checklists, rating scales and screening tools. Such an assessment must be repeated biannually thereafter to monitor and support the learning and development of each child enrolled in the facility.

4. Each facility described in subsection 1 shall develop a written plan of curriculum for the children enrolled in the facility. The plan must:

- (a) Be made available for parental review;
- (b) Be prepared before the early care and education program becomes effective;
- (c) Be kept on file at the facility for at least 1 year;
- (d) Include a program of speaking and listening to English;
- (e) Integrate age appropriate key areas of instruction, including, without limitation, literacy, mathematics, science, social studies, creative expression and the arts, and health and safety;
- (f) Incorporate instruction, concepts and activities that foster the social, emotional, *physical activity*, linguistic and cognitive development of children; and
- (g) Provide for the involvement of parents of the children enrolled in the facility in learning activities at the facility and at home;
- (h) *Ensure sedentary activity is limited throughout the day.*

5. Each facility described in subsection 1 shall provide materials and equipment to carry out the written plan of curriculum developed pursuant to subsection 4 that:

- (a) Reflect the lives of the children and the families of the children enrolled in the facility;
- (b) Reflect the diversity of the children in our society with regard to the gender, age, native language, ethnicity, culture and abilities of the children enrolled in the facility;
- (c) Provide for the safety of the children enrolled in the facility while being appropriately challenging for the children;
- (d) Encourage the children enrolled in the facility to explore, experiment and discover new information and ideas;



(e) Promote action on the part of the children enrolled in the facility and interaction among the children enrolled in the facility;

(f) Are organized in a manner which facilitates independent use of the materials and equipment by a child enrolled in the facility;

(g) Are rotated to reflect changes in the curriculum and to accommodate the different interests and skill levels of the children enrolled in the facility;

(h) Allow for a variety of uses; and

(i) Accommodate the special needs of the children enrolled in the facility.

[Bd. for Child Care, Child Care Facilities Reg. part § 1.20 & §§ 16.1-16.4, eff. 2-28-80; § 16.5, eff. 2-28-80; A 2-5-82]—(NAC A 11-19-85; R203-97, 4-1-98; R032-07, 4-23-2009, eff. 10-23-2010)

**Section 16. NAC 432A.521 is amended to read as follows:**

**NAC 432A.521 Replacement of absent caregiver.** (NRS 432A.077) A facility, other than an accommodation facility or a facility that provides care for ill children, may replace a caregiver who has:

1. An unplanned absence with an alternate caregiver:

(a) Who is able to be on the premises of the facility within 5 minutes after being requested to do so;

(b) Whom the Division has investigated pursuant to paragraph (a) of subsection 2 of NAC 432A.200; and

(c) Who satisfies the requirements of NAC 432A.310 and ~~paragraph (a)~~ of subsection 1 of NAC 432A.323.

2. A prearranged absence with a substitute caregiver who satisfies each of the requirements of a caregiver set forth in this chapter and chapter 432A of NRS.

(Added to NAC by Bd. for Child Care by R112-06 & R032-07, eff. 4-23-2009)

**Section 17. Uncodified R #013-14 is amended to read as follows:**

1. If an inspection of a facility conducted pursuant to NRS 432A.180 reveals that the person who operates the facility is in violation of any provision of this chapter or chapter 432A of NRS, the Division may issue a notice of violation. The notice of violation must:

(a) Be in writing and describe with particularity the nature of the violation *and may be communicated in any of the following formats; a statement of deficiencies, site report, email or traditional mail correspondence.*

(b) Include the time permitted to correct the violation; and

(c) Inform the person who operates the facility of the provisions of subsections 2, 3 and 4.

2. The Division may impose an administrative fine:

(a) In the amount of \$100 for:

~~[(1) An injury to a child which is the direct result of the negligence of the licensee or an employee of the licensee.]~~

*(1) The failure to correct any violation of a provision of this chapter or chapter 432A of NRS within the time frame specified in the notice of violation. A fine may be assessed for each day a facility is noncompliant*



(2) The failure to satisfy the requirements of this chapter or chapter 432A of NRS relating to information on the background and personal history of all persons required to be investigated ~~[two or more times]~~ during the licensing period of the facility.

(3) The failure to satisfy the applicable requirements for the ratio of caregivers to children pursuant to this chapter or chapter 432A of NRS two or more times during the licensing period of the facility.

(4) The failure to satisfy the requirements of this chapter or chapter 432A of NRS for training of the caregivers in the facility by the end of the licensing period of the facility.

