

28-4-114a. Initial and ongoing professional development training. If an applicant, an applicant with a temporary permit, or a licensee is not an individual, the applicant, applicant with a temporary permit, or licensee shall designate an individual to meet the requirements of this regulation.

(a) Orientation.

(1) Each person shall, before applying for a license, complete an orientation program on the requirements for operating a facility, provided by the health department or the secretary's designee that serves the county in which the facility will be located.

(2) Each applicant, each applicant with a temporary permit, and each licensee shall provide orientation to each individual who will be caring for children about the policies and practices of the facility, including duties and responsibilities for the care and supervision of children. Each provider shall complete the orientation before the provider is given sole responsibility for the care and supervision of children. The orientation shall include the following:

(A) Licensing regulations;

(B) the policies and practices of the facility, including emergency procedures, behavior management, and discipline;

(C) the schedule of daily activities;

(D) care and supervision of children in care;

(E) health and safety practices; and

(F) confidentiality.

(b) Health and safety training. Each applicant, each applicant with a temporary permit,

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each licensee, and each provider shall complete health and safety training approved by the department secretary.

(1) Each applicant and each applicant with a temporary permit shall complete the training not later than 30 calendar days after submitting an application for a license.

(2) Each provider shall complete the training before the date of employment or not later than 30 calendar days after the date of employment.

(3) Each licensee whose license was issued before ~~the effective date of this regulation~~ September 1, 2016 and who has completed the training in the subject areas specified in paragraphs (b)(4)(A), (B), and (C) shall ~~complete the training within one calendar year after the effective date of this regulation~~ be exempt from training in the subject areas specified in paragraphs (b)(4)(D) through (I). Each provider who was employed in at the facility before the ~~effective date of this regulation~~ September 1, 2016 and who has completed the training in the subject areas specified in paragraphs (b)(4)(A), (B), and (C) shall ~~complete the training within one calendar year after the effective date of this regulation~~ be exempt from training in the subject areas specified in paragraphs (b)(4)(D) through (I).

(4) The health and safety training shall include the following subject areas:

(A) ~~At least two clock hours of training in~~ Recognizing the signs of child abuse or neglect, including prevention of abusive head trauma, and the reporting of suspected child abuse ~~and or~~ neglect;

(B) ~~at least two clock hours of training in~~ basic child development, including supervision of children; and

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~~(C) at least two clock hours of training on safe sleep practices and sudden infant death syndrome if the individual will be caring for children under 12 months of age;~~

(D) prevention and control of infectious diseases, including immunizations;

(E) prevention of and response to emergencies due to food and allergic reactions;

(F) building and premises safety, including identification of and protection from hazards that could cause bodily injury, including electrical hazards, bodies of water, and vehicular traffic;

(G) emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event, including violence at a facility;

(H) handling and storage of hazardous materials and the appropriate disposal of bio-contaminants, including blood and other bodily fluids or waste; and

(I) precautions when transporting children.

(c) Pediatric first aid and pediatric cardiopulmonary resuscitation (CPR) certifications.

Each applicant, each applicant with a temporary permit, each licensee, and each provider shall obtain certification in pediatric first aid and pediatric CPR as specified in this subsection.

(1) Each applicant and each applicant with a temporary permit shall obtain the certifications not later than 30 calendar days after submitting an application for a license.

(2) Each provider shall obtain the certifications before the date of employment or not later than 30 calendar days after the date of employment.

~~(3) Each licensee whose license was issued before the effective date of this regulation shall obtain the certifications within one calendar year after the effective date of this regulation.~~

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~~Each provider who was employed in the facility before the effective date of this regulation shall obtain the certifications within one calendar year after the effective date of this regulation.~~

(4) Each individual required to obtain the certifications shall maintain current certifications.

~~(d) Initial professional development requirements. In addition to the professional development requirements in subsections (a), (b), and (c), each applicant, each applicant with a temporary permit, and each primary care provider shall, not later than 30 calendar days following initial application for a license or employment, meet one of the following requirements:~~

~~(1) Have a child development associate credential;~~

~~(2) complete at least 15 hours of professional development training, which may include the training required in subsections (a), (b), and (c);~~

~~(3) have at least three months of previous employment in a facility or in a child care center, as defined in K.A.R. 28-4-420, that has been in continuous operation for three or more years; or~~

~~(4) meet the requirements for a program director of a child care center as specified in K.A.R. 28-4-429 Medication administration training.~~

~~(1) Each of the following individuals shall complete the medication administration training as specified in this subsection:~~

~~(A) Applicant;~~

~~(B) applicant with a temporary permit;~~

~~(C) licensee; and~~

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(D) provider designated to administer medications.

