NAC Revisions to Improve Physical Fitness & Nutrition in Early Childhood Education Settings

2013 Provider Survey Responses and Recommendations

12/16/2013
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Summary

Overall, survey respondents – which included child care licensees (owners and directors), teachers and some community members – support the recommendations made by the NV Early Childhood Policy Workgroup regarding revisions to standards affecting physical fitness and nutrition in child care facilities. A few themes emerged from the responses and corresponding comments that are applicable generally to the recommendations made:

- How will these regulations apply to child care centers that do not provide food to their students? Many programs now either require or allow parents to bring in meals and snacks for their children. Will these regulations still apply? For those that have an option, how do they manage what is provided on-site and what is brought in by the family?
- Definitions need to be provided for some terms that are included – i.e.: “age-appropriate” and “limited amounts”.
- Overall concern about how the programs will be reviewed in regard to these regulations – how will they be enforced and what kind of tracking and/or documentation will be required?
- Potential costs associated with implementation including staff time, providing the required types of food (which tend to be more costly) and ensuring adequate space for certain provisions (breastfeeding, active play during nap times).
- Time associated with ensuring physical activity interferes with educational curriculum and time needed for “learning” activities.
- Too much regulation and detail in some provisions – respondents often felt that the “state” was overreaching and being over prescriptive.
- Training – the responses often cited training as an impediment to implementation and several comments indicated that providers were not clear on how to implement changes if regulations were enacted. To some, these provisions appeared to be overwhelming.

The analysis below supports that some revisions are needed to the policy recommendations in order to ensure clarity and equity. While most respondents indicated that implementation of the policies was feasible and would not create a significant financial burden – enough respondents expressed hesitations that could impede the passage of the recommendations as written. The responses also indicate a significant need for more training and education of early childhood providers regarding available resources and methods of integrating physical activity and nutrition into their curriculum and daily learning activities.

An analysis of each provision, along with recommendations for changes based on the responses is provided below.
Introduction

The Children’s Advocacy Alliance (CAA) was asked by the Nevada Division of Public and Behavioral Health (DPBH), on behalf the Nevada Early Childhood Policy Workgroup (Workgroup), to solicit feedback on proposed changes to the Nevada Administrative Code, NAC 432A, in regard to standards for physical fitness and nutrition in licensed child care settings in Nevada. This report outlines the process for soliciting that feedback, as well as an analysis of responses and proposed revisions to the Workgroup’s policy recommendations based on the analysis.

Background

According to the Nevada Kindergarten Health Survey, approximately 30% of all Kindergarten students in Nevada are either overweight or obese. Encouraging physical activity and proper nutrition among young children, and their families, is key to reversing this trend which has life-long consequences for health and well-being.

In 2012, the DPBH convened a group of key partners from across the State of Nevada that represent both health and early childhood in various sectors to discuss strategies for improving policies that could directly impact childhood obesity in the early years. The Workgroup utilized the nationally recognized “Caring for Our Children” (CFOC) reports and recommendations as a basis for best practice. In 2010, CFOC published the second edition of “Preventing Childhood Obesity in Early Care and Education Programs” which outlines specific policy recommendations aimed at improving nutrition, physical activity and screen time standards in early childhood education settings. An analysis of these recommendations was conducted in comparison to the Nevada Administrative Code (NAC) and the Workgroup found that Nevada met only 3 of the 47 standards. As such, the Workgroup drafted proposed changes to the NAC which incorporate many of the recommended policy standards developed by CFOC.

In an effort to engage the broader network of early childhood providers in this policy discussion, the DPBH consulted with the Children’s Advocacy Alliance to conduct outreach to solicit feedback from early childhood providers on the proposed policy changes.

Methodology

A written survey was developed to identify support and opposition, as well as general comments or questions, related to each specific NAC policy change recommended by the Workgroup. Surveys were administered to two different groups. The first (Group A) are current owners and/or directors of early childhood programs in Nevada who received a copy of the NAC draft language and survey in the mail in November 2013. Names and addresses were gathered from the state’s two child care licensing entities and included 492 licensed providers. 93 surveys were completed by Group A.
The second (Group B) includes primarily early childhood education teachers, as well as some general members of the community who attended presentations about the NAC proposed changes. The community presentations were conducted in October 2013 in Las Vegas, Carson City, Elko and Reno. All participants were provided a one hour NV Registry credit for participating. Participants were not required to return the survey in order to receive the credit. Approximately 40 individuals attended the presentations. Participants were also encouraged to share the survey link (the survey was also made available online through Survey Monkey) with their colleagues. Overall, 47 surveys were completed by Group B.

Both surveys included opportunities for respondents to indicate support, opposition or no opinion on each proposed policy change, including a section for comments. Group A surveys (sent to owners/directors) also included questions about their program (number of children served, the provision of snacks and meals, and whether similar policies already exist within their program). All surveys were analyzed for both quantitative and qualitative content. The analysis of comments was conducted by identifying patterns or themes that emerged for each policy recommendation. The results of these analyses, as well as recommended changes based on this analysis are provided below.