(5) *Failure to submit a completed renewal application upon due date, in addition to late and renewal fees as specified in NAC432A.200*

~~[(b) Of not more than \$100 per day for the failure to correct any other violation of a provision of this chapter or chapter 432A of NRS within the time frame specified in the notice of violation.]~~

3. The Division may impose an administrative fine of \$200 in addition to any administrative fine prescribed by subsection 2 if the violation of a provision of this chapter or chapter 432A of NRS resulted in an injury to any person.

4. A licensee upon whom the Division imposes an administrative fine pursuant to this section may appeal that action pursuant to the procedures set forth in NAC 439.300 to 439.395, inclusive.

#### Section 18. NAC432A.522-544

*Ratios is amended to read as follows:*

*In observance of the designated classroom ratios:*

<i>Ratio and group size from 6:00 a.m. - 9:00 p.m.</i>					
<i>Children's Age</i>	<i>Staff to Child Ratio</i>	<i>Maximum Group Size</i>			
<i>Birth - 9 months</i>	<i>1 staff - 4 children</i>	<i>8 children</i>			
<i>9 months - 24 months</i>	<i>1 staff - 6 children</i>	<i>12 children</i>			
<i>24 months - 36 months</i>	<i>1 staff - 8 children</i>	<i>16 children</i>			
<i>3 years - 5 years</i>	<i>1 staff - 11 children</i>	<i>22 children</i>			
<i>5 years - 16 years</i>	<i>1 staff - 15 children</i>	<i>30 children</i>			
<i>16 years -18 years (Institutions only)</i>	<i>1 staff - 15 children</i>	<i>30 children</i>			
<i>Ratio and group size from 9:00 p.m. - 6:00 a.m.</i>					
<i>Children's Age</i>	<i>Staff to Child Ratio</i>	<i>Maximum Group Size</i>			
<i>Birth - 3 years</i>	<i>1 staff to 6 children</i>	<i>12 children</i>			

3 years - 16 years	1 staff to 10 children	20 children			
16 years -18 years (Institutions only)	1 staff - 15 children	30 children			
<i>*When mixing age groups the ratio and group size will ALWAYS follow the ratio for the youngest child</i>					
<i>*10% more children than the number stated on the facility license; the care must not exceed 3 consecutive hours before normal school hours and 3 consecutive hours after normal school hours; ratio maintains the same as the graph above</i>					
<i>*Maximum age span for any group is 2 years difference in age</i>					
<i>*Ratio will be the same for Child Care Facilities, Accommodations, Special Needs facilities, Special Events, Child Care Institutions, Educational Institutions, Residential Institutions, and Shelter Institutions</i>					
<i>(NAC432a.522, NAC432a.524, NAC432a.526, NAC432a.528, NAC432a.530, NAC432.532, NAC432A.541, NAC432A.542, NAC432a.543, NAC432a.544)</i>					
<b>Ratio for Family Child Care</b> <b>NAC432a.534</b>					
<b>Children's Age</b>	<b>Maximum Children</b>				
<b>Birth - 1 Year</b>	<b>2</b>				
<b>Birth - 2 Years</b>	<b>4 (only 2 can be under 1 year old)</b>				
<b>3 Years - 16 Years</b>	<b>6 (only 2 can be under 1 year old)</b>				
<b>Ratio for Group Care NAC432a.536</b>					
<b>Children's Age</b>	<b>Staff to Child Ratio</b>	<b>Maximum # of Children</b>			
<b>Birth - 1 Year</b>	<b>1 staff - 2 children</b>	<b>4 children</b>			
<b>Birth - 2 Years</b>	<b>1 Staff - 4 children</b>	<b>8 children</b>			
<b>3 Years - 16 Years</b>	<b>2 Staff - 6 children</b>	<b>12 children</b>			
<b>Ratio for Facilities that care for ill children NAC432a.540</b>					
<b>Children's Age</b>	<b>Staff to Child Ratio</b>	<b>Maximum Group Size</b>			

## Small Business Impact Questionnaire

### LICENSED CHILD CARE FACILITIES

The following questions pertain to how the changes in the Nevada Administrative Code will affect your business. If it is determined that the proposed regulation is likely to impose a direct and significant economic burden upon a small business; or directly restrict the formation, operation or expansion of a small business; then the agency will take any or all of the following actions:

1. Insofar as practicable, consult with owners and officers of affected small businesses,
2. Consider methods to reduce the impact of the proposed regulation, and
3. Prepare a small business impact statement and make copies of the statement available to the public at the workshop conducted and the public hearing held pursuant to NRS 233B.061.

