

Director’s Decisions Chart Summary

WAC	NRM consensus text	Director’s decision	Rationale
110-300-0005 Definitions			
“Contagious disease”	"Contagious disease" means an illness caused by an infectious agent of public health concern which can be transmitted from one person, animal, or object to another person by direct or indirect means including transmission through an intermediate host or vector, food, water, or air. The Washington state department of health publishes a list of contagious diseases.	"Contagious disease" means an illness caused by an infectious agent of public health concern which can be transmitted from one person, animal, or object to another person by direct or indirect means including transmission through an intermediate host or vector, food, water, or air. The Washington state department of health publishes a list of contagious diseases. Contagious diseases pertinent to this chapter are described in WAC 246-110-010.	The Director’s decision is to revise the definition to bring clarity in the source used for the contagious diseases list. IMPACT: All Stakeholders
“Disinfect”	"Disinfect" means to eliminate virtually all germs from an inanimate surface by the process of cleaning and rinsing, followed by: (a) A chlorine bleach and water solution of one tablespoon of chlorine bleach to one quart of cool water, allowed to stand wet for at least two minutes; or(b) Other disinfectant products registered with the EPA, if used strictly according to the manufacturer's label instructions including, but not limited to, quantity, time the product must be left in place, adequate time to allow the product to dry or rinsing if applicable, and appropriateness for use on the surface to be disinfected. Any	"Disinfect" means to eliminate virtually all germs from an inanimate surface by the process of cleaning and rinsing, followed by: (1) A chlorine bleach and water solution following the manufacturer's instructions ; or (b) Other disinfectant products registered with the EPA, if used strictly according to the manufacturer's label instructions including, but not limited to, quantity, time the product must be left in place, adequate time to allow the product to dry or rinsing if applicable, and appropriateness for use on the surface to be disinfected. Any disinfectant used on food contact surfaces or toys must be	The Director’s decision is to revise the definition so the provider knows to follow the directions on the bottle of bleach (or other chemical) to ensure a safe and effective mixture.

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	disinfectant used on food contact surfaces or toys must be labeled "safe for food contact surfaces."	labeled "safe for food contact surfaces."	IMPACT: All Stakeholders
"Disinfectant"	"Disinfectant" means a chemical liquid used to destroy bacteria.	"Disinfectant" means a chemical or physical process that kills bacteria <u>and viruses.</u>	The Director's decision is to revise the language for a more complete and thorough definition. IMPACT: All Stakeholders
"Food worker card"	"Food worker card" refers to a card issued by the Washington state department of health that permits a trained individual to safely and appropriately handle food served to the public.	"Food worker card" refers to a card issued by the Washington state department of health that permits a trained individual to safely and appropriately handle food served to the public <u>means a food and beverage service worker's permit as required under chapter 69.06 RCW.</u>	The Director's decision is to revise the definition for accuracy since DOH does not issue food worker cards. Food worker cards are issued by a local health jurisdiction. It's important to reference chapter 69.06 in the rule to reduce ambiguity and assure consistency between chapters 173-300 WAC and 246-215 WAC. IMPACT: All Stakeholders
"Private septic system"	"Private septic system" means a septic system that is not connected to a public sewer system maintained by a government agency. A private septic system includes, but it not limited to, the septic system's drain field and tanks.	"Private septic system" means a septic system <u>as defined in chapter 246-272A WAC</u> that is not connected to a public sewer system or a large on-site sewage system <u>as defined in chapter 246-272B WAC.</u> A private septic system includes, but is not limited, the septic system's drain field and tanks.	The Director's decision is to reference chapter 246-272A to reduce ambiguity and confusion between chapters 110-300 WAC and 246-272A. IMPACT: All Stakeholders
"Sanitize"	"Sanitize" means to reduce the number of microorganisms on a surface by the process of:(a) Cleaning and rinsing with	"Sanitize" means to reduce the number of microorganisms on a surface by the process of:(a) Cleaning and rinsing with	The Director's decision is to revise the definition so the provider knows to follow the directions on the bottle of bleach (or other

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	request form, the department will: (b) Close the SSPS provider number;		a notice of closure of inactive status. IMPACT: All Stakeholders
110-300-0016	(11) When a licensee is ready to reopen their program after a temporary closure of 30 days, they must provide to the department written notification of intent to reopen. The department shall conduct a health and safety check of the early learning program within 10 business days of the written notification to reopen. If the early learning program is in compliance with the department’s rules and regulations, the department will: (b) Reactivate the SSPS provider number; and	(11) When a licensee is ready to reopen their program after a temporary closure of 30 days, they must provide to the department written notification of intent to reopen. The department shall conduct a health and safety check of the early learning program within 10 business days of the written notification to reopen. If the early learning program is in compliance with the department’s rules and regulations, the department will: (b); and	The Director’s decision is that DCYF will not close the SSPS provider number when receiving a notice of closure of inactive status. IMPACT: All Stakeholders
110-300-0065	School readiness and family engagement activities. (1) At least once per calendar year, an early learning provider must supply to parents or guardians kindergarten or school readiness materials.	School readiness and family engagement activities. (1) At least once per calendar year, an early learning provider must supply to parents or guardians kindergarten or school readiness materials <u>when developmentally appropriate for enrolled children.</u>	The Director’s decision is to revise the language for clarity on when it is appropriate to disperse kindergarten or school readiness materials. IMPACT: All Stakeholders
110-300-0106	(1) Early learning providers licensed, working, or volunteering in an early learning program before the date this section becomes effective must complete the applicable training requirements of this section within three months of the date this section becomes effective	(1) Early learning providers licensed, working, or volunteering in an early learning program before the date this section becomes effective must complete the applicable training requirements of this section within three months of the date this section becomes effective	The federal CCDF plan, under 45 CFR 98.44(b)(2)(i) requires “ongoing, accessible professional development,” which includes “minimum annual requirement for hours of training and professional development ... that ... maintains and updates health and safety training standards.” The added language here

