

LCB File No. R203-03

**PROPOSED REGULATION OF THE DIVISION  
OF CHILD AND FAMILY SERVICES OF THE  
DEPARTMENT OF HUMAN RESOURCES**

**New Regulation:**

*Completion of program for cardiopulmonary resuscitation by caretaker.*

*1. Each person who is employed in a child care facility, other than in an accommodation facility, must have completed a program in cardiopulmonary resuscitation on infants and toddlers.*

*2. The course must be taught by a certified instructor who meets the standards of the American Heart Association or the American Red Cross and includes the ages of the children for which care is being provided. A copy of the current CPR certification must be kept on file at the facility.*

**IMPACT:** Currently, three of the five licensing agencies require CPR training for all child care providers. Providers licensed by all child care licensing agencies would now be required to complete CPR training and this training must include CPR for both infants and toddlers. There will be financial impact to the provider due to CPR training costs.

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**CURRENT:**

**NAC 432A.100 “Family home” defined.** “Family home” means any facility in which the licensee regularly provides care without the presence of parents, for at least five and not more than six children.

**DRAFTED:**

**NAC 432A.100 “Family home” defined.** “Family home” means ~~any facility~~ *a facility occupied by the licensee* in which the licensee regularly provides *direct* care without the presence of parents, for at least five and not more than six children.

**IMPACT:**

Adding “occupied” and “direct care” to this definition clarifies the owner/operator must live in the residence/facility and be the person providing direct care to the children.

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**CURRENT:**

**NAC 432A.534 Family homes.**

1. In a family home, no more than four of the children may be less than 2 years of age, and no more than two of the children may be less than 1 year of age.
2. A licensee of a family home shall:
  - (a) Have one caretaker on duty at all times;
  - (b) Have a second caretaker on duty whenever four or more of the children in the facility are children with special needs; and
  - (c) Provide an alternate caretaker in case of an emergency.

**DRAFTED:**

**NAC 432A.534 Family homes.**

1. In a family home, no more than four of the children may be less than 2 years of age, and no more than two of the children may be less than 1 year of age.
2. A licensee of a family home shall:
  - (a) Have one caretaker on duty at all times;
  - (b) Have a second caretaker on duty whenever four or more of the children in the facility are children with special needs; and
  - (c) Provide an alternate caretaker in case of an emergency.
3. *A licensee of a family home must occupy the licensed facility and be issued only one child care license.*

**IMPACT:**

Adding “occupied” to this regulation clarifies the owner/operator must live in the residence/facility and be the person providing direct care to the children.

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**CURRENT:**

**NAC 432A.110 “Group home” defined.** “Group home” means any facility in which the licensee regularly provides care for no less than seven and no more than twelve children.

**DRAFTED:**

**NAC 432A.110 “Group home” defined.** “Group home” means ~~any facility~~ *a facility occupied by the licensee* in which the licensee regularly provides *direct* care for no less than seven and no more than twelve children.

**IMPACT:**

Adding “occupied” and “direct” care to this definition clarifies the owner/operator must live in the residence/facility and be the person providing care to the children. This will impact those families who are providing care to children in a facility/site separate from the provider’s main residence.

**Reviser’s Note. To be completed by LCB for the development of a “grandfather” clause. Those providers who currently have multiple sites will be allowed to continue until their license is terminated for whatever reasons.**

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**CURRENT:**

**NAC 432A.536 Group homes.**

1. In a group home, no more than eight of the children may be less than 3 years of age, and no more than four of the children may be less than 1 year of age.
2. A group home must have one caretaker on duty at all times. An additional caretaker must be on duty whenever one or more of the following conditions exist:
  - (a) More than six children are in the facility;
  - (b) More than four of the children are less than 2 years of age; or
  - (c) More than two of the children are less than 1 year of age.Three caretakers must be on duty whenever eight or more of the children in the facility are children with special needs.

