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February 12, 2014

10:00 AM/300 Northeast

Testimony on Assembly Bill 698/Assembly Committee on Children and Families

Relating to: a child care provider waking a sleeping child under two years of age and granting rule-making authority.

Good afternoon Chairman Krug and Committee members,

Thank you for the opportunity to come and testify today.

The Department of Children and Families has a rule that requires a child care center to allow children to have “undisturbed rest or a nap, when needed.” Unfortunately, this has been enforced to the detriment of some according to a constituent whose child sleeps too often during the day at the child care facility and doesn’t sleep at night. The child care facility told the parents that they’re not allowed to wake the sleeping toddler due to the state regulation.

Assembly Bill (AB) 698 requires DCF to change this standard and permit an exception upon the written request of the parent or guardian of the child.

Currently, written permission from a physician is not included in the rule as an allowable alternative. However the child care center may require the written permission in their own center policies. In addition, child care providers may submit a written request to the department for an exception to a rule requirement which must include justification for the exception and provide a description of how the alternative provision will meet the intent of the requirement. The department may grant the exception if the proposed alternative provision demonstrates to the satisfaction of the department that it would not jeopardize the health, safety or welfare of any child served by the center.

This is a straightforward change to an administrative rule that will help parents like my constituents sleep better at night.



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Governor Scott Walker
Secretary Eloise Anderson

Secretary's Office

Date: February 12, 2014

To: Members of the Assembly Children and Families Committee

From: Sara Buschman, Assistant Deputy Secretary

RE: Department Position on AB 698 – For Information Only

Wisconsin Administrative Codes require licensed child care centers to allow a child under one year of age (infant) or a child between one to two years of age (toddler) to form and follow his or her own sleeping and waking pattern. The rules also require a certified child care provider allow a child to have undisturbed rest or a nap.

Prior to a child's admission at a child care center, the provider is required to obtain written information, including sleep and nap schedules, from the child's parent or guardian to help individualize the care for the child. This information is reviewed and updated periodically with the parent due to the rapid and unique growth and development of children under the age of two.

AB 698 would permit an exception to these rules upon the written request of the parent or guardian of the infant or toddler to alter the baby's sleeping and waking pattern. This would require DCF to modify existing administrative rules under DCF 202 Certification Rules, DCF 250 Licensing Rules for Family Child Care Centers and DCF 251 Licensing Rules for Group Child Care Centers to conform to this provision.

All current Wisconsin and National standards agree that infants and toddlers need to establish and follow their own patterns for sleeping and eating and that child care centers should be responsive to the needs of the child rather than following a schedule set by a caregiver or parent. These standards include: the Wisconsin Model Early Learning Standards; the National Health and Safety Performance Standards *Caring for Our Children*, published by the American Academy of Pediatrics, American Public Health Association and the National Resource Center for Health and Safety in Child Care and Early Education; and the reference book *Developmentally Appropriate Practice in Early Childhood Programs* published by the National Association for the Education of Young Children.

Sleep is the primary activity of the brain during early development. During sleep and wake cycles, the baby's brain develops the internal structures necessary to support synaptic production that leads to higher cognitive and emotional function. Studies have shown that adequate rest is essential to help a child reach his or her potential for growth and development. A child's need for sleep and rest change based on their internal needs. Very young infants will sleep for up to 20 hours per day with the amount of necessary rest gradually reducing as children grow. By the time children reach age two, most have adjusted to one nap per day with 10 -12 hours of sleep per night. However, children who are ill or going through a growth spurt may require additional rest periods. Allowing children to sleep as needed on their own schedule facilitates the child's development rather than following a schedule set by a caregiver or parent.

The Department believes that the current certification and licensing rules protect the health, safety and welfare of children in child care.

February 12, 2014

To: Assembly Committee on Children and Families
Public Hearing on 2013 Assembly Bill 698
State Capitol Room 300 NE

As a practicing pediatrician and a board member of the Wisconsin Early Childhood Association, I am opposed to AB 698.

While on the face of it the bill may seem reasonable, but the fact remains that with young children, the assessment and experience of a child care provider to determine the rest and sleep needs of a child in their charge is key.