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	unless otherwise indicated. Early learning providers hired after the date this section becomes effective must complete the training requirements of subsections (4) through (10) of this section within three months of the date of hire and prior to working in an unsupervised capacity with children.	unless otherwise indicated. State or federal rules may require health and safety training described under this chapter to be renewed annually. Early learning providers hired after the date this section becomes effective must complete the training requirements of subsections (4) through (10) of this section within three months of the date of hire and prior to working in an unsupervised capacity with children.	<p>informs the reader that some of the health and safety trainings listed in our rules will likely need to be taken on an annual basis.</p> <p>Additionally, to fully comply with this federal guidance, DCYF needs to identify which health and safety trainings described in WAC 110-300-0106 licensed providers would need to renew annually.</p>
110-300-0130	<p>(4) A Family Home Licensee must provide a signed and dated declaration form annually if the early learning program meets any of the following requirements in unlicensed space:</p> <p>(a) Furnace area safety, or smoke or carbon monoxide detector requirements under WAC 110-300-0170(3);</p> <p>(b) Guns, weapon, or ammunition storage under WAC 110-300-0165(2)(f);</p> <p>(c) Medication storage under WAC 110-300-0215;</p> <p>(d) Refrigerator or freezer under WAC 110-300-0198; or</p> <p>(e) Storage areas that contain chemicals, utility sinks, or wet mops under WAC 110-300-0260.</p> <p>Weight NA</p>	<p>(4) A Family Home Licensee must provide a signed and dated declaration form annually if the early learning program meets any of the following requirements in unlicensed space:</p> <p>(a) Furnace area safety, or smoke or carbon monoxide detector requirements under WAC 110-300-0170(3);</p> <p>(b) Guns, weapon, or ammunition storage under WAC 110-300-0165(2)(f);</p> <p>(c) Medication storage under WAC 110-300-0215;</p> <p>(d) Refrigerator or freezer under WAC 110-300-0198;</p> <p>(e) Storage areas that contain chemicals, utility sinks, or wet mops under WAC 110-300-0260; or</p> <p>(f) Swimming pools under WAC 110-300-0175.</p>	<p>This standard did not have a weight attached. Due to the health and safety concerns of the issues, the Director’s decision is that this subsection needs a weight to be enforceable.</p> <p>Weight Protocol after NRM: It is possible there may be some proposed regulations that do not have an assigned weight due to several factors: 1) focus groups participants voted to remove the regulation from the survey, 2) The regulation was written after the weighting survey was completed, 3) regulations were combined and reorganized through the NRM process and, 4) weights were removed through the NRM process. In the case weights needs to be re-established or assigned there will be several steps taken:</p> <ol style="list-style-type: none"> 1. The regulation will be assessed based

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		<u>Weight #6</u>	<p>on similar regulations within the draft rules and a weight will be assigned based on a combination of survey results and any comments made during the NRM process of similar regulations.</p> <ol style="list-style-type: none"> 2. A weight may be assigned using an average of similar regulations or subsections within that section. 3. When a weight was removed during the NRM process (and the regulation is not a duplication of another regulation) the survey weight will be reassigned. 4. Each regulation assigned a weight though means other than the survey will be accompanied with a justification and flagged for specific focus during validation. <p>The Director's decision is to add swimming pools and the corresponding safety requirements of WAC 110-300-0175 to this list for critical health and safety issues and the protection of children.</p> <p>IMPACT: FH Stakeholders</p>
110-300-0145	(1) An early learning provider must visually inspect outdoor play areas daily to ensure outdoor program space is safe and free of hazards. Weight #6	(1) An early learning provider must visually inspect outdoor <u>program space and equipment</u> daily to ensure outdoor areas and equipment are free of hazards. Weight #6	The Director's decision is to include "program space and equipment" back into this section. NRM struck language in 0146 could impact the ability to ensure that both space AND equipment is safe and free of hazards.

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110-300-0145	(3) An early learning program must have shaded areas in outdoor play space provided by trees, buildings, or shade structures. If there are no shaded areas in outdoor play space, outdoor play must be limited to 20 minutes in weather exceeding 90 degrees Fahrenheit. Weight #1	(3) An early learning program must have shaded areas in outdoor play space provided by trees, buildings, or shade structures Weight #1	The Director removed the second sentence, which was added by the NRM groups. This removes the limitation of outdoor play time for children based on the shade requirements. IMPACT: All Stakeholder groups
110-300-0146	(1) Playground equipment and surfacing used by an early learning provider must comply with applicable CPSC's guidelines at time of installation including, but not limited to, installing, arranging, designing, constructing, and maintaining outdoor play equipment and surfacing:	(1) Playground equipment and surfacing used by an early learning provider must comply with applicable CPSC guidelines, as now or hereafter amended including, but not limited to, installing, arranging, designing, constructing, and maintaining outdoor play equipment and surfacing:	The Director replaced original language. Because of the high risk of health and safety issues concerning equipment and surfaces, "as now or hereafter amended" requires providers to ensure their equipment and surfaces stays up to date (as opposed to building code). IMPACT: All Stakeholder groups
110-300-0160	(2) Upon becoming aware, an early learning provider must intervene appropriately to stop biased behavior displayed by children or adults including, but not limited to: (a) Taking appropriate action when observing biased behavior such as redirecting an inappropriate conversation or inappropriate behavior; (b) Taking actions to be aware of situations that may involve bias and responding appropriately; and (c) Refusing to ignore bias.	(2) An early learning provider must intervene appropriately to stop biased behavior displayed by children or adults including, but not limited to: (a) Redirecting an inappropriate conversation or behavior; (b) Being aware of situations that may involve bias and responding appropriately; and (c) Refusing to ignore bias. Weight #6	The Director's decision is to remove the requested NRM language "Upon becoming aware". This language is not needed as providers can only intervene to stop biased behaviors when they are aware of it. IMPACT: All Stakeholder groups

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	Weight #6		
110-300-0165	(2) An early learning provider must take measures intended to prevent hazards to children including, but not limited to: (f) Ensuring firearms, guns, weapons, and/or ammunition are not in the premises of a center early learning program. Firearms, guns, weapons, and ammunition on the licensed space of a family home early learning program must be stored in a locked gun safe or locked room inaccessible to children. If stored in a locked room, each gun must be stored unloaded and with a trigger lock or other disabling device. The locked room must be inaccessible to children at all times; Weight #8 and	(2) An early learning provider must take measures intended to prevent hazards to children including, but not limited to: (f) Ensuring firearms, guns, weapons, and ammunition are not in the premises of a center early learning program. Firearms, guns, weapons, and ammunition on the premises of a family home early learning program must be stored in a locked gun safe or locked room inaccessible to children. If stored in a locked room, each gun must be stored unloaded and with a trigger lock or other disabling device. The locked room must be inaccessible to children at all times; Weight #8 and	The Director’s decision is to change the “licensed space” phrase to on the “premises”. This broadens the scope of regulated conduct in a family home early learning program. DCYF feels that this rule is imperative given the extremely high health and safety risk posed by guns. IMPACT: FH Stakeholders
110-300-0165	(3) An early learning provider must take measures intended to prevent other hazards to children in care in early learning program space including, but not limited to: (f) Falling objects . Large objects capable of tipping must be securely attached. Large objects include, but are not limited to, televisions, dressers, bookshelves, wall cabinets, sideboards or hutches, and wall units; Weight #6 and	(3) An early learning provider must take measures intended to prevent other hazards to children in care in early learning program space including, but not limited to: (f) Falling objects . Large objects that pose a risk of falling or tipping must be securely anchored . Large objects include, but are not limited to, televisions, dressers, bookshelves, wall cabinets, sideboards or hutches, and wall units; Weight #6 and	While the change is more for clarifying the rule, it is a change away from NRM consensus language. IMPACT: All Stakeholder groups
110-300-0165	(3) An early learning provider must take measures intended to prevent other hazards to children in care in early	(3) An early learning provider must take measures intended to prevent other hazards to children in care in early	While the change adds examples of what is meant when equipment is in “poor condition,” it is a change away from NRM consensus

