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ARCHIVES DIVISION
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NOTICE OF PROPOSED RULEMAKING
INCLUDING STATEMENT OF NEED & FISCAL IMPACT

CHAPTER 414
OREGON DEPARTMENT OF EDUCATION
EARLY LEARNING DIVISION

FILED
09/30/2021 11:07 AM
ARCHIVES DIVISION
SECRETARY OF STATE

FILING CAPTION: Permanently codifying COVID-19 Temporary Rules for Child Care.

LAST DAY AND TIME TO OFFER COMMENT TO AGENCY: 10/22/2021 5:00 PM

The Agency requests public comment on whether other options should be considered for achieving the rule's substantive goals while reducing negative economic impact of the rule on business.

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700 Summer St. NE
Salem, OR 97301

Filed By:
Remember Watts
Rules Coordinator

HEARING(S)

Auxiliary aids for persons with disabilities are available upon advance request. Notify the contact listed above.

DATE: 10/18/2021

TIME: 5:00 PM - 5:30 PM

OFFICER: Remy Watts

ADDRESS: Virtual access only

700 Summer St. NE

Salem, OR 97301

SPECIAL INSTRUCTIONS:

Due to COVID-19, this hearing will be virtual. Please register in advance for this hearing. Find information on how to register for this public hearing at the Early Learning Division calendar (<https://oregonearlylearning.com/early-learning-council/early-learning-council-meeting-calendar/>). Please arrive to the hearing by 5:15 p.m. on October 18 to submit comment.

NEED FOR THE RULE(S):

During the state of emergency, licensed child care has operated under COVID-19 health and safety guidelines that were in addition to licensing rules. The authority for these guidelines came under executive order 20-19. The Early Learning Division (ELD) is permanently codifying a limited number of temporary rules needed to support child health and safety and child care continued operations.

DOCUMENTS RELIED UPON, AND WHERE THEY ARE AVAILABLE:

The ELD relied on previously drafted COVID-19 guidelines that were developed in partnership with the Oregon Health Authority. These guidelines are transitioning to recommendations, but select guidelines are needed to support continued operations. https://oregonearlylearning.com/wp-content/uploads/2021/05/WEB_Updated_Version2.0_Health-and-Safety-Guidelines_ENGLISH.pdf

FISCAL AND ECONOMIC IMPACT:

There are no anticipated fiscal or economic impacts to small businesses (child care providers) or to the Early Learning Division. Proposed rules are within the scope of capacity.

COST OF COMPLIANCE:

(1) Identify any state agencies, units of local government, and members of the public likely to be economically affected by the rule(s). (2) Effect on Small Businesses: (a) Estimate the number and type of small businesses subject to the rule(s); (b) Describe the expected reporting, recordkeeping and administrative activities and cost required to comply with the rule(s); (c) Estimate the cost of professional services, equipment supplies, labor and increased administration required to comply with the rule(s).

(1) Changes in rule are within ELD's current capacity.

(2)(a) There are 868 Certified Family Child Care Homes and 1173 Certified Centers.

(b) There is no anticipated increase in reporting, recordkeeping, or administrative activities for facilities to comply with the rule.

(c) There is no anticipated increased cost to professional services, equipment supplies, labor or administration.

DESCRIBE HOW SMALL BUSINESSES WERE INVOLVED IN THE DEVELOPMENT OF THESE RULE(S):

Child care unions were consulted in the development of these rule changes, as well as English and Spanish engagement with a large group of child care providers.

WAS AN ADMINISTRATIVE RULE ADVISORY COMMITTEE CONSULTED? NO IF NOT, WHY NOT?

There is no anticipated fiscal impact to child care providers as a result of these rule changes.

RULES PROPOSED:

414-205-0055, 414-205-0120, 414-300-0110, 414-300-0120, 414-300-0180, 414-350-0115, 414-350-0160

AMEND: 414-205-0055

RULE SUMMARY: Permanently codifying temporary COVID-19 rules that accept online-only CPR certification obtained during COVID-19 restrictions.