**DRAFTED:**

**NAC 432A.536 Group homes.**

1. In a group home, no more than eight of the children may be less than 3 years of age, and no more than four of the children may be less than 1 year of age.
2. A group home must have one caretaker on duty at all times. An additional caretaker must be on duty whenever one or more of the following conditions exist:
  - (a) More than six children are in the facility;
  - (b) More than four of the children are less than 2 years of age; or
  - (c) More than two of the children are less than 1 year of age.Three caretakers must be on duty whenever eight or more of the children in the facility are children with special needs.
- 3. A licensee of a group home must occupy the licensed residence and hold only one child care license.*

**IMPACT:**

Adding “occupied” to this regulation clarifies the owner/operator must live in the residence/facility and be the person providing care to the children. This will impact those families who have more than one home or who are providing care to children in a facility/site separate from the provider’s residence.

**Reviser’s Note. To be completed by LCB for the development of a “grandfather” clause. Those providers who currently have multiple sites will be allowed to continue until their license is terminated for whatever reasons.**

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**CURRENT:**

**NAC 432A.190 Inspections; investigations.**

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. More frequent inspections may be made if the bureau has reason to believe the licensee of a facility is not meeting the requirements of this chapter or chapter 432A of NRS.

2. In conducting inspections and investigations, the bureau may call upon political subdivisions and governmental agencies for assistance. The licensee or applicant shall cooperate with the person conducting the investigation by providing 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. On confirmation of the operation of an unlicensed operator of a facility, the bureau 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.

#### **DRAFTED:**

#### **NAC 432A.190 Inspections; investigations.**

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. More frequent inspections may be made if the bureau has reason to believe the licensee of a facility is not meeting the requirements of this chapter or chapter 432A of NRS.

2. In conducting inspections and investigations, the bureau may call upon political subdivisions and governmental agencies for assistance. The licensee or applicant shall cooperate with the person conducting the investigation by providing 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. If, during or after any inspection, the bureau determines that the facility is not meeting other agency requirements, a license may be revoked or suspended on the same grounds as an initial license as set forth in NAC 432A.220.*

~~3~~ 4. On confirmation of the operation of an unlicensed operator of a facility, the bureau 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.

#### **IMPACT:**

This revision allows the bureau to revoke or suspend an **active** license based upon the facility not meeting health, fire or building requirements. Previously, the Bureau has been able to revoke or suspend a license only when the child care facility is noncompliant with Bureau regulations unless a permit was removed by the appropriate agency.

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#### **CURRENT:**

#### **NAC 432A.306 Requirements for caretakers.**

1. Every caretaker of children in a child care facility must be:

(a) At least 16 years of age;

(b) Able to summon help in an emergency; and

(c) Emotionally and physically qualified to carry out a program which places emphasis on the development of children.

2. No more than 50 percent of the caretakers in a child care center, a child care institution or a preschool may be under 18 years of age. Any caretaker who is under 18 years of age and is employed in such a facility must:
  - (a) Have completed a course in the development of children which is approved by the chief of the bureau; or
  - (b) Be currently enrolled in such a course.
3. A child care facility may not be operated unless a person who is 18 years of age or older is on the premises of the facility.

**DRAFTED:**

**NAC 432A.306 Requirements for caretakers.**

1. Every caretaker of children in a child care facility must be:
  - (a) At least 16 years of age;
  - (b) Able to summon help in an emergency; and
  - (c) Emotionally and physically qualified to carry out a program which places emphasis on the development of children.
2. No more than 50 percent of the caretakers in a child care center, a child care institution or a preschool may be under 18 years of age. Any caretaker who is under 18 years of age and is employed in such a facility must:
  - (a) Have completed a course in the development of children which is approved by the chief of the bureau *or designee*; or
  - (b) Be currently enrolled in such a course.
3. A child care facility may not be operated unless a person who is 18 years of age or older is on the premises of the facility.

**IMPACT:**

The modification of “designee” allows other entities the ability to approve training for child care providers. The five licensing entities have agreed to the Office of Early Care and Education assuming the responsibility of approving and monitoring child care trainers/training through a “Registry” statewide. Currently, each of the five licensing agencies approve trainers/training for those providers licensed within the agency’s jurisdiction. Some child care corporations have multiple facilities licensed by three different licensing agencies based upon the location of the facility. This change would funnel this function into one office, providing consistent determinations of trainer and training criteria for the approval process. The “Registry” would also track the training completed by child care providers statewide. Eventually, all child care providers would need to register into this electronic system at a proposed fee of \$5.00 a year, financially impacting child care providers. This change would impact the licensing agencies as the child care surveyors would have more time to focus on environmental and curriculum issues.