SURVEY RESPONSES

Demographics:

A total of 140 responses to the survey were received from both Groups A and B combined. 93 responses were from Group A (owners/directors) and 47 were from Group B (teachers/community). Responses came from 10 of Nevada’s 17 counties, with the majority (65%) coming from Clark County.

<table>
<thead>
<tr>
<th>County</th>
<th>Group A #</th>
<th>Group B #</th>
<th>Total</th>
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<tbody>
<tr>
<td>Clark</td>
<td>74</td>
<td>17</td>
<td>91</td>
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<tr>
<td>Washoe</td>
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<td>Carson</td>
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<td>Nye</td>
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<tr>
<td>White Pine</td>
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<tr>
<td>No Response</td>
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**Total** 93 47 140
Group A was asked additional questions to provide a general understanding of what types of providers responded to the survey and to gain additional information about the children they serve and the current related services and/or policies offered by the program.

**Group A: Type of Provider**
Some respondents selected more than one type.

**Group A: Title of Respondent**
The number of children served by the Group A providers ranged from a low of 2 to a high of 185. The average number of children enrolled by all Group A providers was 58 children. Ages of the children served ranged from <1 year to 12 years old, with the majority of children age 0-5.

Group A respondents were also asked whether they provide meals and/or snacks at their facility. Most respondents (91%) provide snacks and 65% provide meals. Several respondents indicated that parents provide the meals and/or snacks for their children, two respondents indicated that they provide hot, catered lunches and one provider indicated that meals are available for purchase.

<table>
<thead>
<tr>
<th>Provides Meals</th>
<th>Provides Snacks</th>
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<tbody>
<tr>
<td>60</td>
<td>85</td>
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<tr>
<td>65%</td>
<td>91%</td>
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Thirty four respondents (37%) from Group A indicated that they use a specific program and/or curriculum for physical activity. Specific examples included: Abeka, Grow Fit, Color Me Healthy, Sparks, Creative Curriculum, Take It Outdoors, Jump Bunch, Kids N Motion and Funshine Express. Others indicated that they have specific activities and/or schedules for physical activity, although no specific curriculum or programs are used.
The following questions were asked of both Group A and Group B in an effort to understand how the proposed policy changes related to nutrition, physical activity and breastfeeding in licensed facilities may impact a center. Responses from both groups have been merged, with a total of 140 respondents. Group A respondents were also asked if their program already has a policy or practice in place that addresses the recommendation.

1. **NAC 432A.380, subsection 1- Nutrition**

*ADDS* language providing that:

Portions [for meals and snacks] must be age-appropriate.

| Number of Owners/ Directors Reporting A Policy Currently in Place: | 30 |

**Selected Comments**

- Age Appropriate according to whom?
- We follow USDA food guidelines on portion/serving size.
- We are on the “food 4 kids” Program
- We use the “color me healthy” program
- Parents have a choice of bringing from home or center provides
- Is “age-appropriate” defined?
- Our center participates in the CACFP program so we already follow portion policies.
- Already do this at my daycare
- I think this is a great policy. Because we already do this.

**Analysis:** Both survey groups overwhelmingly support the addition. However a common question arose about the definition of “age appropriate” and which government entity would define age appropriateness. Many providers indicated having a nutrition plan or program in place to provide guidance on the food served in the program.

**Recommendation:** Include a definition of “age-appropriate” to provide guidance for providers to follow.
2. NAC 432A.380, subsection 4 – Nutrition

DELETES the following language:
A nutritious snack must be offered to all children in the mid-morning and mid-afternoon.

KEEPS the following language:
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.

**Selected Comments**

- The proposed change does not consider the arrival times vary between children
- Not in support of eating every 2 hours, this supports obesity and interrupts learning.
- If lunch is at 11:30-12:00 and rest is from 12:30-2:30 and parents pick up at 3:15, it doesn't seem feasible to have snack. I think not more than 4 hours would be more feasible.
- The word "nutritious" should probably be before "food"
- I do not agree with deleting "A nutritious snack" but think the rest could be removed
- Already do this at my daycare
- Might be clearer if item 4 were part of 3 - Perhaps 3.C.
- Children can go longer than 3 hours without eating. No wonder there is a problem with obesity.

**Analysis:** The majority of those surveyed support the change. For those that do not support, a primary reason is due to the lack of clarity and a concern that this policy has the opposite effect (requiring children to eat too often/too much). There was also concern that the word “nutritious” was removed from this subsection, in reference to snacks.