CHANGES TO RULE:

414-205-0055

Training Requirements ¶¶

(1) When a person submits a new application for registration as a family child care provider, OCC shall, prior to approving the registration, receive evidence from the person that the person has:¶¶

(a) Completed the Family Child Care Overview session;¶¶

(b) A current certification in first aid and infant and child CPR. CPR training must have practical hands-on instruction. CPR courses that involve an on-line component with hands-on instruction may be accepted. Strictly on-line CPR training is not acceptable.¶¶

(c) A current food handler certification pursuant to ORS 624.570;¶¶

(d) Have completed a minimum of two hours of training on child abuse and neglect that is specific to Oregon law; ¶¶

(e) Completed OCC approved health and safety training; and¶

(f) Completed OCC approved safe sleep training.¶

(2) When a registered family child care provider submits a renewal application, the OCC shall, prior to approving it, receive evidence from the provider that the provider has:¶

(a) A current certification in first aid and infant and child CPR. CPR training must have practical hands-on instruction. CPR courses that involve an on-line component with hands-on instruction may be accepted. Strictly on-line CPR training is not acceptable.¶

(b) A current food handler certification pursuant to ORS 624.570; and¶

(c) Completed a minimum of ten hours of training during the two years preceding the renewal date. The training must be related to the core knowledge categories in the Oregon Registry. At least six clock hours of the ten hours of training must be in child development or early childhood education. A training on recognizing and reporting child abuse and neglect will be accepted after five years (and every five years thereafter) as part of the ten clock hours of training required for licensing, but will not be accepted as part of the required child development training hours.¶

(d) Completed OCC approved health and safety training. ¶

(A) OCC will accept duplicate training one additional time if it is a Set 2 (intermediate) or Set 3 (advanced) training or above as described by the Oregon Center for Career Development in Childhood Care and Education; and it is not taken within the same license period.¶

(B) The following core knowledge categories are accepted for the child development and early childhood education requirement: Diversity (D), Family and Community Systems (FCS), Human Growth and Development (HGD), Health Safety and Nutrition (HSN), Learning Environments and Curriculum (LEC), Observation and Assessment (OA), Special Needs (SN), and Understanding and Guiding Behavior (UGB).¶

(3) When a person submits a reopen application, the OCC shall, prior to approving it, receive evidence from the individual that the individual has:¶

(a) A current certification in first aid and infant and child CPR. CPR training must have practical hands-on instruction. CPR courses that involve an on-line component with hands-on instruction may be accepted. Strictly on-line CPR training is not acceptable.¶

(b) A current food handler certification pursuant to ORS 624.570; and¶

(c) Documentation that individual has ten hours of training related to the Oregon Registry core knowledge categories since the individual's last active child care license was issued. If the individual was previously licensed for less than two years, the training requirements will be prorated as follows: 2.5 hours of training for each six months of the previous license period. A training on recognizing and reporting child abuse and neglect will be accepted again after five years (and every five years thereafter) as part of the ten clock hours of training required for licensing, but will not be accepted as part of the required child development training hours.¶

(d) OCC will accept duplicate training one additional time if it is a Set 2 (intermediate) or Set 3 (advanced) training or above as described by the Oregon Center for Career Development in Childhood Care and Education; and it is not taken within the same license period.¶

(e) Completed OCC approved health and safety training. ¶

(f) Completed OCC approved safe sleep training. If the reopen is the result of an address change, the person must complete the OCC approved safe sleep training by January 1, 2019.¶

(4) While the registered family child care license is active, the provider must maintain current certification in first aid, infant and child CPR, food handler training, and must complete annual OCC approved health and safety training curriculum.¶

(5) All current providers must complete OCC approved safe sleep training by January 1, 2019.¶

(6) Notwithstanding OAR 414-205-0040(13)(d), 414-205-0055(1)(b), 414-205-0055(2)(a), 414-205-0055(3)(a), an online-only CPR certification obtained between March 24, 2020 and December 26, 2021 will be accepted to meet the training requirement until the certification expires.

Statutory/Other Authority: ORS 329A.260

Statutes/Other Implemented: ORS 329A.260

AMEND: 414-205-0120

RULE SUMMARY: Permanently codifying temporary COVID-19 rules that allow use of hand sanitizer in outlined activities (previously not allowed).

CHANGES TO RULE:

414-205-0120

Sanitation ¶

(1) Pre-mixed sanitizers and disinfectants that are EPA registered and meet Oregon Health Authority criteria may be used in all areas of the home per manufacturer instructions.¶

(2) ~~All~~Caregivers and children ~~must~~shall wash their hands with soap and warm, running water:¶

(a) ~~Before~~After using the toilet;¶

(b) ~~After diaper changing~~feeding;¶

(~~b~~c) ~~Before~~After assisting with toileting;¶

(d) ~~Before handling food;~~¶

(~~e~~e) ~~Before and after eating;~~and¶

(~~f~~f) ~~After diaper~~Before assisting with feeding;¶

(~~e~~3) ~~After using the toilet;~~¶

(~~f~~) ~~After assisting someone with toileting~~Caregivers and children must either wash their hands with soap and warm running water or use hand sanitizer with alcohol content between 60-95%.¶

