

**FISCAL AND ECONOMIC IMPACT STATEMENT
FOR ADMINISTRATIVE RULES**

Person Preparing Statement:	Ashley Townsend	Department:	Louisiana Department of Education, Board of Elementary and Secondary Education
Phone:	225.342.3446	Office:	Governmental, Administrative, and Public Affairs Part CLXI Bulletin 137 – Louisiana Early Learning Center Licensing Regulations (LAC 28: CLXI.1515, 1721, 1725, 1805, 1806, 1907, 1909, 1917, and 2105) and Part CLXV. Bulletin 139 – Louisiana Child Care and Development Fund Programs (LAC 28:CLXV.103, 305, 309, 311, 313, 319, 323, 325, 509, 512, and 515)
Return Address:	P.O. Box 94064 Baton Rouge, LA 70804	Rule Title:	512, and 515)
		Date Rule Takes Effect:	Upon final adoption by BESE

SUMMARY
(Use complete sentences)

In accordance with Section 961 of Title 49 of the Louisiana Revised Statutes, there is hereby submitted a fiscal and economic impact statement on the rule proposed for adoption, repeal or amendment. THE FOLLOWING STATEMENTS SUMMARIZE ATTACHED WORKSHEETS, I THROUGH IV AND WILL BE PUBLISHED IN THE LOUISIANA REGISTER WITH THE PROPOSED AGENCY RULE.

I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

There are no anticipated implementation costs or savings to state or local governmental units due to the proposed rule change. The proposed rule change strengthens measures designed to protect children, provides additional clarity to early learning providers, and aligns Board of Elementary and Secondary Education (BESE) policy with federal and state regulations. Additional revisions address parental notice and consent, Child Care Criminal Background Check (CCCBC) based determinations, and health and safety requirements such as safe sleep procedures, transportation records, and hazards to children. Further revisions address Child Care Assistance Program (CCAP) eligibility and payments. Reorganization of some information has occurred for ease of access and understanding. Codification of charts ensures American Disabilities Act (ADA) compliance and readability. The reorganization groups and aligns like-topics, such as general health and safety that applies to all providers and centers regulated by these bulletins. Updates also establish provisions for the administration of stock medication in accordance with Act 657 of the 2024 RS.

II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

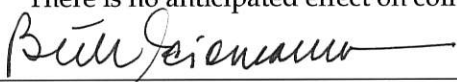
There is no anticipated effect on the revenue collections of state or local governmental units as a result of the proposed rule change.

III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS, SMALL BUSINESSES, OR NON-GOVERNMENTAL GROUPS (Summary)

There may be costs or benefits to directly affected persons, small business, or nongovernmental groups as a result of the proposed rule change should an early learning center or provider choose to maintain a supply of stock medications. The cost to purchase the medication will be market price unless discounted pricing is negotiated. The associated training may also constitute a cost for employers who choose to participate in the program. Other trainings are already required in BESE policy and would not constitute an increase in costs. The Louisiana Department of Education (LDOE) also provides some trainings free of charge.

IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT (Summary)

There is no anticipated effect on competition and employment as a result of the proposed rule change.



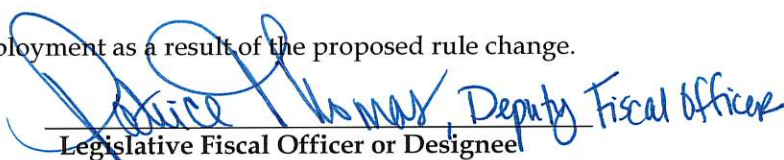
Signature of Head or Designee

Beth Scioneaux, Deputy Superintendent for
Management and Finance

Typed Name & Title of Agency Head or
Designee

12.20.2024

Date of Signature



Legislative Fiscal Officer or Designee

12/20/2024

Date of Signature

**FISCAL AND ECONOMIC IMPACT STATEMENT
FOR ADMINISTRATIVE RULES**

The following information is required in order to assist the Legislative Fiscal Office in its review of the fiscal and economic impact statement and to assist the appropriate legislative oversight subcommittee in its deliberation on the proposed rule.

- A. Provide a brief summary of the content of the rule (if proposed for adoption, or repeal) or a brief summary of the change in the rule (if proposed for amendment). Attach a copy of the notice of intent and a copy of the rule proposed for initial adoption or repeal (or, in the case of a rule change, copies of both the current and proposed rules with amended portions indicated).

The proposed rule change amends LAC 28:CLXI. in *Bulletin 137 - Louisiana Early Learning Center Licensing Regulations* and LAC 28:CLXV. in *Bulletin 139 - Louisiana Child Care and Development Fund Programs*. The changes strengthen measures designed to protect children and provide additional clarity to early learning providers. Additional revisions address parental notice and consent, CCCBC-based determinations, and health and safety regulations such as safe sleep procedures, transportation records, and hazards to children. Further revisions address CCAP eligibility and payments. Reorganization of some information has occurred for ease of access and understanding.

- B. Summarize the circumstances, which require this action. If the Action is required by federal regulation, attach a copy of the applicable regulation.

The aforementioned change aligns BESE policy with federal and state regulations. Updates also establish provisions for the administration of stock medication in accordance with Act 657 of the 2024 Regular Legislative Session.

- C. Compliance with Act 11 of the 1986 First Extraordinary Session

- (1) Will the proposed rule change result in any increase in the expenditure of funds? If so, specify amount and source of funding.

The proposed rule change will not result in an increase in the expenditure of funds.

- (2) If the answer to (1) above is yes, has the Legislature specifically appropriated the funds necessary for the associated expenditure increase?

(a) _____ YES. If yes, attach documentation.

(b) _____ NO. If no, provide justification as to why this rule change should be published at this time

**FISCAL AND ECONOMIC IMPACT STATEMENT
WORKSHEET**

I. A. COSTS OR SAVINGS TO STATE AGENCIES RESULTING FROM THE ACTION PROPOSED

1. What is the anticipated increase (decrease) in costs to implement the proposed action?

COSTS	FY 25	FY 26	FY 27
PERSONAL SERVICES	\$0	\$0	\$0
OPERATING EXPENSES	\$0	\$0	\$0
PROFESSIONAL SERVICES	\$0	\$0	\$0
OTHER CHARGES	\$0	\$0	\$0
EQUIPMENT	\$0	\$0	\$0
MAJOR REPAIR & CONSTR.	\$0	\$0	\$0
TOTAL	\$0	\$0	\$0
POSITIONS (#)	0	0	0

2. Provide a narrative explanation of the costs or savings shown in "A. 1.", including the increase or reduction in workload or additional paperwork (number of new forms, additional documentation, etc.) anticipated as a result of the implementation of the proposed action. Describe all data, assumptions, and methods used in calculating these costs.

Not applicable.

3. Sources of funding for implementing the proposed rule or rule change.

SOURCE	FY 25	FY 26	FY 27
STATE GENERAL FUND	\$0	\$0	\$0
AGENCY SELF-GENERATED	\$0	\$0	\$0
DEDICATED	\$0	\$0	\$0
FEDERAL FUNDS	\$0	\$0	\$0
OTHER (Specify)	\$0	\$0	\$0
TOTAL	\$0	\$0	\$0

4. Does your agency currently have sufficient funds to implement the proposed action? If not, how and when do you anticipate obtaining such funds?

Not applicable.

B. COST OR SAVINGS TO LOCAL GOVERNMENTAL UNITS RESULTING FROM THE ACTION PROPOSED.

1. Provide an estimate of the anticipated impact of the proposed action on local governmental units, including adjustments in workload and paperwork requirements. Describe all data, assumptions and methods used in calculating this impact.

There are no anticipated impacts to local governmental units as a result of the proposed rule change.

2. Indicate the sources of funding of the local governmental unit, which will be affected by these costs or savings.

Not applicable.

II. EFFECT ON REVENUE COLLECTIONS OF STATE AND LOCAL GOVERNMENTAL UNITS

A. What increase (decrease) in revenues can be anticipated from the proposed action?

There is no anticipated effect on the revenue collections of state and local governmental units as a result of the proposed rule change.

REVENUE INCREASE/DECREASE	FY 25	FY 26	FY 27
STATE GENERAL FUND	\$0	\$0	\$0
AGENCY SELF-GENERATED	\$0	\$0	\$0
DEDICATED	\$0	\$0	\$0
FEDERAL FUNDS	\$0	\$0	\$0
LOCAL FUNDS	\$0	\$0	\$0
TOTAL	\$0	\$0	\$0

*Specify the particular fund being impacted.

- B. Provide a narrative explanation of each increase or decrease in revenues shown in "A." Describe all data, assumptions, and methods used in calculating these increases or decreases.

Not applicable.

FISCAL AND ECONOMIC IMPACT STATEMENT WORKSHEET

III. COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS, SMALL BUSINESSES, OR NONGOVERNMENTAL GROUPS

- A. What persons, small businesses, or non-governmental groups would be directly affected by the proposed action? For each, provide an estimate and a narrative description of any effect on costs, including workload adjustments and additional paperwork (number of new forms, additional documentation, etc.), they may have to incur as a result of the proposed action.

There may be costs or benefits to directly affected persons, small business, or nongovernmental groups as a result of the proposed rule change should an early learning center or provider choose to maintain a supply of stock medications. The cost to purchase the medication will be market price unless discounted pricing is negotiated. The associated training may also constitute a cost for employers who choose to participate in the program. Other trainings are already required in Board of Elementary and Secondary Education (BESE) policy and would not constitute an increase in costs. The Louisiana Department of Education (LDOE) also provides some trainings free of charge.

- B. Also provide an estimate and a narrative description of any impact on receipts and/or income resulting from this rule or rule change to these groups.

Not applicable.

IV. EFFECTS ON COMPETITION AND EMPLOYMENT

Identify and provide estimates of the impact of the proposed action on competition and employment in the public and private sectors. Include a summary of any data, assumptions and methods used in making these estimates.