**Recommendation:** Consider consolidating Subsections 3 and 4 (both related to how often children should eat while in care). Revise sentence to state “Each child must be offered nutritious food...”. Review and consider whether the maximum amount of time between meals/snacks should be extended beyond 3 hours, or whether any flexibility should be allowed (taking schedules into account).
3. 432A. 380, subsection 5 – Nutrition
REVISES the language to provide:
When a childcare facility provides food and beverages that contain added sugars or have little nutritional value, these products must only be served to children in limited amounts as an addition to the meals or snacks served.

Selected Comments

- We try to use food and beverages with low sugar content
- Water is given with snacks or lower sugar snacks are given
- We only do sugary snacks for Holidays
- We eat fruits, vegetables, grains, yogurt
- "that contain added sugars" is better wording than original "which are sweet"
- "limited amounts" is very vague
- This should also take into consideration the sauces/condiments served with food.
- It's difficult to legislate what parents send for lunches/snacks

Analysis: Overall, respondents support this change. Again a significant number question the terminology used – even those in support question how “limited amounts” will be defined.

Recommendation: Address the term “limited amounts” by giving some direction or definition to provide guidance.
4. NAC 432A.380, subsection 5- Nutrition

ADDS the following guidelines to facilities that provide milk and/or juice:

(a) Serve other milk equivalent products (yogurt, cottage cheese) using low-fat products for 2 years and older;
(b) Serve whole milk to children 12 to 24 months old who are not fed human milk, or serve reduced fat milk unless otherwise prescribed by a physician; and
(c) Serve skim or 1% milk to 2 year olds and older.
(d) Only serve 100% juice, no added sweeteners.
(1) Serve no fruit juice to children younger than 12 months;
(2) No more than 4-6 ounces juice per day for 1 to 6 year olds;
(3) No more than 8-12 ounces juice per day for 7 to 12 year olds;
(4) Offer juice (100%) only during meal times.

Selected Comments

- Do not support #4. Support A-d & 1-3. A-d & 1-3 are "food for kids" policy
- I support all of the above except juice at meals instead of snack times.
- I follow "Food for Kids" requirement. so no comments on the other
- This industry is way over regulated as it is. If you keep micro managing private childcare and adding more and more regulations you will push us out of the industry
- b) serve reduced fat milk unless... take out d), it is confusing
- I do not agree with serving only skim or 1% to 2 yrs. & older. I believe 2% (reduced fat) is still good for this age group.
- There should be no juice until preschool 4 yrs.
- I feel parent/family input should be considered & listened to. I feel that juice should be offered.
- I would recommend allowing no juice.

Analysis: Although the majority of respondents supported the addition, responses varied and support for this provision was lower than the others. The biggest concern was in regard to juice. While some argued that juice should not be offered at all (including the State ECAC workgroup*), others argued that there shouldn’t be so many restrictions on juice. Providers also mentioned parent input and the fact that many parents bring juice for their children. Serving Skim milk was also thought to be too inflexible. *See Attachment A: Nevada Early Childhood Advisory Workgroup Recommendations

Recommendation: Parent choice should be included – insert a reference in this section which provides that “unless otherwise directed by the parent or guardian...” In regard to subsection (d) – one recommendation is to disallow juice altogether. The other is to keep the language as written and/or remove subsection (d)(4), which would allow juice during snack time, but still limit the amount of juice a child could have per day. If juice is allowed, provide additional training to providers on the health impacts of juice (even 100% fruit juice) and offer recommendations for educating & working with parents on what to bring to preschool.
5. NAC 432A.380, subsection 9 – Nutrition

ADDS language providing that:
Whenever possible, members of the staff of the facility must eat items that meet standards of the Child and Adult Care Food Program [when eating] with the children, encourage them to eat a variety of food, observe table manners, and teach children appropriate portion sizes by using plates, bowls, & cups that are developmentally appropriate to nutritional needs.

Selected Comments

- We put our snacks on napkins- it would be very wasteful to have to use a bowl or plate
- a) I suggest staff are encouraged to eat healthy foods. b) I think it is too much to control dish size because we might use inexpensive paper plates that are not proportional to portion size. It is a difficult expectation.
- That is going over the top. I would say educating the parents on portion control is enough.
- I like the softer language, "whenever possible"
- There should be an exemption for those workers who have dietary restrictions/medical issues
- We are role model and encourage family meals together and children learn portion controls.
- This may be an issue for centers that do not provide snacks, but allow parents to.
- We use foster family style dining.

Analysis: The majority of respondents supported this policy change, in fact many already follow. “Whenever possible” provides some flexibility for staff with dietary restrictions and for those children who bring in their own meals. Requiring or mandating the use of “plates, bowls & cups” would provide an unnecessary financial burden on programs that do not already have these materials.

Recommendation: Sufficient flexibility exists in language to address concerns presented. Training needed on intent and strategies.
6. NAC 432A.380, subsection 12 – Nutrition

**ADDS** a subsection which provides that:

When child care facilities provide meals or snacks, the meal patterns issued by the Child and Adult Care Food Program must be followed.