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**CURRENT:**

**NAC 432A.308 Completion of program for administration of first aid by caretaker.**

1. Whenever a child care facility is in operation, at least one of the caretakers on duty must have completed, or be in the process of completing, a program for the recognition of symptoms of illness and the administration of first aid.
2. The program may be carried out in a classroom or on the job. The program must include training in health and the observation and evaluation of symptoms of illness and responses to illness and emergencies, including the administration of first aid to victims of fire, serious injury or the ingestion of poison.
3. A licensee of a child care facility must present evidence to the bureau showing that caretakers on duty while the facility is operating are in compliance with the requirements of this section, described in this subsection. A certificate or other evidence of compliance issued by a community health agency or clinic, community college, university, the Red Cross, an adult education program in home nursing or other appropriate institution is adequate evidence of compliance. If training is done on the job, an affidavit signed by the director is adequate evidence of compliance.

**DRAFTED:**

**NAC 432A.308 Completion of program for administration of first aid by caretaker.**

1. Whenever a child care facility is in operation, at least one of the caretakers on duty must have completed, ~~for be in the process of completing,~~ a program for the recognition of symptoms of illness and the administration of first aid.
2. The program may be carried out in a classroom or on the job. The program must include training in health and the observation and evaluation of symptoms of illness and responses to illness and emergencies, including the administration of first aid to victims of fire, serious injury or the ingestion of poison.
3. A licensee of a child care facility must present evidence to the bureau *or designee* showing that caretakers on duty while the facility is operating are in compliance with the requirements of this section, described in this subsection. A certificate or other evidence of compliance issued by a community health *professional*, agency or clinic, community college, university, the Red Cross, an adult education program in home nursing or other appropriate institution is adequate evidence of compliance. If training is done on the job, *and delivered by a licensed health care professional or health care agency*, an affidavit signed by the director is adequate evidence of compliance.

**IMPACT:**

Including “designee” would allow the Office of Early Care and Education to complete the task of ensuring child care providers in the registry have met all training requirements. Previously, some child care facilities have provided training in first aid or symptoms of illness without qualified trainers. The language changes in these revisions will ensure first aid and symptoms of illness training is provided by qualified trainers. This will impact the rural areas in which it is sometimes difficult to find qualified trainers.

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**CURRENT:**

**NAC 432A.320 Orientation program and basic training.**

1. Newly employed members of the staff must be given an orientation program and trained by the director in the policies, procedures and programs of the facility and the recognition of the symptoms of illness.
2. If required by the director or owner of the facility, a member of the staff shall participate in any specialized training related to child care which is offered in the community where the facility is located.
3. For the purposes of this section, a volunteer who works at least 20 hours per week in a facility and participates in specialized child care training, as defined by the director, is a member of the staff of the facility.

**DRAFTED:**

**NAC 432A.320 Orientation program and basic training *requirements*.**

1. Newly employed members of the staff must be given an orientation program and trained by the director in the policies, procedures and programs of the facility ~~[and the recognition of the symptoms of illness]~~.
2. If required by the director or owner of the facility, a member of the staff shall participate in any specialized training related to child care which is offered in the community where the facility is located.
3. For the purposes of this section, a volunteer who works at least 20 hours per week in a facility and participates in specialized child care training, as defined by the director, is a member of the staff of the facility and *must meet all training requirements as set forth in NAC 432A.323 and NAC 432A.326*.

**IMPACT:**

The proposed changes to #1 do not allow directors of child care facilities to provide training in the recognition of symptoms of illness. This change provides congruency with the revisions drafted in NAC 432A.308, indicating the training must be delivered by a licensed health care professional or health care agency.

The proposed changes to #3 reminds child care providers of training requirements set forth in other sections of the regulations.