The proposed regulations are available for your review at the following link:

[www.leg.state.nv.us/register/2016Register/R092-16I.pdf](http://www.leg.state.nv.us/register/2016Register/R092-16I.pdf)

Please answer each of the questions below that apply and add any qualifying remarks that may help us to understand your position. Please provide us with your responses no later than **August 25<sup>th</sup>, 2016** for inclusion in the small business impact statement. Mail or FAX your completed form to:

Latisha Brown, Program Manager  
Child Care Licensing Program  
3811 W. Charleston Blvd, Suite 210  
Las Vegas, Nevada 89102

**FAX: (702)486-6660**

<b>NAME:</b>	
<b>ORGANIZATION:</b>	
<b>DATE:</b>	

**NRS 233B.0382 “Small Business defined.”** “Small business” means a business conducted for profit, which employs fewer than 150 full-time or part-time employees.

1. How many employees are currently employed by your business?

If more than 150, you will not need to answer the rest of the questions. Please FAX questionnaire to the above address. If less than 150, please continue with the remaining questions.

2. Will a specific regulation have an adverse economic effect upon your business?

Yes ☐ No ☐

Explain: Please list each regulation and explain the impact.

3. Will the regulation (s) have any beneficial effect upon your business?

Yes ☐ No ☐

Explain:

4. Do you anticipate any indirect adverse effects upon your business?

Yes ☐ No ☐

Explain:

5. Do you anticipate any indirect beneficial effects upon your business?

Yes ☐ No ☐

Explain:



## SMALL BUSINESS IMPACT STATEMENT 2016

### PROPOSED AMENDMENTS TO NAC 432A

The Division of Public and Behavioral Health (DPBH) has determined that the proposed amendments should not create significant impact upon a small business or hinder the formation, operation or expansion of a small business in Nevada.

A small business is defined in Nevada Revised Statutes NRS 233B as a "business conducted for profit which employs fewer than 150 full-time or part-time employees."

This small business impact statement is made pursuant to NRS 233B.0608 (3) and complies with the requirements of NRS 233B.0609. As required by NRS 233B.0608(3), this statement identifies the methods used by the agency in determining the impact of the proposed regulation on a small business in sections 1, 2, 3, and 4 below and provides the reasons for the conclusions of the agency in section 8 below followed by the certification by the person responsible for the agency.

#### **Background**

In 2014, the federal government passed the Child Care Act which stipulates precise mandated changes to occur within all licensed child care facilities across the States. The set forth proposed amendments were generated in efforts to bring the State of Nevada into compliance with these federal mandates. The necessary amendments were made to provider trainings; school ratios and group size as required.

#### **1) A description of the manner in which comment was solicited from affected small businesses, a summary of their response and an explanation of the manner in which other interested persons may obtain a copy of the summary.**

The amended regulations of NAC432A were sent out to State of Nevada licensed child care facilities and posted publicly for other interested parties. The delivery outlets included postings to the listserv, child care licensing website, as well as, being electronically mailed. Majority of the responses received indicate that the proposed changes will have an adverse effect on small business in its current state. Individuals who answered the small business impact questionnaire explain that the effect would put a financial strain on their business and found the changes to be excessive.

Pursuant to NRS 233B.0608 (2)(a), the Division of Public and Behavioral Health has requested input from State of Nevada licensed child care facilities.

A Small Business Impact Questionnaire was sent to licensed child care facilities along with a copy of the proposed regulation changes, on July 25<sup>th</sup>, 2016. The questions on the questionnaire were:

- 1) How many employees are currently employed by your business?
- 2) Will a specific regulation have an adverse economic effect upon your business?
- 3) Will the regulation(s) have any beneficial effect upon your business?
- 4) Do you anticipate any indirect adverse effects upon your business?
- 5) Do you anticipate any indirect beneficial effects upon your business?

### **Summary of Response**

<b>Summary Of Comments Received</b> <b><u>67</u> responses were received out of <u>459</u> small business impact questionnaires distributed)</b>			
<b>Will a specific regulation have an adverse economic effect upon your business?</b>	<b>Will the regulation (s) have any beneficial effect upon your business?</b>	<b>Do you anticipate any indirect adverse effects upon your business?</b>	<b>Do you anticipate any indirect beneficial effects upon your business?</b>
Respondents that replied yes stated that the increase of training will adversely affect their business because trainings come at a cost. Increasing supervision needs will mean hiring more staff which will cost the facility.	Respondents did claim that having more training will be beneficial by keeping caregivers knowledgeable on their day to day activities. Increase to supervision is good because it helps to ensure children's safety.	Trainings and hiring of more caregivers will cost the facilities in the end which in turn will require the facilities to raise the cost to the parents that utilize their services.	More education and better supervision.