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<table>
<thead>
<tr>
<th>Support</th>
<th>Oppose</th>
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<tbody>
<tr>
<td>75%</td>
<td>18%</td>
<td>8%</td>
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**Selected Comments**

- Not familiar w/ CACF program. In addition we are a kosher facility and not sure if impacts us or not
- We do not participate in the food program and are not educated in the requirements
- Food for Kids will visit us twice a year and guide us - all that need to be done
- We make every effort to have at least 2 food groups in our snacks. Crackers are whole grain, juice when served 100% juice no sugar added
- This may be an issue for centers that do not provide snacks, but allow parents to
- Needs clarity for programs without meal programs
- I wonder what resources will support this subsection costs of training, food handling and food purchases
- Healthy foods are more costly then junk food

**Analysis:** Most respondents support this addition but some are not familiar with the CACF program. There are some concerns about potential costs and how to address those facilities that do not provide meals/snacks.

**Recommendation:** Keep language as is and provide some training on options, as long as the CACF allows for cultural differences. The term “When child care facilities provide meals or snacks” removes the concern presented regarding what parents bring in. Educate providers on different cost saving options for providing healthy foods.
7. NAC 432A.385, subsection 1 – Snacks and Meals

**ADDS** language which provides that:

The staff of each facility shall…develop with the parents of a child a plan for feeding the child, which must include, without limitation…introduction of age appropriate solid food…

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**Selected Comments**

- Nutrition assessments completed as child enters a new CACFP age category to work with parents on plan to introduce new foods
- This seems like a parent’s choice. We feed what the parent sends.
- We have this in our infant/toddler handbook as well as our "needs and service" book
- Define age-appropriate
- Age appropriate solid food training needed
- These plans may become complicated to maintain in the youngest children, since they would need to be modified often
- Does this mean a written plan?

**Analysis:** Many respondents feel that they are inadequately trained to create a nutritional plan. Some of the respondents have a mode to create a parent nutritional plan. Parent input is very important to many of the respondents.

**Recommendation:** Clarify if “written plan” is required. Define “age-appropriate” within the regulation. Provide adequate training to assist providers in preparing plans and working with parents to identify healthy food options.

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Number of Owners/Directors Reporting A Policy Currently in Place: 25
8. NAC 432A.385, subsection 1- Snacks and Meals

**ADDS** a section which provides that:

The staff of each facility shall...develop with the parents of a child a plan for feeding the child, which must include, without limitation...encourage/support breastfeeding by onsite arrangements for moms to breastfeed.

![Pie Chart]

**Selected Comments**

- Encourage breastfeeding provide a space for mothers to breastfeed; have a lactation education on site through WIC
- It is disruptive to the program. We encourage pumping and have had no issues as mom's work
- This is the parent/pediatrician responsibility
- I feel in home providers should have the right to allow breastfeeding in their homes
- **May not be the centers role**
- It's nice to provide accommodations for breastfeeding, but could be a hardship for some centers to provide that space/privacy
- This DEFINITELY needs to happen & a bathroom is NOT supportive environment conducive to breastfeeding
- Might want to add something like "for babies under 12 months" (Headstart turned away a 4-yr-old situation)

**Analysis:** Both survey groups support this addition, although not at the same rate as other provisions. Concerns arose regarding what type of space would be required and whether all programs would have the space/capacity to fulfill the requirement. Others indicated that this was not a role/responsibility of the program.

**Recommendation:** Define what “onsite arrangements” means (and what it does not mean – ie: bathroom). Clarify that programs do not have to require or ask mothers to breastfeed on site, but all should allow and provide the space for mothers that chose to do so. Provide additional education and resources on this topic.

**Number of Owners/ Directors Reporting A Policy Currently in Place: 18**
Items 9 to 14 below are responses to questions regarding the inclusion of specific definitions related to physical activity. Group A respondents were not asked to indicate whether a current policy exists in their program for this group of questions.

9. (a) “Moderate physical activity” means use of upper and lower limbs, which creates a mild increase in heart rate and breathing, like brisk walking, skipping, bicycling, hiking, dancing, bouncing and kicking a ball and gardening.

### Selected Comments

- I don't have any problem with this and this is what I taught my children in my home.
- If the children want to do it. I won't make them.
- I am concerned that these definitions will be used in ways that are impossible to regulate 10, 11, 12, 13, & 15 year olds.

#### Analysis:
Overall, respondents supported including this definition. There was concern regarding enforcement/tracking, as well as the examples that are used in the definition (age appropriate for young children).

#### Recommendation:
Review examples in definition for age appropriateness.
10. **(b) “Vigorous physical activity”** means whole body movements that include use of the upper and lower limbs, which create a substantial increase in heart rate and breathing, like running, jumping, tag, chasing games, soccer, basketball, swimming and heavy yard work.