This bill essentially takes away the partnership and trust between a parent and child care provider by allowing for a blanket instruction to override the experience and judgment which needs to be applied in any individual situation.

Young children vary greatly, sometimes even from day to day. By this bill, a child care provider who feels that a child may need rest due to a minor illness or other condition would potentially be left in a position where their best judgment would be overridden by written instructions.

Wisconsin Early Childhood Association (WECA) has always supported child care providers attentively listening to and responding appropriately to parental needs and views. We hope that any concerns or guidelines around any aspect of child behavior and care (including sleep) would be part of a flexible and trusting relationship, with going communication between the parent and child care provider, not reduced to legislatively-imposed fiats that run the risk of not serving the best interests of the child.

Thank you for considering my comments.

Dipesh Navsaria, MPH, MSLIS, MD
Pediatrician
Board Member, Wisconsin Early Childhood Association

DCF 251.09 Additional requirements for infant and toddler care.**(1) APPLICABILITY AND GENERAL REQUIREMENTS.**

(a) Group child care centers providing care and supervision to infants and toddlers shall comply with the additional requirements of this section.

(am) Prior to admission, an interview shall be conducted with a child's parent or guardian to obtain written information which will aid child care workers in individualizing the program of care for the child. Information shall include all of the following:

1. Schedule of meals and feeding.
2. Types of food introduced and timetable for new foods.
3. Toileting and diapering procedures.
4. Sleep and nap schedule.
5. The child's way of communicating and being comforted.
6. Developmental and health history.

Note: The licensee may use the department's form, Intake for Child Under 2 Years — Child Care Centers, or the licensee's own form to record information for individualizing the program of care for each child. Information on how to obtain the department's form is available on the department's website, <http://dcf.wisconsin.gov>, or from any regional licensing office in Appendix A.

(b) Admission information for an infant or toddler shall be on file in the room or area to which the child is assigned and shall be known to the child care worker.

(c) Child care workers shall document changes in a child's development and routines every 3 months based on discussion with the parent.

Any documented system used by an infant/toddler program which ensures an exchange of information between child care workers and parents at intervals no greater than 3 months is acceptable.

Special emphasis is given to changes in sleeping/nap patterns, dietary needs, i.e., new foods, cup, utensils or self-feeding skills introduced and introduction of toilet training when age appropriate.

(d) Each infant and toddler shall be cared for by a regularly assigned child care worker in a specific self-contained room or area. Infants and toddlers may not be transferred to the care of another child care worker or another group or room in order to adjust group sizes or staff-to-child ratios, except under one of the following circumstances:

Children turning age 2 may transition into an older age group as long as the new group size does not exceed 8 and the child's second birthday is no more than 2 weeks prior to the transition date. Transition to a new age group needs to be planned and discussed with parents prior to the transition.

1. During the first 2 hours and the last 2 hours of center operation.

When groups of children are combined, older children may be transferred to the infant or toddler room with the appropriate play equipment.

2. When the number of children in a group is one or 2 children to one child care worker.

See DCF 251.05(4) TABLE 251.05-D Maximum Group Size and Minimum Number of Child Care Workers in Group Child Care Centers. For children under 2 years of age, the maximum group size is 8. When the number of children in a group size of 8 is reduced to one or 2 or the number of children who arrive/attend does not exceed one or 2 children, children may be transferred to another group.

When the space in a room will accommodate a maximum of 4 children (1:4), children may be transferred to another group/room when the number of children in care is one or two. The rule refers to 2 children in a potential group size of 8, not 2 children assigned to the second child care worker.

(e) The regularly assigned child care teacher and assistant child care teacher for each group of infants and toddlers shall have a minimum of 10 hours of training in infant and toddler care approved by the department within 6 months after assuming the position. If the training is not part of the required entry-level training under s. DCF 251.05(1)(d) or (e), it shall be obtained through continuing education.

See DCF 251.05(1)(f) Child Care Teacher and DCF 251.05(1)(g) Assistant Child Care Teacher.