There is no anticipated impact on competition and employment as a result of the proposed rule change.

NOTICE OF INTENT

Board of Elementary and Secondary Education

Early Childhood Centers and Providers
(LAC 28: CLXI.1515, 1721, 1725, 1805, 1806, 1907, 1909, 1917, and 2105)
(LAC 28:CLXV.103, 305, 309, 311, 313, 319, 323, 325, 509, 512, and 515)

In accordance with the provisions of R.S. 17:6(A)(10) and the Administrative Procedure Act (APA), R.S. 49:953(B)(1) *et seq.*, the Board of Elementary and Secondary Education (BESE) proposes to amend LAC 28:CLXI in *Bulletin 137 – Louisiana Early Learning Center Licensing Regulations* and LAC 28:CLXV *Bulletin 139 – Louisiana Child Care and Development Fund Programs*. The revisions strengthen measures designed to protect children, provide additional clarity to early learning providers, and align BESE policy with federal and state regulations. Additional revisions address parental notice and consent, CCCBC-based determinations, and health and safety, including safe sleep procedures, transportation records, and hazards to children. Further revisions address CCAP eligibility and payments. Reorganization of some information has occurred for ease of access and understanding. Codification of charts ensures ADA compliance and readability. The reorganization groups and aligns like-topics, such as general health and safety that applies to all providers and centers regulated by these bulletins. Updates also establish provisions for the administration of stock medication in accordance with Act 657 of the 2024 Regular Legislative Session.

Title 28

EDUCATION

Part CLXI. Bulletin 137—Louisiana Early Learning Center Licensing Regulations

Chapter 15. Minimum General Requirements and Standards

§1515. Child Records and Cumulative Files

A. – D. ...

E. An early learning center shall provide a written copy of all health-related policies established by the center, including policies regarding accidents, allergic reactions, fever, illness, immunizations, infection, administration of stock medication to a child believed to be having an emergency, and injuries, to the parent or guardian of each child attending or enrolled in the early learning center.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:407.40 and R.S.40:1142.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 41:630 (April 2015), effective July 1, 2015, amended LR 41:2106 (October 2015), LR 44:250 (February 2018), effective March 1, 2018, LR 47:1276 (September 2021), LR 49:862 (May 2023), LR 51:

Chapter 17. Minimum Staffing Requirements and Standards

§1721. Continuing Education

A. – G. ...

1. Providers may complete the approved self-paced, online training provided by the LDOE or utilize an in-person trainer. If taught in person, the training must be taught by a licensed nurse, licensed physician, licensed physician's assistant, licensed pharmacist, licensed paramedic, or licensed EMT who is on the LDOE registry of approved trainers.

H. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:6 and 17:407.40(A)(1) and (3).

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 41:636 (April 2015), effective July 1, 2015, amended LR 41:2108 (October 2015), LR 42:555 (April 2016), LR 44:251 (February 2018), effective March 1, 2018, LR 44:1866 (October 2018), LR 47:1277 (September 2021), LR 49:1712 (October 2023), LR 50:968 (July 2024), LR 51:

§1725. Medication Management Training

A. All staff members who administer medication shall have medication administration training.

B. ...

C. Training for medication administration shall be completed every two years with training approved by the LDOE.

D. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:6 and 17:407.40(A)(1).

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 41:636 (April 2015), effective July 1, 2015, amended LR 44:251 (February 2018), effective March 1, 2018, LR 44:1866 (October 2018), LR 47:1278 (September 2021), LR 49:862 (May 2023), LR 49:1713 (October 2023), LR 51:

Chapter 18. Child Care Criminal Background Checks (CCCBC)

§1805. Persons Ineligible for Child Care Purposes

A. – C. ...

D. In addition, any owner(s) shall not have been convicted of, or pled guilty or nolo contendere to a felony, within the past 10 years, for any of the following crimes of fraud:

1. ...

AUTHORITY NOTE: Promulgated in accordance with 45 CFR 98.43 and R.S. 15:587.1, 17:6, and 407.42.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 44:252 (February 2018), effective March 1, 2018, amended LR 44:1866 (October 2018), amended LR 45:224 (February 2019), LR 47:1278 (September 2021), LR 51:

§1806. Types of CCCBC-Based Determinations of Eligibility for Child Care Purposes

A. ...

1. "owner of child care center" determinations of eligibility are required for owners; and

2. "child care staff member" determinations of eligibility are required for owners, directors and director designees of child care centers and volunteers, staff, visitors, contractors and other persons providing services in any type of child care centers when children are present.

B. A person with an “owner of child care center” determination of eligibility also has a “child care staff member” determination of eligibility.

C. For a person with a “child care staff member” determination of eligibility who wants to become an owner, the person must also obtain an “owner of a child care center” determination of eligibility before that person can become an owner of the child care center.

1. – 2. Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:6.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 45:224 (February 2019), LR 51:

Chapter 19. Minimum Health, Safety, and Environment Requirements and Standards

§1907. Furnishings and Equipment

A. – E.1. ...

2. Cribs shall be free of toys, including stuffed animals, and other soft or loose bedding, including comforters, blankets, sheets, bumper pads, pillows, and wedges when the infant is in the crib. Mattresses for cribs must have a properly fitted, clean sheet.

F. – G. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:407.40(A)(1).

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 41:638 (April 2015), effective July 1, 2015, amended LR 41:2108 (October 2015), LR 44:256 (February 2018), effective March 1, 2018, LR 47:1279 (September 2021), LR 49:1714 (October 2023), LR 51:

§1909. Safe Sleep Practices

A. – H. ...

I. A safety approved crib shall be assigned to and available for each infant in care.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:407.40(A)(1).

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 41:638 (April 2015), effective July 1, 2015, amended LR 44:256 (February 2018), effective March 1, 2018, LR 51:

§1917. Medication Administration

A. – L. ...

M. Stock Emergency Medications.

1. Early learning centers may have stock emergency medications.

2. Stock supply in the name of and for use by the early learning center can only be prescribed by a licensed healthcare professional authorized to prescribe said medication.

3. Life-saving emergency medications can be dispensed by a licensed pharmacist or licensed prescriber for stock supply.

4. Emergency medications are medications that can be administered to treat life-threatening conditions. Such medications may include, but are not limited to, the following:

- a. Epinephrine;
- b. Albuterol;
- c. Naloxone; and
- d. Glucagon.

5. At least one employee at each early learning center shall receive training on the use of auto-injectable epinephrine. Early learning center employees may be trained by a registered nurse, a licensed medical physician, an anaphylaxis training organization, or any other entity approved by LDH.

6. Early learning center employees may be trained on the use of other stock medications such as albuterol, naloxone, and glucagon by a medical emergency training organization, a registered nurse, or a licensed physician who is on the LDOE registry of approved trainers on the administration of emergency stock medications.

7. Employees administering any of these emergency stock medications shall be trained annually on the following:

- a. techniques on how to recognize signs of a life-threatening emergency;
- b. procedures on the storage of emergency medications;
- c. administration of emergency medications;
- d. emergency procedures such as calling emergency medical services (EMS) immediately before or after administering a life-saving medication;
- e. any protocols, including those issued by the LDH for the administration of the emergency stock medications; and
- f. procedures for proper disposal of the stock emergency medications along with the means by which the medication was administered.

8. Once trained, early learning center employees can administer and must properly dispose of any stock emergency medications, upon the earlier of the prescription’s usage or expiration, to a child on the premises who is experiencing a life-threatening medical emergency and has received written authorization for administration of said medication, in accordance with the protocol in the emergency medication standing order.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:407.40(A)(1) and R.S.40:1142.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 41:639 (April 2015), effective July 1, 2015, amended LR 50:969 (July 2024), LR 51:

Chapter 21. Minimum Transportation Requirements and Standards

2105. Field Trips

A. – E.1. ...

2. names and age range of all the children being transported in each vehicle;

3. – 5. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:407.40(A)(1).

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 41:642 (April 2015), effective July 1, 2015, LR 47:1279 (September 2021), LR 51:

Title 28

EDUCATION

Part CLXV. Bulletin 139—Louisiana Child Care and Development Fund Programs

Chapter 1. Child Care Assistance Program

§103. Definitions

CCCBC—child care criminal background check.

Care for Children with Disabilities—for CCAP, child care for a child birth through age 17 who has a current individualized family services plan (IFSP) or individual education plan (IEP) in accordance with the Individuals with Disabilities Education Act (IDEA) or who receives Supplemental Security Income (SSI).

Caregiver—any person legally obligated to provide or secure care for a child, including a parent, legal custodian, foster home parent, or other person providing a residence for the child.

Criminal Background Check (CBC)—Repealed.

Excessive Unexplained Absences—Repealed.

MUP—minor unmarried parent.

Mandated Reporter—professionals who may work with children in the course of their professional duties and who consequently are required to report all suspected cases of child abuse and neglect. This includes any person who provides training or supervision of a child, such as a public or private school teacher, teacher's aide, instructional aide, school principal, school staff member, social worker, probation officer, any other child care institution staff member, licensed or unlicensed day care provider, any individual who provides such services to a child, or any other person made a mandatory reporter under *Children's Code* Article 603 or other applicable law.

Military Child Care Center—child care centers licensed by the U.S. Department of Defense.

Pathways—Louisiana early learning center career development system (LA pathways).

Protective Services—children in foster care, children who are in families under court supervision, children who are in families receiving supports or otherwise engaged with a child welfare agency, children whose family members are deemed essential workers under a governor-declared state of emergency, or children whose family has been affected by a natural disaster.

Quality Start Child Care Rating System—system designed to assess the level of quality of early care and education programs serving birth through age five, communicate the level of quality, and support improvements of child care facilities.

Special Needs Child Care—Repealed.