(a) ~~After wiping the nose;~~¶

(~~g~~b) ~~After nose wipe~~coughing or sneezing;¶

(~~h~~c) ~~After playing outside~~outdoor activities; and¶

(~~i~~d) ~~After touching an animals,~~other than dogs and cats, or handling pet toys.¶

(~~3~~4) ~~Hand sanitizers shall not replace hand washing. If hand sanitiz~~ must be stored out of reach of children.¶

(5) ~~Hand sanitizer shall not be used on children under 24 months of age.~~¶

(6) ~~Application of hand sanitizer on older toddlers are~~nd present in t~~school-aged children must be supervised by an adult.~~¶

(7) ~~When~~ home, they shall be kept out of children's reach and shall not be used on children~~and washing is not possible, e.g. on field trips and on the playground, moist towelettes and hand sanitizer with alcohol content between 60-95% shall be used together.~~¶

(48) All toys, equipment and furniture used by children must be cleaned, rinsed and sanitized regularly and whenever soiled.¶

(59) Diaper changing surfaces must be either:¶

(a) Non-absorbent and easily disinfected;¶

(b) Disposed of after each use; or¶

(c) Laundered after each use.¶

(610) The diaper changing area shall be located so that hand washing can occur immediately after diapering without contacting other surfaces or children.¶

(711) The building and grounds must be maintained in a clean and sanitary manner.¶

(812) All garbage, solid waste, and refuse must be disposed of regularly, in a safe and sanitary manner.¶

(913) Bio-contaminants including but not limited to bodily fluids and blood shall be disposed of in a manner that prevents exposure to children.¶

(104) The home's water supply must be safe to drink.¶

(145) Wading pools are prohibited for wading.

Statutory/Other Authority: ORS 657A.260

Statutes/Other Implemented: ORS 657A.260

AMEND: 414-300-0110

RULE SUMMARY: Permanently codifying temporary COVID-19 rules related to Aide II training requirements and supervisory abilities in child care settings.

CHANGES TO RULE:

414-300-0110

Teacher Aides ¶

(1) Aide I shall:¶

(a) Be at least 15 years of age;¶

(b) Be directly supervised, i.e., within sight and sound of a staff person who meets at least the qualifications of a teacher;¶

(c) Have current certification in first aid and pediatric CPR within 90 days of employment. ¶

(A) CPR training must have practical hands-on instruction; ¶

(B) CPR courses that involve an on-line component with hands-on instruction may be accepted; and ¶

(C) Strictly on-line CPR training is not acceptable.¶

(d) Have completed a minimum of 2 hours of training on recognizing and reporting child abuse and neglect that is specific to Oregon law within 30 days of employment;¶

(e) Have completed OCC approved health and safety training within 30 days of employment.¶

(f) If caring for infants, completed OCC approved safe sleep training within 30 days of employment.¶

(2) An Aide II must:¶

(a) Have completed a training with a minimum of 2 hours on recognizing and reporting child abuse and neglect that is specific to Oregon law;¶

(b) Have completed OCC approved health and safety training; and¶

(c) If caring for infants, completed OCC approved safe sleep training.¶

(3) Aide II in infant/toddler/preschool-age programs shall:¶

~~(a) Be at least 18 years of age;¶~~

~~(b) Have worked at least six months at a must:¶~~

(a) Be at least 18 years of age;¶

(b) Completion of Aide I training requirements as referenced in 414-300-0110(1)(c-f); ¶

(c) Have at least 240 documented hours of experience as an Aide I, where 80 hours of the required 240 hours must be completed in the center where they are now employed; and¶

(e) Have current certification in first aid and CPR. Training must have practical hands-on instruction; therefore, online training is not acceptable currently employed. Up to 160 of the hours may occur at another certified child care center. ¶

(A) If working in a classroom with toddler or older age children, experience can be with any age group.¶

~~(4B) Aide II in school-age programs shall:¶~~ If working in an infant room an Aide II must. ¶

~~(a) Be at least 18 years of age;¶~~

~~(b) Have worked at least four months in the school-age program where they are now employed; and¶~~

~~(c) Have current certification in first aid and CPR. Training must have practical hands-on instruction; therefore, online training is not acceptable.¶~~

(ii) Complete 50 hours of training specific to infant and toddler care; or¶

(iii) Complete 25 hours of training specific to infant and toddler care and CPR. Training must have practical hands-on instruction; therefore, online training is not acceptable.¶

~~(5) Staff at Aide II level may, with the approval of the director, be out of sight and sound of a teacher for brief, necessary events, such as toddler care and 120 hours of experience working with infants.¶~~

(4) An Aide II may support teachers in caring for children but may not be left alone with a group of children, except when:¶

