



# FULL ANALYSIS

## I. SUBSTANTIVE ANALYSIS

### A. DOES THE BILL:

- |                                      |                              |  |   |
|--------------------------------------|------------------------------|--|---|
| 1. Reduce government?                | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> | N/A <input type="checkbox"/>            |
| 2. Lower taxes?                      | Yes <input type="checkbox"/> | No <input type="checkbox"/>            | N/A <input checked="" type="checkbox"/> |
| 3. Expand individual freedom?        | Yes <input type="checkbox"/> | No <input type="checkbox"/>            | N/A <input checked="" type="checkbox"/> |
| 4. Increase personal responsibility? | Yes <input type="checkbox"/> | No <input type="checkbox"/>            | N/A <input checked="" type="checkbox"/> |
| 5. Empower families?                 | Yes <input type="checkbox"/> | No <input type="checkbox"/>            | N/A <input checked="" type="checkbox"/> |

For any principle that received a “no” above, please explain:

The bill adds additional required training for all child care personnel. These requirements must be met in order to be employed in a licensed child care facility.

### B. EFFECT OF PROPOSED CHANGES:

#### Current Situation

##### Child Care Personnel Training: Introductory Course

The Department of Children and Families (DCF) is responsible for the development and delivery of mandated training curriculum and competency examinations for child care providers statewide, including 40-clock-hours of introductory child care training for personnel in licensed child care facilities.<sup>1</sup>

The introductory courses must include training in at least the following subject areas:<sup>2</sup>

- a. State and local rules and regulations which govern child care
- b. Health, safety and nutrition
- c. Identifying and reporting child abuse and neglect
- d. Child development, including typical and atypical language, cognitive, motor, social, and self-help skills development
- e. Observation of developmental behaviors to determine the child’s developmental age level
- f. Specialized areas, including computer technology for professional and classroom use and early literacy and language development of children from birth to 5 years of age, for owner-operators and child care personnel of a child care facility.

The curriculum developed by DCF to comply with these statutory requirements is delivered in two parts as follows:

##### Part I – Introduction to Child Care (30 hours)

- |          |   |
|----------|---|
| 2 hours  | State & Local Rules and Regulations             |
| 4 hours  | Health, Safety, and Nutrition                   |
| 4 hours  | Identifying and Reporting Child Abuse & Neglect |
| 10 hours | Child Growth & Development                      |
| 10 hours | Behavioral Observation and Screening            |

<sup>1</sup> Section 402.305(2)(d)1., F.S.

<sup>2</sup> Section 402.305(2)(d), F.S. Subpart f. was amended by Chapter 2003-131, Laws of Florida, in order to require training in early literacy and language development of children from birth to 5 years of age

## Part II – Specialized Modules (10 hours, choice of modules)

|          |   |
|----------|---|
| 10 hours | Infant and Toddler Appropriate Practices                            |
| 10 hours | Preschool Appropriate Practices                                     |
| 10 hours | School-Age Appropriate Practices                                    |
| 10 hours | Special Needs Appropriate Practices                                 |
| 5 hours  | Basic Guidance & Discipline (web based course)                      |
| 10 hours | Computer Technology for Child Care Professionals (web-based course) |
| 5 hours  | Literacy in the Child Care Environment (web-based course)           |

### Shaken Baby Syndrome

Shaken baby syndrome is a serious head injury caused by shaking a baby violently. Caregiver stress is the number one cause of shaken baby syndrome. When babies cry for a long time, sometimes the caregiver feels that shaking the baby is the only way to make him stop crying.

When the baby is shaken, the brain repeatedly hits against the skull. The brain bruises, swells and bleeds. This brain damage can be life-long and irreparable, and may result in death. Shaking a baby can also cause injuries to the neck, back and eyes. Education about the devastating effects of shaking a baby is a key component in protecting children in care.<sup>3</sup>

### Sudden Infant Death Syndrome

Sudden infant death syndrome or SIDS is the sudden unexpected death of an infant under 1 year of age which remains unexplained after a complete autopsy, death-scene investigation, and review of the case history. The term includes only those deaths for which, currently, there is no known cause or cure.<sup>4</sup> In the year 2002, SIDS was the third-leading cause of death among infants in Florida.<sup>5</sup>

The causes of SIDS are not well understood. However, according to the American Medical Association,<sup>6</sup> one thing caregivers can do to help prevent SIDS is to put babies to sleep on their backs, not stomachs. This helps babies breathe more easily and may prevent them from breathing their own carbon dioxide. Researchers have found that babies who are usually put to sleep on their backs and then are put to sleep on their stomachs have a higher rate of death from SIDS, so all caregivers should be educated to always put babies to sleep on their backs.