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	learning program space including, but not limited to: (g) Equipment in poor condition. Equipment in poor condition must be repaired, removed, or made inaccessible to children. Weight #4	learning program space including, but not limited to: (g) Equipment in poor condition. Equipment in poor condition <u>(loose parts, rusty parts, flaking paint, or other dangers)</u> must be repaired, removed, or made inaccessible to children. Weight #4	language. IMPACT: All Stakeholder groups
110-300-0165	(4) To ensure a safe environment for children in care, an early learning provider must comply with the following requirements: (a) Indoor temperatures for the premises. (i) The indoor temperature for the early learning licensed space must not be less than 65 degrees Fahrenheit or greater than 82 degrees Fahrenheit; and (ii) Fans, air conditioner or cross ventilation must be used in licensed space when the indoor temperature exceeds 82 degrees Fahrenheit. Fans and air conditioners must be inaccessible to children. Weight #4	(4) To ensure a safe environment for children in care, an early learning provider must comply with the following requirements: (a) The temperature of indoor early learning licensed space should be between 68 and 82 degrees Fahrenheit. <u>If indoor licensed space if colder than 68 or hotter than 82 degrees Fahrenheit, an early learning provider must use climate control devices that are inaccessible to children to attempt to bring the temperature within the desired range.</u> Weight #4	While the change is more for clarifying the rule, it is a change away from NRM consensus language. The minimum low temperature of 68 F is consistent with the State Building Code and also aligns with <i>CFOC 5.2.1.2</i> standards. IMPACT: All Stakeholder groups
110-300-0165	(4)(g) Platforms and decks. All platforms and decks used for child care activities must, within six months of when this section takes effect, meet local building codes pursuant to RCW 43.216.340.	(4)(g) Platforms and decks. All platforms and decks used for child care activities must, within six months of when this section takes effect, meet local building codes pursuant to RCW 43.216.340.	The Director’s decision is to remove the language of “within six months of when the section takes effect” because the intent of the rules is to require any built structure (e.g. stairways, decks, or platforms) to be comply with the state and local building code <i>at that time</i> . Further, if a provider makes a substantial change to these structures, that provider is

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			<p>required to comply with the current state or local building code.</p> <p>IMPACT: All Stakeholder groups</p>
110-300-0166	<p>(3) To ensure a safe exit from the premises during an emergency, the early learning provider must comply with the following requirements:</p> <p>(a) Emergency exit doors must remain unlocked from the inside, but may be locked from the outside while the early learning program is open. The door handle must be of the type that can be opened from the inside without the use of a key, tools, or special knowledge, and must automatically unlock when the knob or handle is turned;</p> <p>(b) Exit doors that are not designated as an emergency exit door may be locked during operating hours. Locking interior doors in early learning program space must be designed to be unlocked from either side. An unlocking device must be readily available; and</p> <p>(c) Family home early learning programs must have at least one pivoting or side-hinged swinging exit door. Other exit doors may be sliding glass doors.</p> <p style="color: red;">Weight #7</p>	<p>(3) To ensure a safe exit from the premises during an emergency, the early learning provider must comply with the following requirements:</p> <p>(a) Emergency exit doors must remain unlocked from the inside, but may be locked from the outside while the early learning program is open. The door handle must be of the type that can be opened from the inside without the use of a key, tools, or special knowledge, and must automatically unlock when the knob or handle is turned;</p> <p>(b) Exit doors that are not designated as an emergency exit door may be locked during operating hours. Locking interior doors in early learning program space must be designed to be unlocked from either side. An unlocking device must be readily available; and</p> <p>(c) Family home early learning programs must have at least one pivoting or side-hinged swinging exit door. Other exit doors may be sliding glass doors.</p> <p style="color: red;"><u>(d) Exit doors must not be partially or entirely blocked.</u></p> <p style="color: red;">Weight #7</p>	<p>The Director’s decision is to include this change which adds an additional requirement to clearly indicate that exit doors must not be blocked in any way.</p> <p>IMPACT: All Stakeholder groups</p>

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110-300-0170	Fire safety. (3)(e) Portable heaters and generators. Portable heaters or fuel powered generators must not be used inside early learning program space during operating hours. (i) In case of an emergency, a generator may be used but must be placed at least fifteen feet from buildings, windows, doors, ventilation intakes, or other places where exhaust fumes may be vented into the premises or early learning space; ...	Fire safety. (3)(e) Portable heaters and generators. Portable heaters or fuel powered generators must not be used inside early learning program space during operating hours. (i) In case of an emergency, a generator may be used but must be placed at least fifteen twenty feet from buildings, windows, doors, ventilation intakes, or other places where exhaust fumes may be vented into the premises or early learning space; ...	The Director’s decision is to increase the distance for placement of generators. Generators should be at least 20 feet away from buildings. Even at 20 feet away, air flow patterns could still blow carbon monoxide into homes through attic vents, windows, or doors, so it's very important to have a working carbon monoxide detector inside the home.
110-300-0175	(1) The following bodies of water must be inaccessible to children in care by using a physical barrier with a locking mechanism: (2) An early learning provider must comply with the following requirements when using a swimming pool as part of the early learning program: ...(d) Swimming pools must be cleaned and sanitized according to manufacturer instructions, and department of health or local health jurisdiction guidelines; ...	(1) The following bodies of water must be inaccessible to children in care by using a physical barrier with a locking mechanism <u>in compliance with WAC 246-260-031(4):</u> (2) An early learning provider must comply with the following requirements when using a swimming pool as part of the early learning program: ...(d) Swimming pools must be cleaned and sanitized according to manufacturer instructions, <u>chapter 246-260 WAC</u> , and department of health or local health jurisdiction guidelines; ...	The Director’s decision is to add in the citation of Chapter 246-260 WAC since it is the statewide standard for water recreation facilities. It also describes and depicts strategies to keep children out of swimming pools.
110-300-0175	(3) Portable wading pools must be inaccessible to enrolled children when not in use. “Wading pool” means a pool that has a water depth of less than two feet (24 inches). A portable wading pool	(3) Filtered wading pools must be inaccessible to children when not in use. Wading pools that do not have a filtering system are not permitted in the early learning program. Weight #7	The Director’s decision is to maintain the original language of “unfiltered” wading pools. This change prohibits wading pools unless they are filtered. “Wading pool” definition has been moved into the Definition section 110-300-