AUTHORITY NOTE: Promulgated in accordance with 45 CFR part 98 and R.S. 17:407.28.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 41:2109 (October 2015), amended LR 42:42 (January 2016), LR 42:1870 (November 2016), LR 43:1279 (July 2017), LR 44:257 (February 2018), effective March 1, 2018, LR 44:800 (April 2018), LR 47:1279 (September 2021), LR 48:30 (January 2022), LR 48:1006 (April 2022), LR 49:1208 (July 2023), LR 50:969 (July 2024), LR 51:

Chapter 3. CCAP Provider Certification

§305. General Certification Requirements for All Child Care Providers

A. – A.1. ...

2. **Email Address.** Provide a current email address and notify the department immediately upon a change in such email address by updating in the designated LDOE portal;

3. **Time and Attendance.** Participate in the time and attendance system designated by the department and possess the minimum equipment and means necessary to operate the system, including internet access for submission of required attendance records to the LDOE;

4. **Direct Deposit.** Provide complete and accurate letter from bank on bank letterhead or blank, voided check imprinted with the name, bank account, and routing number required for direct deposit;

5. ...

6. **Mandatory Reporting Requirements.** Comply with all mandatory reporting requirements for suspected cases of child abuse or neglect;

7. **Additional Notification.** Provide written notice to Provider Certification and input updates in the designated LDOE portal, of receipt or notice of, or upon becoming aware of, any of the following:

a. change in contact information, within 10 calendar days;

b. temporary closure of more than five calendar days, but fewer than 30 calendar days, within one day of closure of the site;

- c. permanent closure of 30 or more calendar days of a site, within seven calendar days of the closure;
- d. change of location, prior to the change; and
- e. family child care providers and in-home providers shall provide updates on changes in residential household compositions, prior to the change; and

8. Additional Requirements. Meet additional requirements for the specific type of child care provider set forth in §309-317 of this Chapter.

AUTHORITY NOTE: Promulgated in accordance with 42 USC 9858 et seq., 45 CFR Parts 98 and 99, R.S. 17:407.28 and R.S. 17:407.61 et seq.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 41:2111 (October 2015), amended LR 43:1279 (July 2017), LR 51:

§309. Specific Certification and Registration Requirements for Family Child Care Providers

A. – A.7. ...

8. – 12.d. Repealed.

13. ...

a. include the child’s first and last name, arrival and departure times, date, and first and last name of person or entity to whom the child is released;

b. – 14.f. ...

15. – 15.c. Repealed

16. – 16.b. ...

17. – 18. Repealed.

19. – 19.a. ...

b. procedures for all adults living in, or working in the residence where care is provided, or working on the property where care is provided;

c. posting in a visibly accessible area all appropriate emergency phone numbers, such as fire and police, hospitals and Louisiana Poison Control, and the physical address and phone number for the residence in which care is provided; and

d. be reviewed annually for accuracy and updated as changes occur.

20. – 22. ...

23. – 23.c.iii. Repealed.

24. – 26.h. ...

i. A safety approved crib shall be assigned to and available for each infant in care.

j. Children are prohibited from sleeping in playpens or cribs with mesh sides.

k. Cribs shall be free of toys, including stuffed animals, and other soft or loose bedding, including comforters, blankets, sheets, bumper pads, pillows, and wedges when the infant is in the crib. Mattresses for cribs must have a properly fitted, clean sheet.

27. – 30.a. ...

i. Consent to Release. Written consent shall be obtained from the parent prior to releasing any information, recordings, or photographs from which the child might be identified, except to authorized state and federal agencies. This one-time written consent shall be obtained from the parent and updated as changes occur.

ii. Confidentiality. Confidentiality and security shall be maintained for all records of children. Staff is prohibited from disclosing or knowingly permitting the disclosure of any information concerning the child or the family of the child, either directly or indirectly, to any unauthorized person.

b. – 31. ...

AUTHORITY NOTE: Promulgated in accordance with 45 CFR Part 98.43, R.S. 15:587.1, and R.S. 17:407.71.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 41:2111 (October 2015), amended LR 42:2173 (December 2016), LR 43:1279 (July 2017), LR 44:258 (February 2018), effective March 1, 2018, LR 47:1280 (September 2021), LR 49:1208 (July 2023), LR 50:970 (July 2024), LR 51:

§311. Specific Certification Requirements for In-Home Child Care Providers

A. – A.6. ...

7. – 11.d. Repealed.

12. Children’s Daily Attendance. A daily attendance record for children shall be maintained that shall accurately reflect children in care at any given time and shall include the child’s first and last name, arrival and departure times, date, and first and last name of the person or entity to whom the child is released.

13. – 13.f. ...

14. – 14.c. Repealed.

15. – 15.b. ...

16. – 17. Repealed.

18. – 18.a. ...

b. procedures for all adults living in or working in the residence where care is provided, or working on the property where care is provided;

c. posting in a visibly accessible area all appropriate emergency phone numbers, such as fire and police, hospitals and Louisiana Poison Control, and the physical address and phone number for the residence in which care is provided; and

d. be reviewed annually for accuracy and updated as changes occur.

19. – 21. ...

22. – 22.c.iii. Repealed.

23. – 25.h. ...

i. A safety approved crib shall be assigned to and available for each infant in care.

j. Children are prohibited from sleeping in playpens or cribs with mesh sides.

k. Cribs shall be free of toys, including stuffed animals, and other soft or loose bedding, including comforters, blankets, sheets, bumper pads, pillows, and wedges when the infant is in the crib. Mattresses for cribs must have a properly fitted, clean sheet.

26. – 29.a. ...

i. Consent to Release. Written consent shall be obtained from the parent prior to releasing any information, recordings, or photographs from which the child might be identified, except to authorized state and federal agencies. This one-time written consent shall be obtained from the parent and updated as changes occur.

ii. Confidentiality. Confidentiality and security shall be maintained for all records of children. Staff is prohibited from disclosing or knowingly permitting the disclosure of any information concerning the child or the family of the child, either directly or indirectly, to any unauthorized person.

b. – B. ...

AUTHORITY NOTE: Promulgated in accordance with 45 CFR Part 98.43, R.S. 15:587.1, and R.S. 17:407.71.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 41:2112 (October 2015), amended LR 42:2174 (December 2016), LR 43:1280 (July 2017), LR 44:260 (February 2018), effective March 1, 2018, amended LR 47:1282 (September 2021), LR 49:1209 (July 2023), LR 50:970 (July 2024), LR 51:

§313. Specific Certification Requirements for Public School and BESE-Approved Nonpublic School Child Care Centers

A. – A.3. ...

4. – 8.e. Repealed.

9. ...

a. include the child's first and last name, arrival and departure times, date, and first and last name of person or entity to whom the child is released;

b. – 10.f. ...

11. – 11.c. Repealed.

12. – 12.b. ...

13. – 14. Repealed.

15. – 15.c. ...

d. be reviewed annually for accuracy and updated as changes occur.

16. – 17. ...

18. – 18.c.iii. Repealed.

19. – 26.a. ...

i. Consent to Release. Written consent shall be obtained from the parent prior to releasing any information, recordings, or photographs from which the child might be identified, except to authorized state and federal agencies. This one-time written consent shall be obtained from the parent and updated as changes occur.

ii. Confidentiality. Confidentiality and security shall be maintained for all records of children. Staff is prohibited from disclosing or knowingly permitting the disclosure of any information concerning the child or the family of the child, either directly or indirectly, to any unauthorized person.

b. – 27. ...

AUTHORITY NOTE: Promulgated in accordance with 45 CFR Part 98 and R.S. 17:407.26.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 41:2113 (October 2015), amended LR 42:2174 (December 2016), LR 44:261 (February 2018), effective March 1, 2018, amended LR 47:1284 (September 2021), LR 49:1209 (July 2023), LR 50:971 (July 2024), LR 51:

§319. Child Care Provider's Ineligibility for CCAP Payments

A. A child care provider, even if certified to receive CCAP, may not receive CCAP payments for the provider's own children or other children residing in the provider's home.

1. Exception. A child care provider may receive CCAP payments for foster children in the caregiver's custody.

AUTHORITY NOTE: Promulgated in accordance with 45 CFR Part 98 and R.S. 17:6 and 17:407.26.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 41:2114 (October 2015), amended LR 45:1745 (December 2019), LR 51:

§323. General Health and Safety Requirements

A. The health and safety requirements contained in this Section shall apply to any family child care provider, in-home child care provider, school child care center, or military child care center.

B. Pre-Service Orientation Training. Complete four hours of CCAP pre-service orientation training; the LDOE Key Orientation Training Modules 1, 2, and 3; infant, child, and adult CPR; pediatric first aid; and DCFS online Mandated Reporter training prior to initial certification, maintain documentation verifying completion of the training, and submit the documentation with the application for certification to the LDOE. The pre-service orientation training shall at a minimum include information on the following:

1. general emergency preparedness, including natural disasters and man-caused disasters;

2. professionalism;
3. health and safety, including daily observations, supervision regulations, daily attendance, child-to-staff ratios, improper discipline, prohibited discipline, prevention of shaken baby syndrome, prevention of abusive head trauma and child maltreatment, food safety, choking risks, and recognition and reporting of child abuse and neglect;
4. administration of medication consistent with standards for parental consent;
5. prevention and response to emergencies due to food and allergic reactions;
6. appropriate precautions in transporting children, if applicable;
7. public health policies, including prevention and control of infectious diseases and immunization information;
8. handling and storage of hazardous materials and appropriate disposal of bio-contaminants;
9. pediatric first aid and cardiopulmonary resuscitation (CPR);
10. prevention of sudden infant death syndrome and use of safe sleep practices;
11. outdoor play practices;
12. environmental safety;
13. building and physical premises safety, including identification of and protection from hazards, bodies of water, and vehicular traffic;
14. child release procedures; and
15. critical incident procedures.