<b>Number of Respondents out <u>67</u></b>	<b>Adverse economic effect?</b>	<b>Beneficial effect?</b>	<b>Indirect adverse effects?</b>	<b>Indirect beneficial effects?</b>
	48	15	27	6
	67	67	67	67

### **2) Describe the manner in which the analysis was conducted.**

- a) Program review of the responses sent in and summarized.

**3) The estimated economic effect of the proposed regulation on the small business which it is to regulate including, without limitation both adverse and beneficial effects and both direct and indirect effects.**

- a) Training, as it stands within the license process, does come with various fees and with the increase of mandated trainings to be taken, the cost would reasonably increase. However, it is important to note that the newly required trainings would only need to be taken once by the facility employee for their duration of being employed at the facility with updated trainings to be taken as information on a particular subject or topic evolves. Providers will only need to take the new mandated classes initially upon hire, which will then be prorated against any required annual hours that first year; this will assist to combat the increase.
- b) Ratios could have an economic effect within child cares because supervision of children would require a set number of caregivers within a classroom of children. However, the proposed ratios do not overly differ from current standards and it is not anticipated that the economic effect will adversely affect the schools, but will help to ensure compliance and mitigate risk to children's safety.
- c) Group size as currently delineated out within the proposed regulations could have an economic impact on facilities, however, a feasible compromise of ensuring that all facilities will be able to utilize all usable square footage within classrooms while adhering to group size mandates will help to minimize that economic effect.

**4) Provide a description of the methods that the agency considered reducing the impact of the proposed regulation on small businesses and a statement regarding whether the agency actually used any of those methods.**

The Division of Public and Behavioral Health has held several opportunities for child care businesses to provide input and comments regarding the proposed NAC432A proposed regulations, including the economic impact the proposed regulations may have on these child care businesses. Modifications to the proposed regulations will be made as a result of this input. Workshops will be held on September 30<sup>th</sup>, 2016 allowing for further input by child care providers regarding the proposed regulations and how they will impact their businesses. These comments will be taken into consideration for possible further revisions to the regulations to reduce the economic impact on facilities.

**5) The estimated cost to the agency for enforcement of the proposed regulation.**

NONE

**6) If the proposed regulation provides a new fee or increases an existing fee, the total annual amount DPBH expects to collect and the manner in which the money will be used.**

NONE

- 7) **An explanation of why any duplicative or more stringent provisions than federal, state or local standards regulating the same activity are necessary.**

NONE

- 8) **Provide a summary of the reasons for the conclusions of the agency regarding the impact of a regulation on small businesses.**

The agency recognizes that the proposed amendments are essential to ensuring the continued health and safety of the children and families that utilize these child care facilities. Continued education and by placing strong safeguards around supervision are among the basic function of need in producing equitability in the quality of care offered throughout the State. The agency is also mindful of the economic impact changes can have on facilities which is why the agency is willing to make feasible modifications that will not compromise the health and safety of the children this State serves.

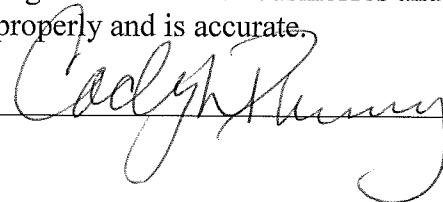
Any other persons interested in obtaining a copy of the summary may e-mail, call, or mail in a request to Latisha Brown at the Division of Public and Behavioral Health at:

Division of Public and Behavioral Health  
3811 W. Charleston Blvd, Suite 210  
Las Vegas, NV 89102  
Latisha Brown  
Phone: 702-486-3822  
Email: [ChildCareLicensing@health.nv.gov](mailto:ChildCareLicensing@health.nv.gov)

**Certification by Person Responsible for the Agency**

I, Cody Phinney, Administrator of the Division of Public and Behavioral Health certify to the best of my knowledge or belief, a concerted effort was made to determine the impact of the proposed regulation on small businesses and the information contained in this statement was prepared properly and is accurate.

Signature

 Date: 9/15/16