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	is one that is formed of molded plastic or inflatable parts, and can be removed after use. Weight #7		0005. IMPACT: All Stakeholder groups
110-300-0180	(2) An early learning provider must offer dental health education to all children. (a) Providers must also offer support for one scheduled daily opportunity for developmentally appropriate tooth-brushing activities that are safe, sanitary, and educational with parent permission (not all children must receive this opportunity); (b) For overnight care, the early learning provider must offer the opportunity before bed; (c) Parents may opt-out of tooth-brushing activities for their children with a signed form that is specific to their child, ensuring they are aware of the ADA guidance for twice daily tooth-brushing; and (d) For children whose parents opt-in to tooth-brushing support, toothbrushes must be stored in a manner that prevents cross contamination. Weight #1	(2) At least once per day , an early learning provider must offer children the opportunity for developmentally appropriate tooth brushing activities. (a) Tooth brushing activities must be safe, sanitary, and educational. (b) Toothbrushes used in an early learning program must be stored in a manner that prevents cross contamination. (c) The parent or guardian of a child may opt out of the daily tooth brushing activities by signing a written form. Weight #1	The Director’s decision is to accept the revision from NRM language for clarity. This revision reduces the amount of text and clarifies that providers must offer children the daily opportunity to brush their teeth
110-300-0185	To ensure proper nutrition of children in care, an early learning provider must comply with the child nutrition requirements described in this section. (1) Meals, snack foods, and beverages	To ensure proper nutrition of children in care, an early learning provider must comply with the child nutrition requirements described in this section. (1) Meals, snack foods, and beverages	This language change more accurately reflects what rules providers must comply with—CACFP standards. The “standards” refer to the rules themselves, whereas the “guidebooks” are resources for different communities used

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	provided to children in care must comply with the requirements contained in the most current edition of the USDA Child and Adult Care Food Program (CACFP) Handbook, or the USDA National School Lunch and School Breakfast Program standards.	provided to children in care must comply with the requirements contained in the most current edition of the USDA Child and Adult Care Food Program (CACFP) <u>standards</u> , or the USDA National School Lunch and School Breakfast Program standards.	to provide further <i>guidance on</i> the standards. While DCYF can use these resources to train providers on the CACFP standards, these resources are not the body of law that providers should be required to comply with.
110-300-0190	(4) On special occasions, such as birthdays, an early learning provider may allow parents or guardians to bring in snacks that may not satisfy the nutritional requirements for all children. The snacks provided must be limited to: (a) Store purchased fruits and vegetables (uncut); (b) Foods prepackaged in the original manufacturer containers; or (c) Snacks prepared, cooked, or baked at home by parent of guardian of a child in care (family home providers only). Prior to serving, an family home provider must receive written permission from each child’s parent or guardian stating their child may consume food prepared, cooked, or baked by another child’s parent or guardian. Weight #4	(4) On special occasions, such as birthdays, an early learning provider may allow parents or guardians to bring in snacks that may not satisfy the nutritional requirements for all children. The snacks provided must be limited to: (a) Store purchased fruits and vegetables (uncut); (b) Foods prepackaged in the original manufacturer containers; or (c) Snacks prepared, cooked, or baked at home by parent of guardian of a child in care (family home providers only). Prior to serving, an <u>family home early learning</u> provider must receive written permission from each child’s parent or guardian stating their child may consume food prepared, cooked, or baked by another child’s parent or guardian. Weight #4	The Director’s decision is to allow center early learning programs special event permission also in (4)(c) after consultation with the department of health. Classroom food sharing events are private events as defined in WAC 246-215 (the food safety rule).
110-300-0195	(2) Snacks and meals must be prepared and served by an early learning provider who possesses a valid and current food worker card pursuant to WAC 110-300-	(2) Snacks and meals must be prepared and served by an early learning provider who possesses a valid and current food worker card pursuant to WAC 110-300-	The Director’s decision is to revise the language to provide clarity in the intent of the rule.

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	0106(13), unless the food is provided pursuant to WAC 110-0196(3).	0106(13), unless the food is provided pursuant to WAC 170-300-0196(3).	
110-300-0196	(1) Food prepared and served from an early learning program must not be known to be tampered with or spoiled. Weight #8	(1) Food prepared and served from an early learning program must not be tampered with or spoiled. Weight #8	The Director’s decision was to remove the word “known” from this language. While the change is more for clarifying the rule, it is a change away from NRM consensus language. IMPACT: All Stakeholder groups
110-300-0196	(3) Food not prepared on-site by an early learning provider, pursuant to WAC 170-300-0195(2), must be provided by: (a) A licensed food service establishment, kitchen, or catering business that meets department of health food service requirements (chapter 246-215 WAC, as now and hereafter amended) and is regularly inspected by a local health jurisdiction;	(3) Food not prepared on-site by an early learning provider, pursuant to WAC 170-300-0195(2), must be provided by:(a) A licensed food service establishment, kitchen, or catering business that meets department of health food service requirements under chapter 246-215 WAC, as now and hereafter amended and is regularly inspected by a local health jurisdiction;	The Director’s decision is to revise the language for clarity and also change “food service establishment” term to be consistent with “food establishment” in WAC 246-215. IMPACT: All Stakeholder groups
110-300-0198	This is new language and was not included in the NRM process.	(3) An early learning provider must: (a) Have at least eight feet between the food preparation area and any diaper changing tables or counters and sinks used for diaper changing;	The Director’s decision is to include this new language in subsection 110-300-0198(3)(a) to ensure that there is no cross contamination around food preparation areas. This language is also found in 110-300-0280 (2) A bottle preparation area must: (a) Include a sink; and (b) Be located at least eight feet from any diaper changing tables or counters and sinks used for diaper changing; or