C. Continuing Training.

1. Annually complete 12 clock hours of training in safety and health topics and job-related subject areas approved by the LDOE. Continuing training shall be completed with LDOE approved trainers and may include, but is not limited to, the following topics:

- a. child development,
- b. child guidance,
- c. child abuse prevention,
- d. emergency preparation,
- e. learning activities,
- f. health and safety,
- g. shaken baby prevention,
- h. CPR,
- i. pediatric first aid,
- j. management/administrative education, or
- k. college credit hours in child care, child development, and/or early childhood;

2. Annually complete the DCFS online Mandated Reporter Training.

3. CPR. Provide documentation of current certification in infant, child, and adult CPR.

4. Pediatric First Aid. Provide documentation of current certification in pediatric first aid.

5. Documentation verifying completion of all required trainings shall be maintained onsite by the provider, whether as hard copies or in electronic form, and made available for inspection upon request by the LDOE.

6. Pre-service orientation training, infant/child/adult CPR, pediatric first aid training, and medication administration training may count as annual training requirements in the certification period in which the training is completed.

7. The three hours of training by LDOE-approved trainer on infectious diseases, health and safety, and/or food service preparation required in LAC 51:XXI.301 shall not count towards the annual training requirements. Providers may complete the approved self-paced, online training provided by the LDOE or utilize an in-person trainer. If taught in person, the training must be taught by a licensed nurse, licensed physician, licensed physician's assistant, licensed social worker, or licensed nutritionist who is on the LDOE registry of approved trainers.

D. Medication Administration.

1. No medication or special medical procedure shall be administered to a child unless authorized in writing by the parent.

2. Written authorization must contain explicit dosing criteria and must not simply direct "as indicated on bottle." Such authorization shall include:

- a. the name of the child;
- b. drug name and strength;
- c. date(s) to be administered;
- d. directions for use, including route (oral, topical), dosage, frequency, time and schedule, and special instructions if applicable; and
- e. signature of parent and date of signature.

3. Supplements. Children shall not be administered any form of supplements without prior written parental authorization.

E. Medication Administration Training. Provide documentation of current medication administration training. Providers may complete the approved self-paced, online training provided by the LDOE or utilize an in-person trainer. If taught in person, the training

must be taught by a licensed pharmacist, licensed nurse, licensed physician, licensed physician's assistant, licensed paramedic, or licensed EMT who is on the LDOE registry of approved trainers.

1. Training for medication administration shall be completed every two years with training approved by the LDOE.
2. Documentation of current completion of such training shall be maintained by the provider and shall be available for on-site inspection, whether as hard copies or in electronic form, upon request by the LDOE.

F. Stock Emergency Medications.

1. Child care providers may have stock emergency medications.
2. Stock supply in the name of and for the use by the provider can only be prescribed by a licensed healthcare professional authorized to prescribe said medication.
3. Life-saving emergency medications can be dispensed by a licensed pharmacist or licensed prescriber for stock supply.
4. Emergency medications are medications that can be administered to treat life-threatening conditions. Such medications may include, but are not limited to, the following:
 - a. Epinephrine;
 - b. Albuterol;
 - c. Naloxone; and
 - d. Glucagon.
5. Provider employees may be trained on the use of auto-injectable epinephrine by a registered nurse, a licensed medical physician, an anaphylaxis training organization, or any other entity approved by LDH.
6. Provider employees may be trained on the use of other stock medications such as albuterol, naloxone, and glucagon by a medical emergency training organization, a registered nurse, or a licensed physician who is on the LDOE registry of approved trainers on the administration of emergency stock medications.
7. Employees administering any of these emergency stock medications shall be trained annually on the following;
 - a. techniques on how to recognize signs of a life-threatening emergency;
 - b. procedures on the storage of emergency medications;
 - c. administration of emergency medications;
 - d. emergency procedures such as calling emergency medical services (EMS) immediately before or after administering a life-saving medication;
 - e. any protocols, including those issued by the LDH for the administration of the emergency stock medications; and
 - f. procedures for proper disposal of the stock emergency medications along with the means by which the medication was administered.
8. Once trained, provider employees can administer and must properly dispose of any stock emergency medications, upon the earlier of the prescription's usage or expiration, to a child on the premises who is experiencing a life-threatening medical emergency and has received written authorization to administer said medication, in accordance with the protocol in the emergency medication standing order.

G. All staff and owners shall report any allegation or suspected abuse or neglect of a child to the Louisiana Child Protection Statewide Hotline at (855) 4LA-KIDS or (855) 452-5437. There shall not be a delay in the reporting of suspected abuse or neglect to the hotline in order to conduct an internal investigation to verify the abuse or neglect allegations, and staff shall not be required to report suspected abuse or neglect to the provider or management prior to reporting to the hotline.

H. Burn Hazards.

1. Microwave ovens, bottle warming devices and crock pots are prohibited in areas accessible to children.
 2. Hot liquids shall not be consumed in the presence of children.
 3. Microwave ovens shall not be used for warming bottles or infant food.
 4. Children shall not be held by a staff member when the staff member is removing a bottle from a warming device.
- I. Hazardous Materials and Other Items That Can Be Harmful to Children. Items such as medications, poisons, cleaning supplies and chemicals, equipment, tools, knives, and other potentially dangerous utensils that can be harmful to children shall be kept in a locked cabinet or other secure place that ensures items are inaccessible to children.
1. Plastic bags, when not in use, regardless of purpose or use, shall be made inaccessible to children.
 2. Alcohol, tobacco in any form, other potentially toxic substances, fireworks and firearms, and pellet and BB guns are prohibited in areas accessible to children.

J. Building and Physical Premises. Identify and protect children from safety hazards in the residence and on the premises, such as uncovered electrical outlets, strings and cords, bodies of water, and vehicular traffic.

1. Construction, remodeling, and alterations of structures shall be done in such a manner so as to prevent hazards or unsafe conditions, such as fumes, dust, and safety hazards.

AUTHORITY NOTE: Promulgated in accordance with 45 CFR Part 98.43, R.S. 15:587.1, R.S. 40:1142, and R.S. 17:407.71.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 51:

§325. Behavior Management

A. Behavior management requirements contained in this Section shall apply to any family child care provider, in-home child care provider, school child care center, or military child care center.

B. Provider shall develop, implement, and follow a written behavior management policy describing the methods of behavior guidance and management that shall be used at the site.

C. The behavior management policy shall prohibit:

1. physical or corporal punishment which includes but is not limited to yelling, slapping, spanking, yanking, pinching, other measures producing physical pain, putting anything in the mouth of the child, requiring a child to exercise, or placing a child in an uncomfortable position;
2. verbal abuse;
3. the threat of prohibitive action even if there is no intent to follow through with the threat;
4. being disciplined by another child, being bullied by another child, or being deprived of food or beverages;
5. being restrained in high chairs or feeding tables for disciplinary purposes; and
6. having active play time withheld for disciplinary purposes.

D. Time Out.

1. Time out shall not be used for children under age two.
2. A time out shall take place within sight of staff.
3. The length of each time out shall be based on the age of the child and shall not exceed one minute per year of age.

E. The behavior management policy shall establish steps for addressing behaviors identified by the provider as dangerous and/or out of control behaviors. Suspension or expulsion should only be considered as a final action after the implementation of behavior support strategies, including at a minimum:

1. engaging parents by written communication and/or parent conference; and
2. providing a referral to EarlySteps, Child Search, and/or mental health consultant, if appropriate.

AUTHORITY NOTE: Promulgated in accordance with 45 CFR Part 98.43, R.S. 15:587.1, and R.S. 17:407.71.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 51:

Chapter 5. CCAP Household Eligibility

§509. Certification Requirements for Non-Categorically Eligible Households

A. – A.3.b.v. ...

vi. Repealed.

vii. ...

viii. Repealed.

ix. – 4. ...

a. Exception. If a household is experiencing homelessness, the household shall have 90 calendar days from the date of its initial determination of eligibility to submit documentation supporting the initial determination of eligibility.

5. – 5.e. ...

i. To become certified as a CCAP household in accordance with this exception, the household must meet all certification requirements in this Section other than the employment and/or training activities required in this Section, and must submit all documentation establishing that the head of household is actively seeking employment and/or training.

ii. – iii. ...

iv. When a CCAP waiting list is in use, actively seeking employment status is only accepted for redetermination cases.

6. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:6 and 17:407.28. and 45 CFR Parts 98 and 99.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 42:43 (January 2016), amended LR 42:2175 (December 2016), LR 44:261 (February 2018), effective March 1, 2018, LR 45:900 (July 2019), LR 46:1373 (October 2020), LR 47:573 (May 2021), LR 48:31 (January 2022), LR 48:1270 (May 2022), LR 51:

§512. Redetermination of Household Certification for Non-Categorically Eligible Households

A. ...

B. Repealed.

C. The LDOE will allow a presumptive eligibility period of up to 30 days on redetermination cases, following the recertification anniversary date, which is the deadline for redetermination application.

D. A redetermination application received after the 30 days of the presumptive eligibility period will be considered a new application.

AUTHORITY NOTE: Promulgated in accordance with 45 CFR Parts 98 and 99 and R.S. 17:407.28.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 44:801 (April 2018), LR 51:

§515. Payments Made on Behalf of Households

A. The state maximum daily rates for CCAP care for child care provider types are as follows:

1. Type III Early Learning Center.
 - a. Regular Care—\$31.50;
 - b. Regular Care for Toddlers—\$42.00;
 - c. Regular Care for Infants—\$68.00;
 - d. Special Needs Care Incentive—\$39.69;
 - e. Special Needs Care Incentive for Toddlers—\$52.92; and
 - f. Special Needs Care Incentive for Infants—\$85.68.