(2) The training shall be approved by the secretary.

(3) Each applicant and each applicant with a temporary permit shall complete the training not later than 30 calendar days after submitting an application for a license and before administering medication to any child.

(4) Each licensee whose license was issued before September 1, 2016 shall complete the training not later than March 31, 2017. The licensee shall not administer medications after March 31, 2017 unless the licensee has completed the training.

(5) Each provider designated to administer medications who is employed at the facility before September 1, 2016 shall complete the training not later than March 31, 2017. The designated provider shall not administer medications after March 31, 2017 unless the designated provider has completed the training.

(6) Each provider designated to administer medications who is employed at the facility on or after September 1, 2016 shall complete the training before administering medication to any child.

(e) Annual professional development training requirements.

(1) In each licensure year, each primary care provider shall meet one of the following requirements:

(1) complete five 16 clock-hours of professional development training; .

(2) maintain current accreditation by the national association for family child care; or

(3) hold a current child development associate credential.

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(2) In each licensure year, each provider who is not a primary care provider shall complete four clock-hours of annual professional development training, based on the provider's job responsibilities and the training needs identified by the licensee.

(f) Documentation. Documentation of all orientation, training, and certifications for each individual shall be kept in that individual's file in the facility. (Authorized by and implementing K.S.A. ~~2010~~ 2015 Supp. 65-508; effective Feb. 3, 2012; amended P-\_\_\_\_\_.)

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28-4-118. ~~Policies relating to illness~~ Medication administration and reporting of suspected child abuse or neglect. (a) ~~Non-prescription medications shall be administered to children only with permission of the parent or guardian. A record shall be kept~~ Medication administration.

(1) Each applicant with a temporary permit and each licensee shall designate at least one provider to administer medications to children.

(2) If nonprescription medication is to be administered to a child, each designated provider shall meet the following requirements:

(A) Obtain written permission from each child's parent or legal guardian before administering medication to that child;

(B) require that each medication supplied by a parent or legal guardian for the child be in the original container;

(C) ensure that the container is labeled with the first and last name of the child for whom the medication is intended; and

(D) administer each medication according to the instructions on the label.

(3) If prescription medication is administered to a child, each designated provider shall meet the following requirements:

(A) Obtain written permission from each child's parent or legal guardian before administering medication to that child;

(B) keep each medication in the original container labeled by a pharmacist, with the following information:

(i) The child's first and last name;

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(ii) the name of the licensed physician, physician assistant (PA), or advanced practice registered nurse (APRN) who ordered the medication;

(iii) the date the prescription was filled;

(iv) the expiration date of the medication; and

(v) specific, legible instructions for administration and storage of the medication;

(C) consider the instructions on each label to be the order from the licensed physician, PA, or APRN;

(D) administer the medication only to the child designated on the prescription label; and

(E) administer the medication in accordance with the instructions on the label.

(4) Documentation of each medication administered shall be kept on a form provided by the department and maintained in each child's file.

(5) A copy of the documentation of each medication administered shall be made available to the parent or legal guardian of the child.

~~(b) Prescription medications shall be administered only from a container labeled with the child's name, name of the medication, dosage, dosage intervals, name of the physician and the date the prescription was filled. The label shall be considered the order from the physician. A record of medications administered shall be kept.~~

~~(e) (b) Reporting suspected child abuse or neglect. Each child-care provider, as required by law, shall report to the Kansas state department of social and rehabilitation services for children and families or the district court to law enforcement any evidence of suspected child abuse or neglect observed in children enrolled for care within 24 hours. (Authorized by and~~

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implementing K.S.A. 2015 Supp. 65-508; effective, E-80-18, Oct. 17, 1979; effective May 1, 1980; amended May 1, 1981; amended May 1, 1983; amended May 1, 1986; amended Feb. 26, 1990; amended P-\_\_\_\_\_.)

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