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			IMPACT: All Stakeholders
110-300-0200	<p>(1) Early learning program staff, including volunteers, must comply with the following handwashing procedures or those defined by the United States Center for Disease Control and Prevention, and children should strongly be encouraged to.</p> <p>(a) Wet hands with warm water; (b) Apply soap to the hands; (c) Rub hands together to wash for at least 20 seconds; (d) Thoroughly rinse hands with water; (e) Dry hands with a paper towel, single-use cloth towel, or air hand dryer; (f) Turn water faucet off with using a paper towel or single use cloth towel unless it turns off automatically; and (g) Properly discard paper single-use cloth towels after each use.</p> <p style="color: red;">Weight NA</p>	<p>(1) Early learning program staff, including volunteers, must comply with the following handwashing procedures or those defined by the United States Center for Disease Control and Prevention, and children should strongly be encouraged to.</p> <p>(a) Wet hands with warm water; (b) Apply soap to the hands; (c) Rub hands together to wash for at least 20 seconds; (d) Thoroughly rinse hands with water; (e) Dry hands with a paper towel, single-use cloth towel, or air hand dryer; (f) Turn water faucet off with using a paper towel or single use cloth towel unless it turns off automatically; and (g) Properly discard paper single-use cloth towels after each use.</p> <p style="color: red;">Weight #6</p>	<p>The health and safety implications of 0200(1) demand that the proper steps be weighted for enforcement.</p> <p>The Director’s decision is to weight subsection (1) because this subsection lists <i>the steps for proper handwashing</i>. DCYF also recommend adding the weights back in to subsections (4) and (5) as these list important times <i>when</i> washing hands would reduce or eliminate the spread of harmful germs or bacteria.</p> <p>Additionally, the DOH specifically details hand washing protocols and DCYF believes these are critical to keep both early learning program staff and children safe.</p> <p>IMPACT: All Stakeholder groups</p>
110-300-0200	<p>(4) Early learning program staff must wash their hands following handwashing procedures listed above:</p> <p>(a) When arriving at work; (b) After toileting a child; (c) Before, during, and after diapering a child (use a wet wipe in place of handwashing during the middle of diapering only) and must wash hands after diapering is complete;</p>	<p>(4) Early learning program staff must wash their hands following handwashing procedures listed above:</p> <p>(a) When arriving at work; (b) After toileting a child; (c) Before, and after diapering a child (use a wet wipe in place of handwashing during the middle of diapering (if needed)); (d) After personal toileting;</p>	<p>Requiring hand washing in the middle of diapering is untenable for providers and ultimately defeats its own purpose.</p> <p>The Director’s decision is to modify language in (4)(c) as shown and weight subsection (4) because this subsection lists important times <i>when</i> washing hands would reduce or eliminate the spread of harmful germs or bacteria.</p>

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WAC	NRM consensus text	Director’s decision	Rationale
	(g) After touching body fluids such as blood or after nose blowing or sneezing; (h) Before and after eating or participating in food activities including table setting; and (i) As needed or required by the circumstances. Weight N/A	(g) After touching body fluids such as blood or after nose blowing or sneezing; (h) Before and after eating or participating in food activities including table setting; and (i) As needed or required by the circumstances. Weight #7	critical to keep both early learning program staff and children safe. IMPACT: All Stakeholder groups
110-300-0205	(5) Unless covered by an individual care plan or protected by the ADA, an ill child, staff member, or other individual must be sent home or isolated from children in care if he or she has: (a) A fever 101 degrees Fahrenheit for children over 2 months (or 100.4 degrees F for an infant younger than 2 months) by any method, and behavior change or other signs and symptoms of illness (including sore throat, earache, headache, rash, vomiting, diarrhea); (b) Vomiting 2 or more times in the previous 24 hours; (c) Diarrhea where stool frequency exceeds 2 stools above normal per 24 hours for that child or whose stool contains more than a drop of blood or mucus; (d) A rash not associated with heat, diapering, or an allergic reaction; (e) Open sores or wounds discharging bodily fluids that cannot be adequately covered with a waterproof dressing or	(5) Unless covered by an individual care plan or protected by the ADA, an ill child, staff member, or other individual must be sent home or isolated from children in care if he or she has: (a) A fever 101 degrees Fahrenheit for children over 2 months (or 100.4 degrees F for an infant younger than 2 months) by any method, and behavior change or other signs and symptoms of illness (including sore throat, earache, headache, rash, vomiting, diarrhea); (b) Vomiting 2 or more times in the previous 24 hours; (c) Diarrhea where stool frequency exceeds 2 stools above normal per 24 hours for that child or whose stool contains more than a drop of blood or mucus; (d) A rash not associated with heat, diapering, or an allergic reaction; (e) Open sores or wounds discharging bodily fluids that cannot be adequately covered with a waterproof dressing or	The Director’s decision is to weight this rule. The original weight was #7. Not excluding staff or children when they are ill would have health repercussions for other staff and children in the early learning program. This standard is similar to current rules under 170-296A-3210 and 170-295-3030.

Director’s Decisions Chart Summary

WAC	NRM consensus text	Director’s decision	Rationale
	<p>mouth sores with drooling; (f) Lice, ringworm, or scabies. Individuals with head lice, ringworm, or scabies must be excluded from the child care premises beginning from the end of the day the head lice or scabies was discovered. The provider may allow an individual with head lice or scabies to return to the premises after receiving the first treatment; or (g) A child who appears severely ill, which may include lethargy, persistent crying, difficulty breathing, or a significant change in behavior or activity level indicative of illness.</p> <p style="color: red;">Weight # NA</p>	<p>mouth sores with drooling; (f) Lice, ringworm, or scabies. Individuals with head lice, ringworm, or scabies must be excluded from the child care premises beginning from the end of the day the head lice or scabies was discovered. The provider may allow an individual with head lice or scabies to return to the premises after receiving the first treatment; or (g) A child who appears severely ill, which may include lethargy, persistent crying, difficulty breathing, or a significant change in behavior or activity level indicative of illness.</p> <p style="color: red;">Weight #7</p>	<p>IMPACT: All Stakeholder groups</p>
110-300-0205	<p>(8) An early learning provider may readmit a child into care or a staff member, volunteer, or household member into the early learning program area with either: (a) Notification from Public Health to the early learning provider stating the individual may safely return after being diagnosed with a Notifiable Condition listed on the current DOH Notifiable Conditions List which required contact prophylaxis and/or follow-up stool testing, or (b) Written notification from a health care provider stating the individual may</p>	<p>(8) An early learning provider may readmit a child into care or household member into the early learning program area with written permission of a health care provider stating the individual may safely return after being diagnosed with a contagious disease listed in WAC 246-110-010(3). Weight #5</p>	<p>The Director’s decision is to modify section 0205(8) as it was mistakenly negotiated and reached consensus with the understanding that the rules were addressing “conditions” on the DOH Notifiable Conditions List (WAC 246-101-101). This is a mistake because the rule should address contagious diseases (WAC 246-110-010(3)), rather than notifiable conditions. “Notifiable conditions” means a disease or condition of public health importance, a case of which, and for certain diseases, a suspected case of which, must be brought to the attention of the local health officer or the state health officer. WAC 246-101-010(31). Accordingly, only health care providers are</p>