### Selected Comments

- We also have this policy in place
- This up to individual
- This is already in place
- Do not have many resources for age appropriate activity 2-8 except running
- Too many kids will get hurt
- Is not appropriate for younger children like infants/toddlers
- Use more early childhood appropriate activity wording.
- Need to provide age appropriate verbiage
- Competitive games are dangerous nor appropriate.

### Analysis:
A major majority of respondents agree with the definition change. A pattern of concern was about the activity of toddlers. It appears some of the concern is with type of activities used as examples and related safety.

### Recommendation:
Review examples in definition for age appropriateness.
11. (c) “Muscular strengthening activities” means the engagement of muscles in age-appropriate, resistance work that is greater than normal daily living; such as using own body weight to swing on playground equipment, tug of war, climbing, tumbling, catch/throw a ball, sit-ups, push-ups, and pull-ups.

- I have my students for 2.5 hours.
- We may not have time for all of this!
- We also have this policy in place
- We all do this everyday
- Pull-ups are not appropriate for preschool age children.
- Need to provide age appropriate verbiage
- Pushups, pull ups for a 3 or 4 yr. old?

**Analysis:** Although most respondents supported the definition changes, issues of age appropriate examples was a consistent concern. Consideration of time constraints for part time care services also arose as an issue.

**Recommendation:** Review examples in definition for age appropriateness.

12. (d) “Bone strengthening activities” means engagement in age-appropriate activities that produce force on the bones to promote bone growth and strength, such as running, jumping, skipping, tumbling, hopscotch, gymnastics, and jumping rope.

- Combine "bone strengthening activities" with moderate and vigorous physical activity
- We also have this policy in place.
- Children are too young
- Need to provide age appropriate verbiage
- I agree with definition
- Add examples for infants, such as "crawling, cruising" etc.

**Analysis:** Overall, respondents support this definition. Again, concerns arose regarding examples provided.

**Recommendation:** Review examples in definition for age appropriateness.
13. (e) “Sedentary activity” means no limb movement, sitting or standing, which provides little or no physical activity and/or exercise, such as reading, playing a board game, riding in a wagon or drawing.

**Selected Comments**

- I don't think reading, playing board game, riding in a wagon and drawing is sedentary. They are actively engaged in an activity using motor skills and cognitive skills.
- Agree with definitions. Examples given are necessary also.

**Analysis:** Respondents overall supported inclusion of the definition. Concerns arose over the examples provided and concern that the examples are used as negatives which discourage learning and educational engagement in early childhood settings.

**Recommendation:** Review examples in definition for age appropriateness and to ensure that regulations do not discourage learning activities.

14. (f) “Screen/media time” means time spent watching TV, videotapes, or DVDs; playing video or computer games; and surfing the internet.

**Selected Comments**

- We as a preschool have 4 hours of TV in 12hrs operation
- Videos are shown only on special days i.e.: show and tell or chapel days for no more than 10 or 15 minutes
- May need to add cell phone or smart phones or iPad to the list
- Does it include interactive smart board use?
- Individual crossed out "surfing the internet"

**Analysis:** Respondents supported the definition, but need more clarification on what is included.

**Recommendation:** Review what is included in definition.
A licensee of a facility shall provide a program of physical activity that includes moderate to vigorous activity, such as running, climbing, dancing, skipping and jumping for all children. When weather and environmental conditions do not pose a significant health or safety risk, daily periods of outdoor play shall be provided.

All children must have a daily period of outdoor play. A licensee of a facility shall provide opportunities for active play which builds muscles such as climbing, jumping, running and playing with toys which have wheels.

Selected Comments

- "A program" - can this be self-taught? “self-constructed” sounds vague
- If I have to provide more stuff to the state with daily physical activity, I'm not supporting it. Too much already needed by the State.
- Some parent don’t want their kids to go outside. If the kids want to do it. it's ok
- Shall provide.... activity, whether indoors or outdoors --> specify
- Define temperate & conditions that may pose risk.
- Take into consideration: children ages 0-3 and special needs children
- May need a definition of when not to play outside. Everyone has a definition that is different

Analysis: Most respondents support this policy, however several clarifying questions arose. What does “program” mean? Does it need to be formal/written? Ensure that all age groups and special needs are considered, as well as parent choice. Also a question of enforcement/tracking – requiring too much of programs through regulation.

Recommendation: Define and/or clarify what “program” is intended to mean. Ensure that parental choice and special needs are addressed – provide some flexibility for special circumstances (beyond weather/environment).
16. NAC 432A.390, subsection 4 – Standards for Programs

ADDS language which provides that:

Caregivers/teachers shall participate in children’s active games at times when they can safely do so.