2. School Child Care Center.
 - a. Regular Care—\$24.00;
 - b. Regular Care for Toddlers—\$24.00;
 - c. Regular Care for Infants—\$24.00;
 - d. Special Needs Care Incentive—\$30.24;
 - e. Special Needs Care Incentive for Toddlers—\$30.24; and
 - f. Special Needs Care Incentive for Infants—\$30.24.
3. Family Child Care Provider.
 - a. Regular Care—\$29.00;
 - b. Regular Care for Toddlers—\$42.00;
 - c. Regular Care for Infants—\$61.00;
 - d. Special Needs Care Incentive—\$36.54;
 - e. Special Needs Care Incentive for Toddlers—\$52.92; and
 - f. Special Needs Care Incentive for Infants—\$76.86.
4. In-Home Provider.
 - a. Regular Care—\$25.00;
 - b. Regular Care for Toddlers—\$25.25;
 - c. Regular Care for Infants—\$26.65;
 - d. Special Needs Care Incentive—\$31.50;
 - e. Special Needs Care Incentive for Toddlers—\$31.82; and
 - f. Special Needs Care Incentive for Infants—\$33.58.
5. Military Child Care Centers.
 - a. Regular Care—\$31.50;
 - b. Regular Care for Toddlers—\$42.00;
 - c. Regular Care for Infants—\$68.00;
 - d. Special Needs Care Incentive—\$39.69;
 - e. Special Needs Care Incentive for Toddlers—\$52.92; and
 - f. Special Needs Care Incentive for Infants—\$85.68.

Child Care Provider Type	Regular Care	Regular Care for Toddlers	Regular Care for Infants	Special Needs Care Incentive	Special Needs Care Incentive for Toddlers	Special Needs Care Incentive for Infants
Type III Early Learning Center	\$31.50	\$42.00	\$68.00	\$39.69	\$52.92	\$85.68
School Child Care Center	\$24.00	\$24.00	\$24.00	\$30.24	\$30.24	\$30.24
Family Child Care Provider	\$29.00	\$42.00	\$61.00	\$36.54	\$52.92	\$76.86
In-Home Provider	\$25.00	\$25.25	\$26.65	\$31.50	\$31.82	\$33.58
Military Child Care Centers	\$31.50	\$42.00	\$68.00	\$39.69	\$52.92	\$85.68

B. – C.3.

...

D. Automated payment for voucher seats will be made prior to provision of child care services.

E. – H.6.

...

AUTHORITY NOTE: Promulgated in accordance with 45 CFR Parts 98 and 99, and R.S. 17:6 and 17:407.28.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 41:2116 (October 2015), amended LR 42:44 (January 2016), LR 42:1870 (November 2016), LR 44:801 (April 2018), LR 45:1745 (December 2019), LR 47:573 (May 2021), LR 48:31 (January 2022), LR 48:1270 (May 2022), LR 50:971 (July 2024), LR 51:

COMPARISON DOCUMENT

Title 28

EDUCATION

Part CLXI. Bulletin 137—Louisiana Early Learning Center Licensing Regulations

Chapter 15. Minimum General Requirements and Standards

§1515. Child Records and Cumulative Files

A. – D. ...

E. An early learning center shall provide a written copy of all health-related policies established by the center, including policies regarding accidents, allergic reactions, fever, illness, immunizations, infection, administration of stock medication to a child believed to be having an emergency ~~auto-injectable epinephrine to a child believed to be having an anaphylactic reaction~~, and injuries, to the parent or guardian of each child attending or enrolled in the early learning center.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:407.40 and R.S.40:1142.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 41:630 (April 2015), effective July 1, 2015, amended LR 41:2106 (October 2015), LR 44:250 (February 2018), effective March 1, 2018, LR 47:1276 (September 2021), LR 49:862 (May 2023), LR 51:

Chapter 17. Minimum Staffing Requirements and Standards

§1721. Continuing Education

A. – G. ...

1. Providers may complete the approved self-paced, online training provided by the LDOE or utilize an in-person trainer. If taught in person, the training must be taught by a licensed nurse, licensed physician, licensed physician's assistant, licensed pharmacist, licensed paramedic, or licensed EMT who is on the LDOE registry of approved trainers.

H. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:6 and 17:407.40(A)(1) and (3).

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 41:636 (April 2015), effective July 1, 2015, amended LR 41:2108 (October 2015), LR 42:555 (April 2016), LR 44:251 (February 2018), effective March 1, 2018, LR 44:1866 (October 2018), LR 47:1277 (September 2021), LR 49:1712 (October 2023), LR 50:968 (July 2024), LR 51:

§1725. Medication Management Training

A. All staff members who administer medication shall have medication administration training ~~that includes auto-injectable epinephrine~~.

B. ...

C. ~~Training for auto-injectable epinephrine shall be completed every two years with training approved by the LDOE, a registered nurse, a licensed medical physician, an anaphylaxis training organization, or any other entity approved by the Louisiana Department of Health. Training for medication administration shall be completed every two years with training approved by the LDOE.~~

D. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:6 and 17:407.40(A)(1).

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 41:636 (April 2015), effective July 1, 2015, amended LR 44:251 (February 2018), effective March 1, 2018, LR 44:1866 (October 2018), LR 47:1278 (September 2021), LR 49:862 (May 2023), LR 49:1713 (October 2023), LR 51:

Chapter 18. Child Care Criminal Background Checks (CCCBC)

§1805. Persons Ineligible for Child Care Purposes

A. – C. ...

D. In addition, ~~for type III centers an~~ any owner(s), director, or director designee shall not have been convicted of, or pled guilty or nolo contendere to a felony, within the past 10 years, for any of the following crimes of fraud:

1. ...

AUTHORITY NOTE: Promulgated in accordance with 45 CFR 98.43 and R.S. 15:587.1, 17:6, and 407.42.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 44:252 (February 2018), effective March 1, 2018, amended LR 44:1866 (October 2018), amended LR 45:224 (February 2019), LR 47:1278 (September 2021), LR 51:

§1806. Types of CCCBC-Based Determinations of Eligibility for Child Care Purposes

A. ...

1. ~~“owner/director/director designee of type III centers~~ owner of child care center” determinations of eligibility are required for owners, ~~directors and director designees of type III centers;~~ and

2. “child care staff member” determinations of eligibility are required for owners, directors and director designees of ~~type I and type II~~ child care centers and volunteers, staff, visitors, contractors and other persons providing services in any type of child care centers when children are present.

B. A person with an ~~“owner/director/director designee of type III centers~~ owner of child care center” determination of eligibility also has a “child care staff member” determination of eligibility.

C. For a person with a “child care staff member” determination of eligibility who wants to become an owner, the person must also obtain an “owner of a child care center” determination of eligibility before that person can become an owner of the child care center. A person with a “child care staff member” determination of eligibility does not have an “owner/director/director designee of type III centers” determination of eligibility.

1. – 2. Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:6.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 45:224 (February 2019), LR 51:

Chapter 19. Minimum Health, Safety, and Environment Requirements and Standards

§1907. Furnishings and Equipment

A. – E.1. ...

2. Cribs shall be free of toys, including stuffed animals, and other soft or loose bedding, including comforters, blankets, sheets, bumper pads, pillows, stuffed animals and wedges when the infant child is in the crib. Mattresses for cribs must have a properly fitted, clean sheet.

F. – G. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:407.40(A)(1).

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 41:638 (April 2015), effective July 1, 2015, amended LR 41:2108 (October 2015), LR 44:256 (February 2018), effective March 1, 2018, LR 47:1279 (September 2021), LR 49:1714 (October 2023), LR 51:

§1909. Safe Sleep Practices

A. – H. ...

I. A safety approved crib shall be assigned to and available for each infant in care.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:407.40(A)(1).

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 41:638 (April 2015), effective July 1, 2015, amended LR 44:256 (February 2018), effective March 1, 2018, LR 51:

§1917. Medication Administration

A. – L. ...

M. Stock Emergency Medications.

1. Early learning centers may have stock emergency medications.

2. Stock supply in the name of and for use by the early learning center can only be prescribed by a licensed healthcare professional authorized to prescribe said medication.

3. Life-saving emergency medications can be dispensed by a licensed pharmacist or licensed prescriber for stock supply.

4. Emergency medications are medications that can be administered to treat life-threatening conditions. Such medications may include, but are not limited to, the following:

a. Epinephrine;

b. Albuterol;

c. Naloxone; and

d. Glucagon.

5. At least one employee at each early learning center shall receive training on the use of auto-injectable epinephrine. Early learning center employees may be trained by a registered nurse, a licensed medical physician, an anaphylaxis training organization, or any other entity approved by LDH.

6. Early learning center employees may be trained on the use of other stock medications such as albuterol, naloxone, and glucagon by a medical emergency training organization, a registered nurse, or a licensed physician who is on the LDOE registry of approved trainers on the administration of emergency stock medications.

7. Employees administering any of these emergency stock medications shall be trained annually on the following:

a. techniques on how to recognize signs of a life-threatening emergency;

b. procedures on the storage of emergency medications;

c. administration of emergency medications;

d. emergency procedures such as calling emergency medical services (EMS) immediately before or after administering a life-saving medication;

e. any protocols, including those issued by the LDH for the administration of the emergency stock medications; and

f. procedures for proper disposal of the stock emergency medications along with the means by which the medication was administered.

8. Once trained, early learning center employees can administer and must properly dispose of any stock emergency medications, upon the earlier of the prescription's usage or expiration, to a child on the premises who is experiencing a life-threatening medical emergency and has received written authorization for administration of said medication, in accordance with the protocol in the emergency medication standing order.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:407.40(A)(1) and R.S.40:1142.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 41:639 (April 2015), effective July 1, 2015, amended LR 50:969 (July 2024), LR 51:

Chapter 21. Minimum Transportation Requirements and Standards

2105. Field Trips

A. – E.1. ...

2. names and age range of all the children being transported in each vehicle;

3. – 5. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:407.40(A)(1).

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 41:642 (April 2015), effective July 1, 2015, LR 47:1279 (September 2021), LR 51:

Title 28

EDUCATION

Part CLXV. Bulletin 139—Louisiana Child Care and Development Fund Programs

Chapter 1. Child Care Assistance Program

§103. Definitions

CCCBC—child care criminal background check.

Care for Children with Disabilities—for CCAP, child care for a child birth through age 17 who has a current individualized family services plan (IFSP) or individual education plan (IEP) in accordance with the Individuals with Disabilities Education Act (IDEA) or who receives Supplemental Security Income (SSI).