(a) Until June 30th 2022, supervising a group of children for no more than 60 minutes at a time, not to exceed more than 120 minutes of Aide II supervision per day, provided staff-to-child ratios are maintained taking a child to the

~~bathroom or bringing a child in for minor medical attention, and there is another staff who is teacher, head teacher, or director qualified present at the facility;¶~~

~~(6A) An Aide II may not be left alone with a group of children, except as described in OAR 414-300-0130(2)(a) and 414-300-0350(5)(b), supervise an Aide I for no more than 60 minutes at a time.¶~~

~~(b) Accompanying a child or a group of children to the bathroom;¶~~

~~(c) Providing minor medical attention to a child;¶~~

~~(7d) Staff at Aide II level shall be trained in the policies and procedures appropriate to tasks assigned prior to even brief periods of unsupervised access to children supervising a child who is ill and has been separated from the other children until the child leaves the center;¶~~

~~(e) Transporting children; or¶~~

~~(f) Supervising children at rest, as described in OAR 414-300-0130(2)(a).~~

Statutory/Other Authority: ORS 329A.260

Statutes/Other Implemented: ORS 329A.260

AMEND: 414-300-0120

RULE SUMMARY: Permanently codifying temporary COVID-19 rules accepting online CPR certifications obtained during COVID-19 restrictions.

CHANGES TO RULE:

414-300-0120

Staff Training ¶¶

(1) All staff shall receive an orientation within the first two weeks of employment and before they can have unsupervised access to children. Orientation shall ensure that staff are familiar with the contents of the orientation, as described below, and shall include, but is not limited to:¶¶

(a) Individual responsibilities in the event:¶¶

(A) The building must be evacuated (e.g., fire);¶¶

(B) An emergency requiring staff and children to remain inside under unusual circumstances (e.g., power outage, environmental hazard); or¶¶

(C) A child or staff is injured or becomes ill;¶¶

(b) These requirements (OAR 414-300-0000 through 414-300-0415);¶¶

(c) The center policies, as required in OAR 414-300-0030; and¶¶

(d) Procedures for reporting suspected child abuse or neglect.¶¶

(2) The operator shall have documentation for each staff person of the date and type of orientation received and the person providing the orientation.¶¶

(3) Within the first 90 days of employment, all staff shall complete first aid and Infant and Child CPR training or have current certification in first aid and Infant and Child CPR on file. First aid and Infant and Child CPR training must be kept current during employment at the center. First aid training shall include the following components: bleeding; burns; poisoning; choking; injuries; shock; seizures; sprains and breaks; dental emergencies; and head injuries. CPR training must have practical hands-on instruction. CPR courses that involve an on-line component with hands-on instruction may be accepted. Strictly on-line CPR training is not acceptable.¶¶

(4) Key people in food preparation must have food handler certification, pursuant to ORS 624.570, within 30 days of employment or have current certification on file. Food handler's training must be kept current during employment at the center. Key people include cooks, kitchen staff who handle food, and classroom staff who serve meals from a communal source.¶¶

(5) The director, head teacher, and all teachers shall participate yearly in at least 15 clock hours of training or education related to child care, of which at least eight clock hours shall be in child development or early childhood education. The annual 15 clock hours of training or education must include OCC approved health and safety training curriculum. If an individual has worked in the facility less than a year, the training requirements will be prorated as follows: At least 1.25 clock hours for each month worked in the current license period.¶¶

(a) The following core knowledge categories are accepted for the child development and early childhood education requirement: Diversity (D), Family and Community Systems (FCS), Human Growth and Development (HGD), Health Safety and Nutrition (HSN), Learning Environments and Curriculum (LEC), Observation and Assessment (OA), Special Needs (SN), and Understanding and Guiding Behavior (UGB).¶¶

(b) A head teacher whose qualifications for the position are based solely on work experience shall emphasize training in child development and early childhood education for the first two years of employment;¶¶

(c) Training may include correspondence courses, conferences, workshops, or audiovisual programs.¶¶

(d) An approved planned reading program of professional materials may count for up to six hours of the 15 clock hours of training and must include a written assessment of reading materials completed by each participating staff person.¶¶

(e) OCC will accept duplicate training one additional time if it is a Set 2 (intermediate) or Set 3 (advanced) training or above as described by the Oregon Center for Career Development in Childhood Care and Education; and it is not taken within the same license period.¶¶

(f) The center shall record each person's training showing the subject matter, the date completed, and the number of clock hours of training in each certification year.¶¶

(6) During the first year of employment, a staff person may count up to two hours of orientation and their most recent training in first aid and CPR, food handler's training, if applicable, and child abuse and neglect training as part of the 15 clock hours of training required in OAR 414-300-0120(5), but may not use these toward the eight hours required in child development or early childhood education.¶¶