![Pie chart showing support, oppose, and no opinion with 90% support and 6% oppose]

| Number of Owners/ Directors Reporting A Policy Currently in Place: 16 |

**Selected Comments**

- No Problem
- Worker comp claims increase?
- Our staff always participates in outside play
- Worry again about vague language.
- Issue with supervision at all times due to staffing levels
- Wish this was mandatory! Teachers/caregivers should be actively involved ALWAYS
- Teachers need to be monitoring the entire outdoor area for safety and behavior. I support teachers being a good role model for PA, but this can't be legislated.

**Analysis:** Overall, respondents support this provision. Some questions regarding safety/supervision arose, particularly around ensuring that teachers are able to supervise the children while they are playing/active.

**Recommendation:** Clarify that “...when they can safely do so” refers not only to the physical capabilities of the teacher, but also their ability to supervise and ensure the safety of the children in their care.
17. (a) Infants (birth to 12 months) shall be offered opportunities in settings that encourage and stimulate movement experiences and active play for short periods of several times a day.

![Pie chart showing support, oppose, and no opinion percentages]

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<thead>
<tr>
<th>Support</th>
<th>Oppose</th>
<th>No Opinion</th>
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<td>79%</td>
<td>4%</td>
<td>17%</td>
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**Selected Comments**

- Our RIE philosophy prohibits the use of swings/high chairs or walkers. Babies are on the floor moving as much as they are capable.
- When I do have infants I use tummy time.
- It should be stated that infants need outside play like older children. A lot of centers NEVER take their infants outside.
- What's "short period"? 10 min? 5 min?
- What is "several"

**Analysis:** Most respondents support this policy. Definition/clarity of “short periods” and “several” needed.

**Recommendation:** Include definitions for “short periods” and “several”.

18. (b) Toddlers (12 months to 36 months) include:

1. Two or more structured activities for a period of five to ten minutes each event;
2. At least 20 minutes of active play for every three (3) hours of care.

![Pie chart showing support, oppose, and no opinion percentages]

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<thead>
<tr>
<th>Support</th>
<th>Oppose</th>
<th>No Opinion</th>
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<tr>
<td>82%</td>
<td>7%</td>
<td>11%</td>
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**Selected Comments**

- I think the 3 hour stipulation is not feasible. If students have two 30 minute sessions from 7:30-5:30, it seems appropriate.
- It take away from their creativity.
- It's not in our policy- but we do this
- Define structured activities what is meant by “event”?
- 12 months is too young. Structured activities are NOT age appropriate at 12-24 (or older) months. (2): I feel it needs to be child guided.
- I don't like the word event
- Hard to have structured activities with this age group. Activities should be offered as teacher guided.

**Analysis:** Although the majority of respondents support this change, a significant number question the appropriateness of structured activities for this age group.

**Recommendation:** Define “structured activities” to provide clarification to providers. Provide training and resources for implementation.
19. (c) Preschoolers (3 years to 5 years) include:
(1) Two or more structured activities for a period of five to ten minutes each event;
(2) At least 30 minutes of active play for every three (3) hours of care.

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<tr>
<th>Support</th>
<th>Oppose</th>
<th>No Opinion</th>
</tr>
</thead>
<tbody>
<tr>
<td>85%</td>
<td>6%</td>
<td>8%</td>
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</table>

**Selected Comments**

- It's not in our policy - but we do this
- We have 30 minutes in morning, 30 minutes in afternoon and 10 minutes here or there throughout the day
- I think the 3 hour stipulation is not feasible. If students have 2-30 minute sessions from 7:30-5:30, it seems appropriate.
- Define structured activity. Language is confusing
- Time limits are troublesome - can licensing professionals enforce such detail?
- 40-50 minute out of 3 hr. for physical activity leaves little time for academics

**Analysis:** Overall, respondents support this policy. Additional definitions are needed and there are questions about balancing these time requirements with educational curriculum requirements. Ages 3 to 5 are preschool age, with much focus on school readiness – ensure these requirements do not conflict.

**Recommendation:** Provide examples of structured activities. Provide training/technical assistance on integrating physical activity with educational development and learning curriculum.
20. (d) Children and adolescents (6 years to 17 years) shall engage in at least 30 minutes of active play for every three (3) hours of care as follows:

(1) Aerobic: Most of the 30 or more minutes per three (3) hours of care shall be either moderate – or vigorous – intensity aerobic physical activity, and should include vigorous – intensity physical activity at least 3 days a week.

(2) Muscle-strengthening: As part of their 30 or minutes per day of physical activity, children and adolescents shall include muscle-strengthening physical activity, like climbing, on at least 3 days of the week; and

(3) Bone-strengthening: As part of their 60 or more minutes per three (3) hours of care of physical activity, children and adolescents should include bone-strengthening physical activity, like jumping, on at least 3 days of the week.

Selected Comments

- I think the 3 hour stipulation is not feasible. If students have 2-30minute sessions from 7:30-5:30, it seems appropriate.
- Verbage is a bit confusing
- Too specific
- Confusing and unenforceable
- Does not work in school setting
- I am more comfortable with time frames with children 8-17 yrs. I & my organization support physical activity thru play. Again time and enforcement.