Director's Decisions Chart Summary			
WAC	NRM consensus text	Director's decision	Rationale
	safely return for all other DOH Notifiable Conditions. Weight #5		required to track/notify local or state health officers concerning notifiable conditions. Early learning programs have no duties relating to notifiable conditions—requiring providers to be informed of such conditions among their staff would be an enormous invasion of privacy. Thus, the WAC chapter regulating early learning programs should only address contagious diseases and the section below should be revised as shown. IMPACT: All Stakeholder groups
110-300-0210	(3) To accept a child who is not current with their immunizations, an early learning provider must give written notice to that child's parent or guardian stating the child may be accepted if the immunizations are completed as soon as possible:	(3) To accept a child who is not current with their immunizations, an early learning provider must give written notice to that child's parent or guardian stating the child may be accepted if the immunizations are completed as soon as possible consistent with chapter 246-105 WAC and: ...	The Director's decision is to add language to align with WAC 246-105 so that immunization schedules have "satisfactory progress".
110-300-0210	(6) An early learning provider may exclude a child from care according to the criteria listed in WAC 246-105-080.	(6) An early learning provider may shall exclude a child from care according to the criteria listed in WAC 246-105-080.	The Director's decision is to change "may" to "shall" to be consistent with WAC 246-105-080.
110-300-0215	Missing rule prohibiting homemade medication	Add rule back into WAC: 110-300-0215 Medication (3)(e) An early learning provider must not accept or give to a child homemade medication, such as diaper cream or sunscreen. Weight #6	The Director's decision is that DCYF will include language to prohibit homemade medication—"non-medical items" like diaper cream or sunscreen. This language was in the original draft for NRM but was inadvertently removed through the process. IMPACT: All Stakeholder groups

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WAC	NRM consensus text	Director’s decision	Rationale
110-300-0215	<p>(3) Medication Administration. An early learning provider must not give medication to any child without written and signed consent from that child’s parent or guardian, must administer medication pursuant to directions on the medication label, and using appropriate cleaned and sanitized medication measuring devices.</p> <p>(a) An early learning provider must administer medication to children in care as follows:</p> <p>(i) Prescription Medication. Prescription medication must only be given to the child named on the prescription. Prescription medication must be prescribed by a health care professional with prescriptive authority for a specific child. Prescription medication must be labeled with:</p> <p>(A) A child’s first and last name;</p> <p>(B) The date the prescription was filled;</p> <p>(C) The name and contact information of the prescribing health professional;</p> <p>(D) The expiration date, dosage amount, and length of time to give the medication; and</p> <p>(E) Instructions for the administration, storage and accompanied with medication authorization form that has the medical need and the possible side</p>	<p>(3) Medication Administration. An early learning provider must not give medication to any child without written and signed consent from that child’s parent or guardian, must administer medication pursuant to directions on the medication label, and using appropriate cleaned and sanitized medication measuring devices.</p> <p>(a) An early learning provider must administer medication to children in care as follows:</p> <p>(i) Prescription Medication. Prescription medication must only be given to the child named on the prescription. Prescription medication must be prescribed by a health care professional with prescriptive authority for a specific child. <u>Prescription medication must be accompanied by a medication authorization form that has the medical need and the possible side effects of the medication.</u> Prescription medication must be labeled with:</p> <p>(A) A child’s first and last name;</p> <p>(B) The date the prescription was filled;</p> <p>(C) The name and contact information of the prescribing health professional;</p> <p>(D) The expiration date, dosage amount, and length of time to give the medication; and</p>	<p>The requirements of this section are more clear and understandable if the language in 0215(3)(a)(i)(E) was moved up to 0215(3)(a)(i).</p>

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WAC	NRM consensus text	Director’s decision	Rationale
	effects of the medication.	(E) Instructions for administration <u>and</u> storage.	
110-300-0220	(1) An early learning provider must provide at least one indoor bathroom in the licensed space that has the following: (a) One working flush toilet; (ii) Center early learning programs must have one working flush toilet for every 15 children and staff. A child in diapers does not count for purposes of toilet calculations until the child begins toilet training.	(1) An early learning provider must provide at least one indoor bathroom in the licensed space that has the following: (a) One working flush toilet; (ii) Center early learning programs <u>licensed after the date this chapter becomes effective</u> must have one working flush toilet for every 15 children and staff. A child in diapers does not count for purposes of toilet calculations until the child begins toilet training.	The Director’s decision is to add language in 110-300-0220 to “grandfather in” center programs that were licensed before the date this chapter becomes effective. This would allow programs licensed prior to August 2019 to be exempt from the requirement to have one flush toilet for every 15 children and staff. IMPACT: Center Stakeholder groups
110-300-0220	(2) If an early learning program space is equipped with a bathtub or shower, the provider must: (b) Only use the bath or shower: (ii) During non-standard hours;	(2) If an early learning program space is equipped with a bathtub or shower, the provider must: (b) Only use the bath or shower: (ii) During <u>overnight care hours</u> ;	DCYF simplified this rule by simply stating that a provider must only give an enrolled child a bath or shower during overnight care rather than during “non-standard hours,” which is undefined.
110-300-0235	(4) An early learning provider must immediately notify the department when the water connection to an early learning program space is interrupted for more than one hour, or the water source becomes contaminated:	(5) An early learning provider must notify the department <u>within two to four hours</u> of when the water connection to an early learning program space is interrupted for more than one hour, or the water source becomes contaminated:	The Director’s decision is to change the DCYF notification process from “immediately” to a 2-4 hour timeframe. IMPACT: All Stakeholder groups
110-300-0241	(1) An early learning provider must develop and follow a cleaning schedule that includes: (e) Refrigerators and freezers, which must be cleaned and sanitized monthly or more often as needed;	(1) An early learning provider must develop and follow a cleaning schedule that includes: (a) Food preparation areas, tables and chairs, high chairs, and food service counters, which must be cleaned and	This language eases the requirements on licensed providers by creating a more lenient timeline for cleaning freezers than refrigerators. This change does not impact the health and safety of licensed child care but eases the workload on licensed providers.