Caregiver—any person legally obligated to provide or secure care for a child, including a parent, legal custodian, foster home parent, or other person providing a residence for the child.

Criminal Background Check (CBC)—Repealed.

Excessive Unexplained Absences—Repealed.

MUP—minor unmarried parent.

Mandated Reporter—professionals who may work with children in the course of their professional duties and who consequently are required to report all suspected cases of child abuse and neglect. This includes any person who provides training or supervision of a child, such as a public or private school teacher, teacher's aide, instructional aide, school principal, school staff member, social worker, probation officer, any other child care institution staff member, licensed or unlicensed day care provider, any individual who provides such services to a child, or any other person made a mandatory reporter under *Children's Code* Article 603 or other applicable law.

Military Child Care Center—child care centers licensed by the U.S. Department of Defense.

Pathways—Louisiana early learning center career development system (LA pathways).

Protective Services—children in foster care, children who are in families under court supervision, children who are in families receiving supports or otherwise engaged with a child welfare agency, children whose family members are deemed essential workers under a governor-declared state of emergency, or children whose family has been affected by a natural disaster.

Quality Start Child Care Rating System—system designed to assess the level of quality of early care and education programs serving birth through age five, communicate the level of quality, and support improvements of child care facilities.

Special Needs Child Care—Repealed.

AUTHORITY NOTE: Promulgated in accordance with 45 CFR part 98 and R.S. 17:407.28.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 41:2109 (October 2015), amended LR 42:42 (January 2016), LR 42:1870 (November 2016), LR 43:1279 (July 2017), LR 44:257 (February 2018), effective March 1, 2018, LR 44:800 (April 2018), LR 47:1279 (September 2021), LR 48:30 (January 2022), LR 48:1006 (April 2022), LR 49:1208 (July 2023), LR 50:969 (July 2024), LR 51:

Chapter 3. CCAP Provider Certification

§305. General Certification Requirements for All Child Care Providers

A. – A.1.

...

2. Email Address. Provide a current email address and notify the department immediately upon a change in such email address by updating in the designated LDOE portal submitting written notice to the LDE by fax or email;

3. Time and Attendance. Participate in the time and attendance system designated by the department and possess the minimum equipment and means necessary to operate the system, including internet access for submission of required attendance records to the LDOE;

4. Direct Deposit. Provide complete and accurate letter from bank on bank letterhead or blank, voided check imprinted with the name, bank account, and routing number documentation and information required for direct deposit;

5. ...

6. Mandatory Reporting Requirements. Comply with all mandatory reporting requirements for suspected cases of child abuse or neglect; and

7. Additional Notification. Provide written notice to Provider Certification and input updates in the designated LDOE portal of receipt or notice of, or upon becoming aware of, any of the following: Additional Requirements. Meet additional requirements for the specific type of child care provider set forth in §309-317.

a. change in contact information, within 10 calendar days;

b. temporary closure of more than five calendar days, but fewer than 30 calendar days, within one day of closure of the site;

c. permanent closure of 30 or more calendar days of a site, within seven calendar days of the closure;

d. change of location, prior to the change; and

e. family child care providers and in-home providers shall provide updates on changes in residential household compositions, prior to the change; and

8. Additional Requirements. Meet additional requirements for the specific type of child care provider set forth in §309-317 of this Chapter.

AUTHORITY NOTE: Promulgated in accordance with 42 USC 9858 et seq., 45 CFR Parts 98 and 99, R.S. 17:407.28 and R.S. 17:407.61 et seq.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 41:2111 (October 2015), amended LR 43:1279 (July 2017), LR 51:

§309. Specific Certification and Registration Requirements for Family Child Care Providers

A. – A.7. ...

8. – 12.d. Repealed.

13. ...

a. include the child's first and last name, arrival and departure times, date, and first and last name of person or entity to whom the child is released;

b. – 14.f. ...

15. – 15.c. Repealed

16. – 16.b. ...

17. – 18. Repealed.

19. – 19.a. ...

b. procedures for all adults living in, or working in the residence where care is provided, or working on the property where care is provided; and

c. posting in a visibly accessible area all appropriate emergency phone numbers, such as fire and police, hospitals and Louisiana Poison Control, and the physical address and phone number for the residence in which care is provided-; and

d. be reviewed annually for accuracy and updated as changes occur.

20. – 22. ...

23. – 23.c.iii. Repealed.

24. – 26.h. ...

i. A safety approved crib shall be assigned to and available for each infant in care.

j. Children are prohibited from sleeping in playpens or cribs with mesh sides.

k. Cribs shall be free of toys, including stuffed animals, and other soft or loose bedding, including comforters, blankets, sheets, bumper pads, pillows, and wedges when the infant is in the crib. Mattresses for cribs must have a properly fitted, clean sheet.

27. – 30.a. ...

i. Consent to Release. Written consent shall be obtained from the parent prior to releasing any information, recordings, or photographs from which the child might be identified, except to authorized state and federal agencies. This one-time written consent shall be obtained from the parent and updated as changes occur.

ii. Confidentiality. Confidentiality and security shall be maintained for all records of children. Staff is prohibited from disclosing or knowingly permitting the disclosure of any information concerning the child or the family of the child, either directly or indirectly, to any unauthorized person.

b. – 31. ...

AUTHORITY NOTE: Promulgated in accordance with 45 CFR Part 98.43, R.S. 15:587.1, and R.S. 17:407.71.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 41:2111 (October 2015), amended LR 42:2173 (December 2016), LR 43:1279 (July 2017), LR 44:258 (February 2018), effective March 1, 2018, LR 47:1280 (September 2021), LR 49:1208 (July 2023), LR 50:970 (July 2024), LR 51:

§311. Specific Certification Requirements for In-Home Child Care Providers

A. – A.6. ...

7. – 11.d. Repealed.

12. Children's Daily Attendance. A daily attendance record for children shall be maintained that shall accurately reflect children in care at any given time and shall include the child's first and last name, arrival and departure times, date, and first and last name of the person or entity to whom the child is released.

13. – 13.f. ...

14. – 14.c. Repealed.

15. – 15.b. ...

16. – 17. Repealed.

18. – 18.a. ...

b. procedures for all adults living in or working in the residence where care is provided, or working on the property where care is provided; and

c. posting in a visibly accessible area all appropriate emergency phone numbers, such as fire and police, hospitals and Louisiana Poison Control, and the physical address and phone number for the residence in which care is provided-; and

d. be reviewed annually for accuracy and updated as changes occur.

19. – 21. ...

22. – 22.c.iii. Repealed.

23. – 25.h. ...

i. A safety approved crib shall be assigned to and available for each infant in care.

j. Children are prohibited from sleeping in playpens or cribs with mesh sides.

k. Cribs shall be free of toys, including stuffed animals, and other soft or loose bedding, including comforters, blankets, sheets, bumper pads, pillows, and wedges when the infant is in the crib. Mattresses for cribs must have a properly fitted, clean sheet.

26. – 29.a. ...

i. Consent to Release. Written consent shall be obtained from the parent prior to releasing any information, recordings, or photographs from which the child might be identified, except to authorized state and federal agencies. This one-time written consent shall be obtained from the parent and updated as changes occur.

ii. Confidentiality. Confidentiality and security shall be maintained for all records of children. Staff is prohibited from disclosing or knowingly permitting the disclosure of any information concerning the child or the family of the child, either directly or indirectly, to any unauthorized person.

b. – B. ...

AUTHORITY NOTE: Promulgated in accordance with 45 CFR Part 98.43, R.S. 15:587.1, and R.S. 17:407.71.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 41:2112 (October 2015), amended LR 42:2174 (December 2016), LR 43:1280 (July 2017), LR 44:260 (February 2018), effective March 1, 2018, amended LR 47:1282 (September 2021), LR 49:1209 (July 2023), LR 50:970 (July 2024), LR 51:

§313. Specific Certification Requirements for Public School and BESE-Approved Nonpublic School Child Care Centers

A. – A.3. ...

4. – 8.e. Repealed.

9. ...

a. include the child's first and last name, arrival and departure times, date, and first and last name of person or entity to whom the child is released;

b. – 10.f. ...

11. – 11.c. Repealed.

12. – 12.b. ...

13. – 14. Repealed.

15. – 15.c. ...

d. be reviewed annually for accuracy and updated as changes occur.

16. – 17. ...

18. – 18.c.iii. Repealed.

19. – 26.a. ...

i. Consent to Release. Written consent shall be obtained from the parent prior to releasing any information, recordings, or photographs from which the child might be identified, except to authorized state and federal agencies. This one-time written consent shall be obtained from the parent and updated as changes occur.

ii. Confidentiality. Confidentiality and security shall be maintained for all records of children. Staff is prohibited from disclosing or knowingly permitting the disclosure of any information concerning the child or the family of the child, either directly or indirectly, to any unauthorized person.

b. – 27. ...

AUTHORITY NOTE: Promulgated in accordance with 45 CFR Part 98 and R.S. 17:407.26.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 41:2113 (October 2015), amended LR 42:2174 (December 2016), LR 44:261 (February 2018), effective March 1, 2018, amended LR 47:1284 (September 2021), LR 49:1209 (July 2023), LR 50:971 (July 2024), LR 51:

§319. Caregiver's Child Care Provider's Ineligibility for CCAP Payments

A. A child care provider caregiver, even if certified to receive CCAP, may not receive CCAP payments for the provider's own children or other children residing in the provider's home caregiver's own children or other children in the caregiver's custody.

1. Exception. A child care provider caregiver may receive CCAP payments for foster children in the caregiver's custody.

AUTHORITY NOTE: Promulgated in accordance with 45 CFR Part 98 and R.S. 17:6 and 17:407.26.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 41:2114 (October 2015), amended LR 45:1745 (December 2019), LR 51:

§323. General Health and Safety Requirements

A. The health and safety requirements contained in this Section shall apply to any family child care provider, in-home child care provider, school child care center, or military child care center.