(7) During subsequent years of employment, a staff person may count 5 hours of first aid and CPR training or food handler's training as part of the 15 clock hours of training. Duplicate training on recognizing and reporting child abuse and neglect can be accepted again after three years, and every three years thereafter towards the 15 clock hours of staff training required for licensing.¶¶

(8) Staff meetings shall not count as training.¶¶

(9) All staff, with the exception of Aide I's, who count in staff to child ratios must complete OCC approved training on recognizing and reporting child abuse and neglect, and health and safety training, prior to having unsupervised access to children and functioning in their position. Aide I's must complete the training within the first 30 days of employment.¶¶

(10) All infant caregivers, with the exception of Aide I's, must complete OCC approved training on safe sleep, prior to having unsupervised access to children and functioning in their position. Aide I's must complete the training within the first 30 days of employment.¶¶

(11) If certified to care for infants, current infant caregivers must complete OCC approved safe sleep training by January 1, 2019.¶¶

(12) Notwithstanding OAR 414-300-0110(1)(c)(A) and (C), 414-300-0110(3)(c), 414-300-0110(4)(c), and 414-300-0120(3), an online-only CPR certification obtained between March 24, 2020 and June 30, 2022 will be accepted to meet the training requirement until the CPR certification expires.

Statutory/Other Authority: ORS 329A.260

Statutes/Other Implemented: ORS 329A.260

AMEND: 414-300-0180

RULE SUMMARY: Permanently codifying temporary COVID-19 rules allowing use of hand sanitizers in certain situations in child care facilities (previously not allowed).

CHANGES TO RULE:

414-300-0180

Sanitation ¶

(1) Water Supply:¶

(a) The center's water supply shall be continuous in quantity and from a water supply system approved by the Health Division.¶

(b) There shall be safe drinking water available to children that is supplied in a sanitary manner. Drinking water for preparing food, infant formula, drinking or cooking shall not be obtained from bathroom sinks or diaper changing sinks.¶

(2) Heat and Ventilation:¶

(a) The center shall be ventilated, by natural or mechanical means, and shall be free of excessive heat, condensation, and obnoxious odors.¶

(b) Room temperature shall be at least 68° F. (20 C.) and not so warm as to be dangerous or unhealthy in the center when children are present.¶

(c) After painting or laying carpet, the building must be aired out completely for at least 24 hours with good ventilation before children are allowed to return.¶

(3) Insect and Rodent Control:¶

(a) The center shall be in such condition as to prevent the infestation of rodents and insects.¶

(b) Doors and windows used for ventilation shall be equipped with fine-meshed screens.¶

(c) Automatic insecticide dispensers, vaporizers, or fumigants shall not be used.¶

(4) Maintenance:¶

(a) The building, toys, equipment, and furniture shall be maintained in a clean and sanitary condition:¶

(A) Kitchen and toilet rooms shall be cleaned when soiled and at least daily;¶

(B) The isolation area shall be thoroughly cleaned after each use and all bedding laundered before it is used again;¶

(C) Door knobs and cabinet pulls in toilet rooms and diaper changing areas shall be sanitized daily;¶

(D) All clean linen shall be stored in a sanitary manner;¶

(E) Soiled bed linen and clothing shall not be stored in food preparation or food storage areas, and shall be inaccessible to children;¶

(F) Floors, walls, ceilings, and fixtures of all rooms shall be kept clean and in good repair;¶

(G) All food storage areas shall be kept clean and free of food particles, dust, dirt, and other materials;¶

(H) Cribs, mats, and cots shall be sanitized with a sanitizing solution at least once a week and upon change of occupant. If visibly soiled, items must be cleaned prior to sanitizing.¶

(I) Bedding shall be cleaned when soiled, upon change of occupant and at least once a week;¶

(J) Water tables and toys used in water tables shall be emptied and sanitized daily;¶

(K) When a chemical, such as chlorine, is used for sanitizing, a test kit that measures the parts per million concentration of the solution shall be used to ensure the proper concentration; and¶

(L) Cloths, both single use and multiple use, used for wiping food spills on utensils and food-contact surfaces shall be kept clean and used for no other purpose. Cloths that are reused shall be stored in a sanitizing solution between uses.¶

(b) The center shall be kept hazard-free, in good repair, and free of litter or rubbish and unused or inoperable equipment and utensils.¶