Analysis: Although the majority support this provision, support is not as strong as in other sections. Primary concerns are around the specificity of this section – hard to implement and hard to enforce. Time considerations are also a prominent factor – addressing needs and ability of providers to educate children with so many requirements for physical activity time. Many respondents did not provide an opinion since this is an age group that many respondents do not serve.

Recommendation: Provide more flexibility in this provision and consider reducing the specificity in the requirements. Identify how providers would track and how licensing would enforce/review.
21. NAC 432A.390, subsection 5 – Standards for Programs
ADDSe language which provides that:
A licensee of a facility shall ensure that children not be involved in sedentary activity for more than 60 minutes at a time with the exception of nap/sleep time.

Selected Comments

- What if students are doing math/reading/science/art/social studies/etc. for 2 hours work cycle? Montessori believes in long periods of uninterrupted time to focus and learn. This would be very detrimental to a child's learning!
- Needs correct definition of sedentary
- Age appropriate! Needs to be defined. Library, reading, or art should be allowed.
- I have 2 homeschoolers that have on occasion spent more than 60 minutes on an activity, ie: reading, library research, art project, etc...
- 60 minutes is too long

Analysis: Respondents supported this provision. However, some questioned whether learning activities should be viewed as sedentary activities, indicating that some require more than 60 minutes for curriculum. Others indicated that 60 minutes was too long.

Recommendation: Clarify intent in this provision and address need to provide instruction/curriculum with need to engage in active behaviors. Provide education/training on integration of curriculum with active play and physical activity.
22. NAC 432A.390, subsection 6 – Standards for Programs

ADDS language which provides that:

A licensee of a facility shall limit screen/media time as follows:

(a) Do not utilize screen/media viewing with children younger than two years of age;

Selected Comments

- We have 20-30 minutes on Friday afternoons after 4:00 pm most but not all 2 year olds are gone
- We do not do movie time often - maybe 3-4 times/year but on snowy inside days it's such a treat for even 2 year olds to have some movie time!
- All my children watch "signing time" on PBS M-F to learn sign language - my babies are learning + using sign!!
- Unless that student is eligible under the IDEA requires such through his or her IEP.
  (Communication devices) - Some kids need technology to communicate
- We have learning videos for little ones
- I allow my not quite 2 year olds to watch Sesame Street, they love it.

Analysis: While most respondents are supportive of the change and intent, some do not understand why screen time is inappropriate for this age group. Many providers use multimedia devices as learning tools to engage their children. Providers also indicated concern for children who use technology as a tool to communicate.

Recommendation: Provide education and training to providers on how to engage young children without the use of screen/media time, as well as the impact of screen/media time on young children. Provide exceptions for children with special needs, as appropriate (require documentation of need in the child's plan).
23. NAC 432A.390, subsection 6 – Standards for Programs
ADDS language which provides that:
A licensee of a facility shall limit screen/media time as follows:
(b) Limit total screen/media viewing for children 2 years of age and older to no more than 30 minutes a day for educational purposes or physical activity only:

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<th>Support</th>
<th>Oppose</th>
<th>No Opinion</th>
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<td>73%</td>
<td>12%</td>
<td>15%</td>
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Selected Comments

- I suggest no screen/media time
- (Once week viewing-only)? Field trips are longer than 30 min - Disc. Museum. Movies are 90minutes for older children during summer
- This is a computer world. They need to get use to looking at screens
- No media viewing except for daily meetings (Vegas PBS)
- Should be broken down by age group as well maybe 2-6 yrs. old 30min/day. 6-12 year olds no more than 60min/day
- Seems excessive depending on how long they are in care.
- School aged students kids are required to spend more than 30min/day using screens. I do support this for 2-5 year old children, however
- This can be an enormous amount of time for 2.5 hr. program

Analysis: Both survey groups support this change. Some respondents oppose the time limit and others believe that no screen/media time should be allowed. Some discussion about incorporating time frames into the hours of care (some kids are only in care for 2.5 hours, others up to 10 hours – how do we account for the difference?).

Recommendation: Consider revisions to align time with the amount of time in care. Provide education and training to providers on alternate forms of learning. Provide exceptions as appropriate.
24. NAC 432A.390, subsection 6 – Standards for Programs

ADDS language which provides that:
A licensee of a facility shall limit screen/media time as follows:
(c) Limit computer use to no more than 15 minutes periods for children 2 years and older except for school-age children completing homework assignments;

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<tr>
<th>Support</th>
<th>Oppose</th>
<th>No Opinion</th>
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<tbody>
<tr>
<td>65%</td>
<td>22%</td>
<td>13%</td>
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</table>

Selected Comments

- We don’t use computers
- Home school students have assignments that parents want completed online that take longer than 15 minutes
- Children may use it for games in free time only
- More specific. 30 min. total of play.
- Unless that student is eligible under the IDEA requires his or her IEP.
- Tech embedded in curricula, can’t be limited
- Too limiting, kids need access to media as long as possible

Analysis: Although the majority of respondents support this policy, there is not as much support as for other provisions. Concerns arose regarding educational components that utilize computers (even for children younger than school age) and children with special needs. Several suggestions to limit computer time for non-educational purposes only.