B. Pre-Service Orientation Training. Complete four hours of CCAP pre-service orientation training; the LDOE Key Orientation Training Modules 1, 2, and 3; infant, child, and adult CPR; pediatric first aid; and DCFS online Mandated Reporter training prior to initial certification, maintain documentation verifying completion of the training, and submit the documentation with the application for certification to the LDOE. The pre-service orientation training shall at a minimum include information on the following:

1. general emergency preparedness, including natural disasters and man-caused disasters;

2. professionalism;

3. health and safety, including daily observations, supervision regulations, daily attendance, child-to-staff ratios, improper discipline, prohibited discipline, prevention of shaken baby syndrome, prevention of abusive head trauma and child maltreatment, food safety, choking risks, and recognition and reporting of child abuse and neglect;

4. administration of medication consistent with standards for parental consent;

5. prevention and response to emergencies due to food and allergic reactions;
6. appropriate precautions in transporting children, if applicable;
7. public health policies, including prevention and control of infectious diseases and immunization information;
8. handling and storage of hazardous materials and appropriate disposal of bio-contaminants;
9. pediatric first aid and cardiopulmonary resuscitation (CPR);
10. prevention of sudden infant death syndrome and use of safe sleep practices;
11. outdoor play practices;
12. environmental safety;
13. building and physical premises safety, including identification of and protection from hazards, bodies of water, and vehicular traffic;
14. child release procedures; and
15. critical incident procedures.

C. Continuing Training.

1. Annually complete 12 clock hours of training in safety and health topics and job-related subject areas approved by the LDOE. Continuing training shall be completed with LDOE approved trainers and may include, but is not limited to, the following topics:

- a. child development.
- b. child guidance.
- c. child abuse prevention.
- d. emergency preparation.
- e. learning activities.
- f. health and safety.
- g. shaken baby prevention.
- h. CPR.
- i. pediatric first aid.
- j. management/administrative education, or
- k. college credit hours in child care, child development, and/or early childhood;

2. Annually complete the DCFS online Mandated Reporter Training.

3. CPR. Provide documentation of current certification in infant, child, and adult CPR.

4. Pediatric First Aid. Provide documentation of current certification in pediatric first aid.

5. Documentation verifying completion of all required trainings shall be maintained onsite by the provider, whether as hard copies or in electronic form, and made available for inspection upon request by the LDOE.

6. Pre-service orientation training, infant/child/adult CPR, pediatric first aid training, and medication administration training may count as annual training requirements in the certification period in which the training is completed.

7. The three hours of training by LDOE-approved trainer on infectious diseases, health and safety, and/or food service preparation required in LAC 51:XXI.301 shall not count towards the annual training requirements. Providers may complete the approved self-paced, online training provided by the LDOE or utilize an in-person trainer. If taught in person, the training must be taught by a licensed nurse, licensed physician, licensed physician's assistant, licensed social worker, or licensed nutritionist who is on the LDOE registry of approved trainers.

D. Medication Administration.

1. No medication or special medical procedure shall be administered to a child unless authorized in writing by the parent.

2. Written authorization must contain explicit dosing criteria and must not simply direct "as indicated on bottle." Such authorization shall include:

- a. the name of the child;
- b. drug name and strength;
- c. date(s) to be administered;

d. directions for use, including route (oral, topical), dosage, frequency, time and schedule, and special instructions if applicable; and

- e. signature of parent and date of signature.

3. Supplements. Children shall not be administered any form of supplements without prior written parental authorization.

E. Medication Administration Training. Provide documentation of current medication administration training. Providers may complete the approved self-paced, online training provide by the LDOE or utilize an in-person trainer. If taught in person, the training must be taught by a licensed pharmacist, licensed nurse, licensed physician, licensed physician's assistant, licensed paramedic, or licensed EMT who is on the LDOE registry of approved trainers.

1. Training for medication administration shall be completed every two years with training approved by the LDOE.

2. Documentation of current completion of such training shall be maintained by the provider and shall be available for on-site inspection, whether as hard copies or in electronic form, upon request by the LDOE.

F. Stock Emergency Medications.

1. Child care providers may have stock emergency medications.
2. Stock supply in the name of and for the use by the provider can only be prescribed by a licensed healthcare professional authorized to prescribe said medication.
3. Life-saving emergency medications can be dispensed by a licensed pharmacist or licensed prescriber for stock supply.
4. Emergency medications are medications that can be administered to treat life-threatening conditions. Such medications may include, but are not limited to, the following:
 - a. Epinephrine;
 - b. Albuterol;
 - c. Naloxone; and
 - d. Glucagon.
5. Provider employees may be trained on the use of auto-injectable epinephrine by a registered nurse, a licensed medical physician, an anaphylaxis training organization, or any other entity approved by LDH.
6. Provider employees may be trained on the use of other stock medications such as albuterol, naloxone, and glucagon by a medical emergency training organization, a registered nurse, or a licensed physician who is on the LDOE registry of approved trainers on the administration of emergency stock medications.
7. Employees administering any of these emergency stock medications shall be trained annually on the following:
 - a. techniques on how to recognize signs of a life-threatening emergency;
 - b. procedures on the storage of emergency medications;
 - c. administration of emergency medications;
 - d. emergency procedures such as calling emergency medical services (EMS) immediately before or after administering a life-saving medication;
 - e. any protocols, including those issued by the LDH for the administration of the emergency stock medications; and
 - f. procedures for proper disposal of the stock emergency medications along with the means by which the medication was administered.
8. Once trained, provider employees can administer and must properly dispose of any stock emergency medications, upon the earlier of the prescription's usage or expiration, to a child on the premises who is experiencing a life-threatening medical emergency and has received written authorization to administer said medication, in accordance with the protocol in the emergency medication standing order.

G. All staff and owners shall report any allegation or suspected abuse or neglect of a child to the Louisiana Child Protection Statewide Hotline at (855) 4LA-KIDS or (855) 452-5437. There shall not be a delay in the reporting of suspected abuse or neglect to the hotline in order to conduct an internal investigation to verify the abuse or neglect allegations, and staff shall not be required to report suspected abuse or neglect to the provider or management prior to reporting to the hotline.

H. Burn Hazards.

1. Microwave ovens, bottle warming devices and crock pots are prohibited in areas accessible to children.
2. Hot liquids shall not be consumed in the presence of children.
3. Microwave ovens shall not be used for warming bottles or infant food.
4. Children shall not be held by a staff member when the staff member is removing a bottle from a warming device.

I. Hazardous Materials and Other Items That Can Be Harmful to Children. Items such as medications, poisons, cleaning supplies and chemicals, equipment, tools, knives, and other potentially dangerous utensils that can be harmful to children shall be kept in a locked cabinet or other secure place that ensures items are inaccessible to children.

1. Plastic bags, when not in use, regardless of purpose or use, shall be made inaccessible to children.
2. Alcohol, tobacco in any form, other potentially toxic substances, fireworks and firearms, and pellet and BB guns are prohibited in areas accessible to children.

J. Building and Physical Premises. Identify and protect children from safety hazards in the residence and on the premises, such as uncovered electrical outlets, strings and cords, bodies of water, and vehicular traffic.

1. Construction, remodeling, and alterations of structures shall be done in such a manner so as to prevent hazards or unsafe conditions, such as fumes, dust, and safety hazards.

AUTHORITY NOTE: Promulgated in accordance with 45 CFR Part 98.43, R.S. 15:587.1, R.S. 40:1142, and R.S. 17:407.71.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 51:

§325. Behavior Management

A. Behavior management requirements contained in this Section shall apply to any family child care provider, in-home child care provider, school child care center, or military child care center.

B. Provider shall develop, implement, and follow a written behavior management policy describing the methods of behavior guidance and management that shall be used at the site.

C. The behavior management policy shall prohibit:

1. physical or corporal punishment which includes but is not limited to yelling, slapping, spanking, yanking, pinching, other measures producing physical pain, putting anything in the mouth of the child, requiring a child to exercise, or placing a child in an uncomfortable position;
2. verbal abuse;

3. the threat of prohibitive action even if there is no intent to follow through with the threat;
4. being disciplined by another child, being bullied by another child, or being deprived of food or beverages;
5. being restrained in high chairs or feeding tables for disciplinary purposes; and
6. having active play time withheld for disciplinary purposes.

D. Time Out.

1. Time out shall not be used for children under age two.
2. A time out shall take place within sight of staff.
3. The length of each time out shall be based on the age of the child and shall not exceed one minute per year of age.

E. The behavior management policy shall establish steps for addressing behaviors identified by the provider as dangerous and/or out of control behaviors. Suspension or expulsion should only be considered as a final action after the implementation of behavior support strategies, including at a minimum:

1. engaging parents by written communication and/or parent conference; and
2. providing a referral to EarlySteps, Child Search, and/or mental health consultant, if appropriate.

AUTHORITY NOTE: Promulgated in accordance with 45 CFR Part 98.43, R.S. 15:587.1, and R.S. 17:407.71.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 51:

Chapter 5. CCAP Household Eligibility

§509. Certification Requirements for Non-Categorically Eligible Households

- A. – A.3.b.v. ...
- vi. Repealed.
 - vii. ...
 - viii. Repealed.
 - ix. – 4. ...

a. Exception. If a household is experiencing homelessness, the household shall have 90 calendar days from the date of its initial determination of eligibility to submit documentation supporting the initial determination of eligibility.

~~EXCEPTION: if a household is experiencing homelessness, the household shall have 90 calendar days from the date of its initial determination of eligibility to submit documentation supporting the initial determination of eligibility.~~

5. – 5.e. ...

i. To become certified as a CCAP household in accordance with this exception, the household must meet all certification requirements in this Section other than the employment and/or training activities required in this Section Paragraph, and must submit all documentation establishing that the head of household is actively seeking employment and/or training.