(5) Infant and Toddler Care:¶

(a) The following shall be sanitized immediately after each use. If visibly soiled, items must be cleaned prior to

sanitizing:¶

(A) A bathtub or other receptacle used for bathing a child;¶

(B) A diaper-changing table;¶

(C) High chairs, tables and chairs;¶

(D) Toys that infants and toddlers put in the mouth; and¶

(E) Toilet training seat inserts.¶

(b) Pacifiers must be labeled, stored individually and sanitized after contamination. The health department must approve methods of sanitation.¶

(c) A sanitizing solution shall be kept in each diaper changing area ready for immediate use. This solution need not be stored in a locked cabinet but must be out of children's reach.¶

(6) Hand washing:¶

(a) Staff and children shall wash their hands with soap and warm running water-a:¶

~~(A) After using the toilet or wiping the nose, and before and after eating.¶~~

~~(b) Staff shall:¶~~

~~(B) After diaper changing;¶~~

~~(C) After assisting someone with toileting;¶~~

~~(D) Before handling food;¶~~

~~(E) When arriving at the center;¶~~

~~(F) Before and after eating; and¶~~

~~(G) Before assisting with feeding.¶~~

~~(b) Staff and children must either wash their hands with soap and warm running water before use hand after changing a diaper, before and after feeding a child or handling food and after assisting a child with toileting or wiping the nose.¶~~

~~(c) Infants' and children's hands shall be washed with soap and warm running water after diaper changing.¶~~

~~(d) Commercial products labeled "hand sanitizer with alcohol content between 60-95%:¶~~

~~(A) After wiping the nose;¶~~

~~(B) After coughing or sneezing;¶~~

~~(C) After outside activities; and¶~~

~~(D) After handling pet toys or touching animals, other than dogs and cats..¶~~

~~(c) Hand sanitizer must be stored out of reach of children.¶~~

~~(d) Hand sanitizers" shall not replace hand washing. If hand sanitizers are present in the center, they shall be kept under child-proof lock and shall not be used by children be used on children under 24 months of age.¶~~

~~(e) Application of hand sanitizer on older toddlers and preschool-aged children must be supervised by an adult.¶~~

~~(ef) When hand washing is not possible, but required by OAR 414-300-0180(6)(a)-(b), e.g. on field trips and on the playground, moist towelettes and hand sanitizer with alcohol content between 60-95% shall be used together.¶~~

(7) Waste Disposal:¶

(a) All sewage and liquid wastes shall be collected, treated, and disposed of in compliance with the requirements of the Department of Environmental Quality.¶

(b) All garbage, solid waste, and refuse shall be disposed of at least once a week.¶

(c) All garbage shall be kept in watertight, non-absorbent, and easily washable containers with close-fitting lids.¶

(d) Diaper disposal containers shall be approved by the environmental health specialist.¶

(e) All garbage storage areas and garbage containers shall be kept clean.¶

(f) All rubbish and garbage storage shall be inaccessible to children.¶

(g) Bio-contaminants including but not limited to bodily fluids and blood shall be disposed of in a manner that prevents exposure to children.

Statutory/Other Authority: ORS 329A.260

Statutes/Other Implemented: ORS 329A.260

AMEND: 414-350-0115

RULE SUMMARY: Permanently codifying temporary COVID-19 rules accepting online-only CPR certification obtained during COVID-19 restrictions.

CHANGES TO RULE:

414-350-0115

Training Requirements ¶¶

(1) All staff shall receive an orientation within the first two weeks of employment and before they can have unsupervised access to children. Orientation shall ensure that staff are familiar with the contents of the orientation, as described below, and shall include, but is not limited to:¶¶

(a) Individual responsibilities in the event:¶¶

(A) The home must be evacuated (e.g. fire);¶¶

(B) An emergency requiring staff and children to remain inside under unusual circumstances (e.g. power outage, environmental hazard); or¶¶

(C) A child or staff is injured or becomes ill;¶¶

(b) These requirements (OAR 414-350-0000 through 414-350-0405);¶¶

(c) The facility policies, as required in OAR 414-350-0050; and¶¶

(d) Procedures for reporting suspected child abuse or neglect.¶¶

(2) The provider and all caregivers who function as substitute providers and Assistant II staff, including volunteers, shall participate yearly in at least 15 clock hours of training related to child care, of which at least eight clock hours shall be in child development or early childhood education. The annual 15 clock hours of training or education must include OCC approved health and safety training curriculum. Substitute providers and volunteers who provide care in the home for less than 20 hours in a calendar year are not required to participate in the 15 clock hours of training. If an individual has worked in the facility less than a year, the training requirements will be prorated as follows: At least 1.25 clock hours for each month worked in the current license period.¶¶