Recommendation: Consider revisions to allow the use of computers and other electronic devices for educational purposes and allow exceptions for children with special needs.
25. NAC 432A.390, subsection 6 – Standards for Programs

ADDS language which provides that:
A licensee of a facility shall limit screen/media time as follows:
(d) Screen/media time viewing should not be allowed during meal or snack time.

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<tr>
<th>Support</th>
<th>Oppose</th>
<th>No Opinion</th>
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<tr>
<td>85%</td>
<td>11%</td>
<td>4%</td>
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</table>

Selected Comments

- Already too many regulations...just increases cost of running the business that can't be passed on to families that can't afford it.
- Some kids need technology to communicate
- Are you kidding me! Centers actually do this?!
- Totally agree

Analysis: Overall, respondents support this policy – with exceptions for children with special needs. Some concern regarding over-regulation.

Recommendation: Allow exceptions for children with special needs, as appropriate and outlined in their educational plan.
26. NAC 432A.390, subsection 7 – Standards for Programs
ADDs and revises language which provides that:
Every child who is in a facility for more than 5 hours per day shall have an opportunity for sleep and rest during the day... For children who are unable to sleep, the facility shall provide time and space for quiet play.
DELETES language which states:
A child who cannot sleep must rest during the period provided for a nap.

Selected Comments
- I would suggest "quiet activity" rather than "quiet play"
- The policy needs a length of time clarification
- The old language is fine. All children under age five need rest.
- Don't agree with section "For children who are unable to sleep, the facility shall provide time and space for quiet play.

Analysis: Although this provision is supported by the majority, there is clear opposition to this change. Many respondents indicated the need for rest/sleep among young children and others indicated that establishing a separate location and supervision for these groups would be a burden on the programs.

Recommendation: Clarify intent of this provision. Is the intent to provide an opportunity for physical activity? If so, staffing and space could be a legitimate concern for many providers. Consider options for this provision.

Number of Owners/ Directors Reporting A Policy Currently in Place: 24
27. NAC 432A.400, subsection 2 – Discipline

ADDS language which provides that:
A member, employee or other person associated with a facility shall not, for any reason:
(g) withhold or force physical activity as a form of discipline.

Selected Comments

- Withholding physical activity is a good form of discipline
- Our policy is positive reinforcement
- Wouldn't this just add to the issue?
- We encourage, but not as discipline
- Children who do not do "clean-up jobs" have to finish their job before joining the rest of the class outside.
- If a child is disciplined it should only be for how old they are in minutes! Having them miss outside play is not right.

Analysis: The vast majority of respondents support this provision.

Recommendation: None.
Respondents were also asked to answer two additional questions to gain their perspective on the feasibility of implementing these regulations, as currently drafted. Below are the responses by Group.

In your opinion, do you believe that your early child care education center will be able to successfully implement all the NAC Policy Changes required to meet National Health & Safety Performance Standards if you receive proper training and technical support from the State of Nevada?

<table>
<thead>
<tr>
<th>Group A (Owners/Directors)</th>
<th>Group B (Teachers/Community)</th>
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<tbody>
<tr>
<td>Yes – 75%</td>
<td>Yes – 58%</td>
</tr>
<tr>
<td>No – 6.5%</td>
<td>No – 22%</td>
</tr>
<tr>
<td>Not Sure – 16%</td>
<td>Not Sure – 19%</td>
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</tbody>
</table>

- Financial impact of additional staffing for non-napping children, purchasing of age appropriate serving size containers, etc.
- To provide materials to support changes will cost us money. Will we be getting more grants or supply "care packages"? ie... smaller bowls, plates, spoons, extra outdoor equipment
- The only problem I can even see is if I have to start serving snacks on plates or bowls. That would have an economic impact!
- I am discouraged that Health Standards would be so cumbersome as to interfere with academic standards
- You people need to come back to earth. This is the real world. This stuff sounds crazy to me. You want to turn childcare into a gym. The schools don’t even do that. It will have an impact on my time. We don’t have time nor this stuff

Do you believe that these new policies will have an economic impact on your operating budget?

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<tr>
<th>Group A (Owners/Directors)</th>
<th>Group B (Teachers/Community)</th>
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<tbody>
<tr>
<td>Yes – 33%</td>
<td>Yes – 36%</td>
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<tr>
<td>No – 41%</td>
<td>No – 33%</td>
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<tr>
<td>Not Sure – 26%</td>
<td>Not Sure – 31%</td>
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