- ii. – iii. ...

iv. When a CCAP waiting list is in use, actively seeking employment status is only accepted for redetermination cases.

6. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:6 and 17:407.28. and 45 CFR Parts 98 and 99.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 42:43 (January 2016), amended LR 42:2175 (December 2016), LR 44:261 (February 2018), effective March 1, 2018, LR 45:900 (July 2019), LR 46:1373 (October 2020), LR 47:573 (May 2021), LR 48:31 (January 2022), LR 48:1270 (May 2022), LR 51:

§512. Redetermination of Household Certification for Non-Categorically Eligible Households

- A. ...
- B. Repealed.

C. The LDOE will allow a presumptive eligibility period of up to 30 days on redetermination cases, following the recertification anniversary date, which is the deadline for redetermination application.

D. A redetermination application received after the 30 days of the presumptive eligibility period will be considered a new application.

AUTHORITY NOTE: Promulgated in accordance with 45 CFR Parts 98 and 99 and R.S. 17:407.28.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 44:801 (April 2018), LR 51:

§515. Payments Made on Behalf of Households

A. The state maximum daily rates for CCAP care for child care provider types are as follows:

1. Type III Early Learning Center.
 - a. Regular Care—\$31.50;
 - b. Regular Care for Toddlers—\$42.00;
 - c. Regular Care for Infants—\$68.00;
 - d. Special Needs Care Incentive—\$39.69;
 - e. Special Needs Care Incentive for Toddlers—\$52.92; and
 - f. Special Needs Care Incentive for Infants—\$85.68.
2. School Child Care Center.
 - a. Regular Care—\$24.00;
 - b. Regular Care for Toddlers—\$24.00;

- c. Regular Care for Infants—\$24.00;
- d. Special Needs Care Incentive—\$30.24;
- e. Special Needs Care Incentive for Toddlers—\$30.24; and
- f. Special Needs Care Incentive for Infants—\$30.24.

3. Family Child Care Provider.

- a. Regular Care—\$29.00;
- b. Regular Care for Toddlers—\$42.00;
- c. Regular Care for Infants—\$61.00;
- d. Special Needs Care Incentive—\$36.54;
- e. Special Needs Care Incentive for Toddlers—\$52.92; and
- f. Special Needs Care Incentive for Infants—\$76.86.

4. In-Home Provider.

- a. Regular Care—\$25.00;
- b. Regular Care for Toddlers—\$25.25;
- c. Regular Care for Infants—\$26.65;
- d. Special Needs Care Incentive—\$31.50;
- e. Special Needs Care Incentive for Toddlers—\$31.82; and
- f. Special Needs Care Incentive for Infants—\$33.58.

5. Military Child Care Centers.

- a. Regular Care—\$31.50;
- b. Regular Care for Toddlers—\$42.00;
- c. Regular Care for Infants—\$68.00;
- d. Special Needs Care Incentive—\$39.69;
- e. Special Needs Care Incentive for Toddlers—\$52.92; and
- f. Special Needs Care Incentive for Infants—\$85.68.

Child Care Provider Type	Regular Care	Regular Care for Toddlers	Regular Care for Infants	Special Needs Care Incentive	Special Needs Care Incentive for Toddlers	Special Needs Care Incentive for Infants
Type III Early Learning Center	\$31.50	\$42.00	\$68.00	\$39.69	\$52.92	\$85.68
School Child Care Center	\$24.00	\$24.00	\$24.00	\$30.24	\$30.24	\$30.24
Family Child Care Provider	\$29.00	\$42.00	\$61.00	\$36.54	\$52.92	\$76.86
In-Home Provider	\$25.00	\$25.25	\$26.65	\$31.50	\$31.82	\$33.58
Military Child Care Centers	\$31.50	\$42.00	\$68.00	\$39.69	\$52.92	\$85.68

B. – C.3.

...

D. Automated payment for voucher seats will be made prior to provision of child care services. Payment for voucher seats is made to the provider after the child care has been provided.

E. – H.6.

...

AUTHORITY NOTE: Promulgated in accordance with 45 CFR Parts 98 and 99, and R.S. 17:6 and 17:407.28.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 41:2116 (October 2015), amended LR 42:44 (January 2016), LR 42:1870 (November 2016), LR 44:801 (April 2018), LR 45:1745 (December 2019), LR 47:573 (May 2021), LR 48:31 (January 2022), LR 48:1270 (May 2022), LR 50:971 (July 2024), LR 51:

**BOARD OF ELEMENTARY AND SECONDARY EDUCATION
FAMILY IMPACT STATEMENT
(LA R.S. 49:953 and 972)**

Person Preparing

Statement: Ashley Townsend
Phone: 225.342.3446
Division: Governmental, Administrative, and Public Affairs
Part 28:CLXI Bulletin 137 – Louisiana Early Learning Center Licensing Regulations (LAC 28: CLXI.1515, 1721, 1725, 1805, 1806, 1907, 1909, 1917, and 2105) and Part 28:CLXV. Bulletin 139 – Louisiana Child Care and Development Fund Programs (LAC 28:CLXV.103, 305, 309, 311, 313, 319, 323, 325, 509, 512, and 515)
Rule Title: Part 28:CLXI Bulletin 137 – Louisiana Early Learning Center Licensing Regulations (LAC 28: CLXI.1515, 1721, 1725, 1805, 1806, 1907, 1909, 1917, and 2105) and Part 28:CLXV. Bulletin 139 – Louisiana Child Care and Development Fund Programs (LAC 28:CLXV.103, 305, 309, 311, 313, 319, 323, 325, 509, 512, and 515)

In accordance with Section 953 and 974 of Title 49 of the Louisiana Revised Statutes, there is hereby submitted a Family Impact Statement on the rule proposed for adoption, repeal or amendment. All Family Impact Statements shall be kept on file in the State Board Office which has adopted, amended, or repealed a rule in accordance with the applicable provisions of the law relating to public records.

PLEASE RESPOND (YES, NO, OR LACKS SUFFICIENT INFORMATION TO DETERMINE) TO THE FOLLOWING:

1. Will the proposed Rule affect the stability of the family? No
2. Will the proposed Rule affect the authority and rights of parents regarding the education and supervision of their children? No
3. Will the proposed Rule affect the functioning of the family? No
4. Will the proposed Rule affect family earnings and family budget? No
5. Will the proposed Rule affect the behavior and personal responsibility of children? No
6. Is the family or local government able to perform the function as contained in the proposed Rule? Yes

Signature of Contact Person: Ashley Townsend

Date Submitted: 12/12/2024

**POVERTY IMPACT STATEMENT
(LA R.S. 49:973)**

Person

Preparing

Statement: Ashley Townsend
Phone: 225.342.3446
Division: Governmental, Administrative, and Public Affairs
Part 28:CLXI Bulletin 137 – Louisiana Early Learning Center Licensing Regulations (LAC 28: CLXI.1515, 1721, 1725, 1805, 1806, 1907, 1909, 1917, and 2105) and Part 28:CLXV. Bulletin 139 – Louisiana Child Care and Development Fund Programs (LAC 28:CLXV.103, 305, 309, 311, 313, 319, 323, 325, 509, 512, and 515)
Rule Title: Part 28:CLXI Bulletin 137 – Louisiana Early Learning Center Licensing Regulations (LAC 28: CLXI.1515, 1721, 1725, 1805, 1806, 1907, 1909, 1917, and 2105) and Part 28:CLXV. Bulletin 139 – Louisiana Child Care and Development Fund Programs (LAC 28:CLXV.103, 305, 309, 311, 313, 319, 323, 325, 509, 512, and 515)

In accordance with Section 973 of Title 49 of the Louisiana Revised Statutes, there is hereby submitted a Poverty Impact Statement on the rule proposed for adoption, amendment, or repeal. All Poverty Impact Statements shall be in writing and kept on file in the state agency which has adopted, amended, or repealed a rule in accordance with the applicable provisions of the law relating to public records. For the purposes of this Section, the word "poverty" means living at or below one hundred percent of the federal poverty line.

PLEASE RESPOND (YES, NO, OR LACKS SUFFICIENT INFORMATION TO DETERMINE) TO THE FOLLOWING:

1. Will the proposed Rule affect the household income, assets, and financial authority? No
2. Will the proposed Rule affect early childhood development and preschool through postsecondary education development? Yes
3. Will the proposed Rule affect employment and workforce development? No
4. Will the proposed Rule affect taxes and tax credits? No
5. Will the proposed Rule affect child and dependent care, housing, health care, nutrition, transportation, and utilities assistance? Yes

Signature of Contact Person: Ashley Townsend

Date Submitted: 12/12/2024

Small Business Statement

The impact of the proposed Rule on small businesses as defined in the Regulatory Flexibility Act has been considered. It is estimated that the proposed action is not expected to have a significant adverse impact on small businesses. The agency, consistent with health, safety, environmental and economic welfare factors has considered and, where possible, utilized regulatory methods in the drafting of the proposed rule that will accomplish the objectives of applicable statutes while minimizing the adverse impact of the proposed rule on small businesses.

Provider Impact Statement

The proposed Rule should not have any known or foreseeable impact on providers as defined by HCR 170 of 2014 Regular Legislative Session. In particular, there should be no known or foreseeable effect on:

1. the effect on the staffing level requirements or qualifications required to provide the same level of service;
2. the total direct and indirect effect on the cost to the providers to provide the same level of service; or
3. the overall effect on the ability of the provider to provide the same level of service.

Public Comments

Interested persons may submit written comments via the U.S. Mail until noon, February 10, 2025, to Tavares Walker, Executive Director, Board of Elementary and Secondary Education, Box 94064, Capitol Station, Baton Rouge, LA 70804-9064. Written comments may also be hand delivered to Tavares Walker, Executive Director, Board of Elementary and Secondary Education, Suite 5-190, 1201 North Third Street, Baton Rouge, LA 70802 and must be date stamped by the BESE office on the date received. Public comments must be dated and include the original signature of the person submitting the comments.