### Early Childhood Brain Development

Brains of infants and children up to three years of age grow at an extremely rapid rate, which means that most of the neural connections in adults' brains are formed during this important time period. Neural connections that are made in children birth to age three are the basis for all future intellectual, emotional, social and psychological development. It is vital that caregivers understand that children who receive adequate care, nurturing and nutrition during this critical time period have the potential to develop into healthier children.<sup>7</sup>

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<sup>3</sup> See, generally, National Center on Shaken Baby Syndrome, <http://dontshake.com/>; the Shaken Baby Alliance, <http://www.shakenbaby.com/>; the National Shaken Baby Campaign, <http://www.preventchildabuse.com/shaken.htm>

<sup>4</sup> S. 383.3362(2), F.S.

<sup>5</sup> *Florida Vital Statistics Annual Report 2002, Fetal and Infant Deaths*, Table F-7, Resident Infant, Neonatal and Post-Neonatal Deaths from Selected Causes, by Race, Florida 2002, Florida Department of Health, [http://www.doh.state.fl.us/planning\\_eval/vital\\_statistics/02Vitals/fetal.pdf](http://www.doh.state.fl.us/planning_eval/vital_statistics/02Vitals/fetal.pdf)

<sup>6</sup> *JAMA Patient Page: Sudden Infant Death Syndrome*, [http://www.medem.com/medlb/article\\_detailb.cfm?article\\_ID=ZZZ117HB09D&sub\\_cat=2001](http://www.medem.com/medlb/article_detailb.cfm?article_ID=ZZZ117HB09D&sub_cat=2001)

<sup>7</sup> See, generally, the American Academy of Pediatrics, <http://www.aap.org/mrt/brain.htm> and the World Bank Group, <http://www.worldbank.org/children/braindev.html>

## Effect of the Proposed Bill

HB 569 requires the addition of course work on shaken baby syndrome, preventing sudden infant death, and understanding childhood brain development to the minimum training required of child care personnel.

### C. SECTION DIRECTORY:

Section 1: Amends s. 402.305(2)(d); adds course work on shaken baby syndrome, preventing sudden infant death, and understanding childhood brain development to the 40-clock hour minimum training required of child care personnel.

Section 2: Provides that the act is effective upon becoming law.

## II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

### A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

None.

2. Expenditures:

See Fiscal Comments below.

### B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

None.

2. Expenditures:

None.

### C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

See Fiscal Comments below.

### D. FISCAL COMMENTS:

According to DCF, training in recognizing and preventing shaken baby syndrome is required as part of both the required and specialized child care personnel minimum coursework.<sup>8</sup>

SIDS is addressed in existing standards for physical facilities established in administrative rule pursuant to s. 402.305(1)(c), F.S., include the following requirement: "When napping or sleeping, young infants that are not capable of rolling over on their own should be positioned on their back and on a firm surface to reduce the risk of Sudden Infant Death Syndrome (SIDS) unless an alternate position is authorized in writing by a physician."<sup>9</sup> Child care personnel receive training regarding this requirement during the State & Local Rules and Regulations module of the introductory training, according to DCF. In addition, training in preventing SIDS is

<sup>8</sup> Required modules Health, Safety and Nutrition, and Identifying and Reporting Abuse and Neglect; and specialized modules Infant and Toddler Appropriate Practices, and Preschool Appropriate Practices.

<sup>9</sup> Rule 65C-22.002(5)(f), F.A.C.

required as part of both the required and specialized child care personnel minimum coursework.<sup>10</sup>

According to DCF, early childhood brain development is covered within the course content for the required modules Child Growth and Development<sup>11</sup> and Behavioral Observation and Screening<sup>12</sup> includes using a checklist or other similar observation tools and techniques to determine the child's developmental age level.

If DCF must develop an additional specialized training module that includes the three subjects required by the bill or three separate modules for each of the three subjects listed, there will be a fiscal impact associated with the bill. DCF reports that its most recently developed five-hour specialized training module cost approximately \$68,500 over three years to develop and test. If the additional training is also to be competency-based, there will be some fiscal impact associated with the initial development and ongoing maintenance and implementation of each additional competency-based examination. In addition, DCF reports that the private sector will bear the costs associated with additional required coursework (\$15 to \$50 per course) and associated competency testing (\$1 per clock hour of instruction).

### **III. COMMENTS**

#### **A. CONSTITUTIONAL ISSUES:**

1. Applicability of Municipality/County Mandates Provision:

None.

2. Other:

None.

#### **B. RULE-MAKING AUTHORITY:**

None.

#### **C. DRAFTING ISSUES OR OTHER COMMENTS:**

None.

### **IV. AMENDMENTS/COMMITTEE SUBSTITUTE CHANGES**

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<sup>10</sup> Required modules Health, Safety and Nutrition, and Identifying and Reporting Abuse and Neglect, and specialized module Infant and Toddler Appropriate Practices.

<sup>11</sup> Includes information on typical and atypical language, cognitive, motor, social, and self-help skills development.

<sup>12</sup> Includes instruction on using a checklist or other similar observation tools and techniques to determine the child's developmental age level.