(a) The following core knowledge categories are accepted for the child development and early childhood education requirement: Diversity (D), Family and Community Systems (FCS), Human Growth and Development (HGD), Health Safety and Nutrition (HSN), Learning Environments and Curriculum (LEC), Observation and Assessment (OA), Special Needs (SN), and Understanding and Guiding Behavior (UGB).¶¶

(b) Training may include correspondence courses, conferences, workshops and audio-visual programs.¶¶

(c) An approved planned reading program of professional materials may count for up to six hours of the 15 clock hours of training and must include a written assessment of reading materials completed by each participating staff person.¶¶

(d) OCC will accept duplicate training one additional time if it is a Set 2 (intermediate) or Set 3 (advanced) training or above as described by the Oregon Center for Career Development in Childhood Care and Education; and it is not taken within the same license period.¶¶

(3) During the first year of certification and the first year of employment staff may count up to two hours of orientation and their most recent training in first aid and CPR, food handler's and recognizing and reporting child abuse and neglect training, as part of the 15 clock hours of training required in OAR 414-350-0115(2), but may not use these toward the eight hours required in child development or early childhood education.¶¶

(a) Recognizing and reporting child abuse and neglect training must be based on Oregon law and practice so information is relevant to reporting in Oregon.¶¶

(b) Recognizing and reporting child abuse and neglect training must be two clock hours or more in duration to be accepted.¶¶

(4) During subsequent years of certification and subsequent years of employment staff may count five hours of first aid and CPR training or food handler's training as part of the 15 clock hours of training. Duplicate training on recognizing and reporting child abuse and neglect training can be accepted again after three years, and every three years thereafter towards the 15 clock hours of staff training required for licensing.¶¶

(5) The provider shall document each caregiver's training, showing the subject matter, the date completed, and the number of clock hours of training in each certification year.¶¶

(6) The provider and all staff, with the exception of Assistant I's, who count in staff to child ratios must complete OCC approved training on recognizing and reporting child abuse and neglect and health and safety, prior to having unsupervised access to children and functioning in their position. Assistant I's must complete the training within the first 30 days of employment.¶¶

(7) The provider and all staff, with the exception of Assistant I's, who count in staff to child ratios must complete OCC approved training on safe sleep prior to having unsupervised access to children. Assistant I's must complete the training within the first 30 days of employment.¶¶

(8) All current staff must complete OCC approved safe sleep training by January 1, 2019.¶¶

(9) When a reopen or address change application is submitted, OCC shall, prior to approving it, receive evidence that the provider and all staff have completed OCC approved safe sleep training. If the reopen is a result of an address change, the person must complete the OCC approved safe sleep training by January 1, 2019.¶¶

(10) Notwithstanding OAR 414-350-0100(3)(a), 414-350-0100(8)(b), 414-350-0110(2)(b)(A)(C), 414-350-0110(5)(d) an online-only CPR certification obtained between March 24, 2020 and December 26, 2021 will be accepted to meet the training requirement until the certification expires.

Statutory/Other Authority: ORS 329A.260

Statutes/Other Implemented: ORS 329A.260, 329A.280

AMEND: 414-350-0160

RULE SUMMARY: Permanently codifying temporary COVID-19 rules allowing use of hand sanitizer in outlined situations in child care settings (previously not allowed).

CHANGES TO RULE:

414-350-0160

Sanitation ¶

(1) Water Supply:¶

- (a) The home's water supply shall be continuous in quantity and from a water supply system approved by the Department of Human Services;¶
- (b) If drinking water is from a private source, the provider shall provide evidence of bacterial and chemical analysis which establish safety of the water;¶
- (c) The tests shall be conducted by the local health department, the Department of Human Services, or an approved commercial laboratory;¶
- (d) The bacterial analysis shall be done quarterly;¶
- (e) The chemical analysis shall be done only once for a well and yearly for other water sources;¶
- (f) The provider shall have drinking water available to children that is supplied in a safe and sanitary manner. Drinking water for preparing food, infant formula, drinking or cooking shall not be obtained from bathroom sinks or diaper changing sinks. ¶