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WAC	NRM consensus text	Director’s decision	Rationale
		<p>sanitized before and after each meal and snack with single use paper towels or one-time use wiping cloths;</p> <p>(b) Eating utensils, bottles, drinking equipment, and dishes, which must be cleaned and sanitized after each use;</p> <p>(c) Pacifiers, which:</p> <p>(i) Must be cleaned and sanitized after each use by washing and boiling the pacifier or washing the pacifier in the dishwasher; or</p> <p>(ii) May be reused by an individual child if they have been rinsed after each use and stored in a device or container that prevents contamination. Both the pacifier and the storage device or container must be cleaned and sanitized daily;</p> <p>(d) Appliances used to prepare food, which must be cleaned after each use and sanitized daily or more often as needed;</p> <p>(e) Refrigerators , which must be cleaned and sanitized monthly or more often as needed;</p> <p><u>(f) Freezers, which must be cleaned and sanitized quarterly or more often as needed;</u></p> <p>(g) Toys, which must be cleaned and sanitized as follows:</p> <p>(i) Infant and toddler toys must be cleaned and sanitized at least daily or</p>	

Director’s Decisions Chart Summary

WAC	NRM consensus text	Director’s decision	Rationale
		more often as needed; (ii) All other toys must be cleaned and sanitized weekly or more often as needed; and (iii) When a toy comes into contact with a child’s mouth or bodily fluids it must be removed from use until it can be cleaned and sanitized prior to reuse; and (h) Furniture and equipment, which must be cleaned monthly or more often as needed. Weight #6	
110-300-0270	(5) An early learning provider who sleeps while children are in overnight care must: (a) Have written permission and documentation that parents are aware that the provider is sleeping while their children are in care and have read the facilities policies and procedures for overnight care; (b) Stay awake until all children are asleep or returning to sleep (c) Remain on the same floor level as sleeping children at all times; (d) Sleep in the same room with infants and toddlers; (e) Be physically available and responsive, available to immediately respond to a child’s needs; (f) Have alarms to alert them if a child should leave the room;	(5) An early learning provider who sleeps while children are in overnight care must: (a) Have written permission and documentation that parents are aware that the provider is sleeping while their children are in care and have read the facilities policies and procedures for overnight care; Weight #6 (b) Stay awake until all children are asleep or returning to sleep Weight #7 (c) Remain on the same floor level as sleeping children at all times; Weight #7 (d) Sleep in the same room with infants and toddlers; Weight #8 (e) Be physically available and responsive, available to immediately respond to a child’s needs; Weight #7 (f) Have alarms to alert them if a child should leave the room; Weight #7	This is new NRM language that came to consensus but the weights were not discussed. The Director has assigned the weight based on the weighting protocol (see page 2 rationale section)

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WAC	NRM consensus text	Director's decision	Rationale
	<p>(g) Have monitoring devices to assist in hearing and visibly checking on children in each room used for sleeping; and (h) Be awake for the arrival and departure of each child in overnight care.</p> <p>(6) An early learning provider who accepts infants for overnight care must comply with all safe sleep rules (WAC 110-300-0291) for at least the first 15 nights a new infant is enrolled in that program. A provider may sleep while the infant sleeps during overnight care if: (a) The provider continues to comply with WAC 110-300-0291(1)(c), (f), (g), (h), and (i) and 0291(2); (b) Once that provider has become familiar with the sleep routines and patterns of that infant; and (c) The provider has observed no apparent health or safety risks while the infant sleeps.</p>	<p>(g) Have monitoring devices to assist in hearing and visibly checking on children in each room used for sleeping; Weight # 7 and (h) Be awake for the arrival and departure of each child in overnight care. Weight # 7</p> <p>(6) An early learning provider who accepts infants for overnight care must comply with all safe sleep rules (WAC 110-300-0291) for at least the first 15 nights a new infant is enrolled in that program. A provider may sleep while the infant sleeps during overnight care if: (a) The provider continues to comply with WAC 110-300-0291(1)(c), (f), (g), (h), and (i) and 0291(2); (b) Once that provider has become familiar with the sleep routines and patterns of that infant; and (c) The provider has observed no apparent health or safety risks while the infant sleeps. Weight #6</p>	<p>IMPACT: All Stakeholder groups</p>
110-300-0275	<p>(4) A center early learning program licensed to care for four or more infants must employ or contract with an infant nurse consultant. An infant nurse consultant's duties depend upon the needs of the center early learning program. A center early learning provider</p>	<p>(4) A center early learning provider licensed to care for any infant shall employ or contract with a child care health consultant to provide health consultation to support the practices of staff working with infants and to support the needs of individual infants. Weight #5</p>	<p>The Director's decision is to return to the original intent of this rule due to the health and safety needs for this most vulnerable population. Noted here that the requirement for a nurse consultant is for any infant in care, regardless of infant capacity.</p>

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WAC	NRM consensus text	Director’s decision	Rationale
	<p>and infant nurse consultant may identify the physical and emotional needs of infants through observations and assessments. Weight #5</p> <p>(5) Employment or contract work between a center early learning program and an infant nurse consultant must include:</p> <p>(a) A written agreement with an infant nurse consultant currently licensed as a registered nurse (RN) who has worked in pediatrics (care of children) or public health within the past year, or has taken or taught classes in pediatric nursing at the college level within the past five years;</p> <p>(b) At least one on-site visit from the nurse consultant monthly, if infants are enrolled;</p> <p>(c) A nurse or designee that meets the requirements of a nurse consultant available by phone as needed; and</p> <p>(d) The nurse consultant’s written notes from the on-site visit, which must include topics discussed, areas of concern, date, and signatures of the consultant and a representative from the early learning program. Weight #5</p>	<p>(5)The provider shall enter into a department approved written agreement for services with a child care health consultant.</p> <p>(a) The child care health consultant must be a currently licensed registered nurse who:</p> <ul style="list-style-type: none"> (i) Has worked in pediatrics or public health in the past five years or has taken or taught classes in pediatric nursing at the college level in the past five years; (ii) Has experience with state licensing and public health requirements; and (iii) Attests in writing to knowledge and experience sufficient to provide service consistent with the health consultant competencies described in the most current version of <i>Caring for Our Children</i>. <p>(b) The child care health consultant must be available, or make available a designee who meets the requirements of (2)(a), for consultation by phone as needed.</p> <p>(6) The provider shall ensure that the child care health consultant:</p> <p>(a) Conducts at least one on-site visit monthly, if an infant is enrolled, during which the consultant;</p>	<p>This is a current center rule under 170-295-4130 when caring for four infants.</p>