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**CURRENT:**

**NAC 432A.323 Initial course of training in child care. (NRS 432A.077) (Refer to page 55)**

1. Each person who is employed in a child care facility, other than in an accommodation facility or a facility that provides care for ill children, shall complete at least 6 hours of training in child care, of which not more than 3 hours may be in training concerning how to perform cardiopulmonary resuscitation, within 6 months after commencing his employment unless he has completed such training within the previous 12 months.
2. The training required pursuant to subsection 1 must be designed to:
  - (a) Ensure the protection of the health and safety; and



(b) Promote the physical, moral and mental well-being, of each child accommodated in the facility. If the facility is a special needs facility, the training 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 established or approved by the chief of the bureau.

3. Evidence that an employee has completed the training must be included in his personnel file kept at the facility.

**DRAFTED:**

**NAC 432A.323 Initial course of training in child care. (NRS 432A.077) (Refer to page 55)**

1. Each person who is employed in a child care facility, other than in an accommodation facility or a facility that provides care for ill children, shall complete at least ~~6~~ **9** hours of training ~~[in child care, of which not more than 3 hours may be in training concerning how to perform cardiopulmonary resuscitation, within 6 months after commencing his employment unless he has completed such training within the previous 12 months.]~~ *within the first 90 days of employment in child care. The training should be: cardiopulmonary resuscitation which must include both infants and children, first aid, symptoms of illness, and child abuse and neglect recognition and reporting requirements.*

*The additional 6 hours of training set forth in NAC432A.326 required for this initial 12-month interval, must include at least three hours of training in Child Development courses.*

2. The training required pursuant to subsection 1 must be designed to:

(a) Ensure the protection of the health and safety; and

(c) Promote the physical, moral and mental well-being, of each child accommodated in the facility. If the facility is a special needs facility, the training 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 established or approved by the chief of the bureau *or designee*.

3. Evidence that an employee has completed the training must be included in his personnel file kept at the facility.

**IMPACT:**

These revisions clarify what is required within the first 90 days of employment and thereafter. The intent of these revisions is to increase the quality of child care by requiring training in specific areas, such as child abuse and neglect reporting and the ages and stages of child development. Providers licensed by the Bureau will now be required to complete CPR training and this training must include CPR for both infants and toddlers. There will be a financial impact to the provider due to CPR training costs.

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**CURRENT:**

**NAC 432A.326 Continuing training. (NRS 432A.077) (Refer to page 55)**

1. After completion of the initial training required pursuant to NAC 432A.323, each director and licensee of a child care facility and each caretaker who is employed at the facility shall



participate in a program of training in child care for at least 12 hours in each year, of which not more than 3 hours may be training in how to perform cardiopulmonary resuscitation. The program may be in the form of:

- (a) Workshops or conferences;
- (b) Formal training; or
- (c) Training at a child care facility during the period of employment.

2. The program must be provided or approved by the chief of the bureau.

**DRAFTED:**

**NAC 432A.326 Continuing training. (NRS 432A.077) (Refer to page 55)**

1. After completion of the initial training required pursuant to NAC 432A.323, each director and licensee of a child care facility and each caretaker who is employed at the facility shall participate in a program of training in child care for at least ~~12~~ **15** hours in each ~~year~~ **12-month interval**, of which not more than 3 hours may be training in how to perform cardiopulmonary resuscitation *which must include infants and children. Cardiopulmonary resuscitation training must be provided by a certified instructor. The training hours for first aid and the symptoms of illness will be accepted only once every three years.* The program may be in the form of:

- (a) Workshops or conferences;
- (b) Formal training; or
- (c) Training at a child care facility during the period of employment.

2. The program must be provided or approved by the chief of the bureau *or designee*.

**IMPACT:**

There will be an impact as the training requirement increases from 12 to 15 hours each year. Some of the licensing agencies have required CPR yearly, utilizing 3 of the previous twelve hour training requirement. Additionally, these revisions limit child care providers from taking first aid and symptoms of illness training every year. These clarifications will motivate providers to acquire training in other critical areas of child care.