(2) Hand Washing:¶

- (a) Caregivers and children shall wash their hands with soap and warm running water ~~after nose wiping, a;~~
 - (A) After using the toilet, and before and after eat;¶
 - (B) After diaper changing;¶
 - ~~(bC) Caregivers shall wash their hands with soap and warm running water b~~After assisting someone with toileting;¶
 - (D) Before hand after changing a diaper, before and after feeding a child or handling food, and after ling food;¶
 - (E) Before and after eating and¶
 - (F) Before assisting a child with toileting and nose wipwith feeding; ¶
- (~~b~~) Infants' Caregivers and children's hands shall be washed must either wash their hands with soap and warm running water after diaper changor use hand sanitizer with alcohol content between 60-95%;¶
 - (A) After wiping the nose;¶
 - (B) After coughing or sneezing;¶
 - ~~(dC) Staff shall immediately and thoroughly wash~~After outdoor activities; and¶
 - (D) After touching animals, otheir thands after handling animals or cleaning cages;¶
- (~~e~~) Commercial products labeled "h dogs and cats, or handling pet toys.¶
- (c) Hand sanitizer must be stored out of reach of children.¶
- (d) Hand sanitizers" shall not replace hand washing. If hand sanitizers are present in the home, they shall be kept under child-proof lock and shall not be used by children;be used on children under 24 months of age.¶
- (e) Application of hand sanitizer on older toddlers and preschool-aged children must be supervised by an adult.¶
- (f) When hand washing is not possible, e.g., on field trips or the neighborhood park, moist towelettesand on the playground, moist towelettes and hand sanitizer with alcohol content between 60-95% shall be used together.¶

(3) Maintenance:¶

- (a) The building, toys, equipment, and furniture shall be maintained in a clean, sanitary, and hazard-free condition:¶
- (A) Kitchen and bathrooms shall be cleaned when soiled and at least daily;¶
- (B) Floors, walls, ceilings, and fixtures of all rooms shall be kept clean and in good repair;¶
- (C) All kitchen counters, shelves, tables, refrigeration equipment, sinks, drain boards, cutting boards, and other equipment or utensils used for food preparation shall be kept clean and in good repair;¶

- (D) All food storage areas shall be kept clean and free of food particles, dust, dirt and other materials;¶
- (E) Cloths, both single use and multiple use, used for wiping food spills on utensils and food-contact surfaces shall be kept clean and used for no other purpose. Cloths that are reused shall be stored in a sanitizing solution between uses.¶
- (F) The isolation area shall be thoroughly cleaned after use and all bedding laundered after each use;¶
- (G) A diaper-changing table shall:¶
 - (i) Have a surface that is non-absorbent and easily cleaned;¶
 - (ii) Be cleaned and sanitized after each use;¶
 - (iii) Not be used for any purposes other than diapering, including food or drink preparation or storage, dish washing, storage of food service utensils, arts and crafts supplies or products, etc.; and¶
 - (iv) Comply with the requirements for diaper changing area specified in OAR 414-350-0235(2)(b).¶
- (H) Bathtubs, showers, sinks, bathinettes, or other receptacles used for bathing children shall be cleaned and sanitized after each use and shall not be used to obtain water for preparing food, infant formula, drinking or cooking.¶
- (I) Bedding shall be cleaned when soiled, with change of occupant, or at least once a week.¶
- (b) Tableware, kitchenware (pots, pans and equipment), and food-contact surfaces of equipment shall be washed, rinsed, sanitized, and air-dried after each use. The cleaning and sanitizing of tableware and kitchenware shall be accomplished by using:¶
 - (A) A dishwasher that is operated according to the manufacturer's instructions; or¶
 - (B) A three-step manual process as follows:¶
 - (i) Washing in the first compartment;¶
 - (ii) Rinsing in a second compartment; and¶
 - (iii) Immersion in a third compartment or large dishpan or tub for at least two minutes in a sanitizing solution containing at least 2 teaspoons of household chlorine bleach in each gallon of warm water.¶
 - (c) A sink used for diapering or bathing activities shall not be used for any part of preparing food, infant formula, drinking, cooking or dish washing.¶
 - (d) Soap, paper towels dispensed in a sanitary manner, and mixing faucets with hot and cold running water shall be provided at each hand washing sink.¶
 - (e) The home and grounds shall be kept clean and free of litter or rubbish and unused or inoperable equipment, utensils, and vehicles.¶
 - (f) All garbage, solid waste, and refuse shall be disposed of at least once a week.¶
 - (A) All garbage shall be kept in watertight, non-absorbent, and easily washable containers with close-fitting lids;¶
 - (B) All garbage storage areas and garbage containers shall be kept clean; and¶
 - (C) All garbage storage shall be inaccessible to children.¶
 - (g) Bio-contaminants including, but not limited to bodily fluids and blood shall be disposed of in a manner that prevents exposure to children.¶
- (4) Insect and Rodent Control:¶
 - (a) The home shall be in such condition as to prevent the infestation of rodents and insects.¶
 - (b) Doors and windows which are opened for ventilation shall be equipped with fine-meshed screens.¶
 - (c) Automatic insecticide dispensers, vaporizers, or fumigants shall not be used.

Statutory/Other Authority: ORS 329A.260

Statutes/Other Implemented: ORS 329A.260, 329A.280, 329A.290, 329A.400, 329A.420