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WAC	NRM consensus text	Director’s decision	Rationale
		<p>(i) Observes and assesses staff knowledge of infant health, development, and safety and offers support through training, consultation, or referral;</p> <p>(ii) Observes and assesses classroom health practices, including but not limited to, infection control including cleaning, sanitizing, and disinfecting, and provides technical assistance to correct any practices of concern;</p> <p>(iii) Observes and assesses behavior, development, and health status of individual infants in care and make recommendations to staff or parents or guardians including if further assessment is recommended, as requested or otherwise determined appropriate.</p> <p>(b) Provides a dated, signed, written summary to the early learning provider for each visit that includes topics discussed with parents or staff, any areas of concern related to discussion, observation, assessment, or screening outcomes; and</p> <p>(c) Reports each visit to the department.</p> <p style="text-align: center;">Weight #6</p> <p>(7) The early learning provider must keep on-site a copy of the child care health consultant’s written reports along with</p>	

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WAC	NRM consensus text	Director’s decision	Rationale
		<p>any notes, recommended follow up, and any actions taken to address concerns identified. Weight #4</p> <p>(8) If a center early learning provider is unable to independently employ or contract with a child care health consultant within 30 calendar days of enrolling an infant, the provider shall contact the department for assistance. The department shall assist the provider obtain the services of a child care health consultant or may grant a waiver until the services can be secured. Weight NA</p>	<p>IMPACT: Center Stakeholders</p>
110-300-0290	<p>(3) Sleep equipment not covered in WAC 110-300-0265 must:</p> <p>(a) Be approved by CPSC or ASTM International safety standards for use by infants and toddlers; Weight #7</p> <p>(i) Cribs must have a certificate of compliance, sticker, or documentation from the manufacturer or importer stating the crib meets 16 Code of Federal Regulations (C.F.R.) 1219 and 1220; Weight #3</p> <p>(b) Have a clean, firm, and snug-fitting mattress designed specifically for the particular equipment; Weight #7</p> <p>(c) Have a tight-fitted sheet that is designed for the sleep equipment.</p>	<p>(3) Sleep equipment not covered in WAC 110-300-0265 must:</p> <p>(a) Be approved by CPSC or ASTM International safety standards for use by infants and toddlers; Weight #7</p> <p>(b) Cribs must have a certificate of compliance, sticker, or documentation from the manufacturer or importer stating the crib meets 16 Code of Federal Regulations (C.F.R.) 1219 and 1220; Weight #7</p> <p>(c) Have a clean, firm, and snug-fitting mattress designed specifically for the particular equipment; Weight #7</p> <p>(d) Have a tight-fitted sheet that is designed for the sleep equipment.</p>	<p>The Director’s decision is that the rule requiring cribs to meet 16 CFR 1219 and 1220 should be weight #7 along with 0290(3)(a), (b), and (c)—not weight #3</p> <p>IMPACT: All Stakeholder groups</p>

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WAC	NRM consensus text	Director's decision	Rationale
	Weight #7	Weight #7	
110-0300-0315	(2)An early learning provider <u>may</u> be aware of and responsive to children's needs by engaging in activities such as:	(2)An early learning provider must be aware of and responsive to children's needs by engaging in activities such as:	The Director's decision is to change permissive language in this section from "may" to "must". IMPACT: All Stakeholders
110-300-0320	(2) An early learning provider <u>may</u> maximize children's interests, engagement, and abilities by using techniques such as:	(2) An early learning provider must maximize children's interests, engagement, and abilities by using techniques such as:	The Director's decision is to change permissive language in this section from "may" to "must". IMPACT: All Stakeholders
110-300-0355	(2) The department determines capacity for a family home early learning program after considering: (a) Square footage of the early learning program; (b) An early learning provider's years of experience in licensed child care; (c) A provider's education and on-going training; (d) The age range requested or approved by the department; (e) The amount of developmentally appropriate equipment, materials, and toys an early learning program can provide children to use; (f) A provider's licensing history with the department; and (g) The number of qualified staff available to meet staff-to-child ratios.	(2) The department determines capacity for a family home early learning program after considering: (a) Square footage of the early learning program; (b) An early learning provider's years of experience in licensed child care <u>(Experience must be from working as a Center Director, Program Supervisor, Lead Teacher, family home licensee, or another similar role in a child care setting.);</u> (c) A provider's education and on-going training; (d) The age range requested or approved by the department; (e) The amount of developmentally appropriate equipment, materials, and toys an early learning program can provide children to use; (f) A provider's licensing history with the	The definition of "experience" is found only in (7)(b), and some may interpret this to mean that it does not apply to (8)-(10). It would be clearer to move this requirement to (2)(b), so that (2) and (7) would read as shown here.

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WAC	NRM consensus text	Director’s decision	Rationale
		department; and (g) The number of qualified staff available to meet staff-to-child ratios.	
110-300-0355		(3) A family home licensee must not exceed the total capacity or age range stated on the child care license at any time except as provided in this section. All children on the premises, signed in to child care, on an off-site trip from the early learning program, or being transported by the early learning program staff are counted in capacity including the children of staff. (a) A family home licensee must receive department approval to care for a child with special needs, pursuant to WAC 110-300-0300, if the child is older than the maximum age identified on the license. A child with documented special needs may be in care up to age 19 and must be counted in both capacity and staff-to-child ratio. (b) A child with special needs who requires individualized supervision pursuant WAC 110-300-0300(3) counts towards capacity but does not count in the staff-to-child ratio. (c) <u>A child who turns 13 years old permitted by chapter 110-290 WAC and who must be counted in both capacity and staff-to-child ratio.</u>	The Director’s decision pursuant to CCDF requirements is to include a new section in 110-300-0355(3)(c) to include the care of 13 year old children and will align with WCCC WAC (110-295). Additionally, the CCDF 98.21 Eligibility processes states: "During the period of time between determinations or re-determinations, if the child met all of the requirements in 98.20(a) on the date of the most recent eligibility determination or re-determination, the child shall be considered eligible and will receive services at least at the same level regardless of: (F) Any change in age, including turning 13 years old during the eligibility period"

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WAC	NRM consensus text	Director’s decision	Rationale
		Weight #7	
110-300-0355	<p>(7) When applying for an initial or non-expiring family home license, a family home licensee with less than one year of experience may request from the department a capacity of up to six children, birth through twelve years of age.</p> <p>(a) A maximum of three children may be under two years of age (one child must be able to walk independently).</p> <p>(b) Experience must be from working as a Center Director, Program Supervisor, Lead Teacher, family home licensee, or another similar role in a child care setting.</p>	<p>(7) When applying for an initial or non-expiring family home license, a family home licensee with less than one year of experience may request from the department a capacity of up to six children, birth through twelve years of age.</p> <p>(a) A maximum of three children may be under two years of.</p> <p style="color: red;">(b) <u>If there are three children under two years of age, one of these children must be able to walk independently..</u></p>	<p>IMPACT: All Stakeholder groups</p> <p>The definition of “experience” is found only in (7)(b), and some may interpret this to mean that it does not apply to (8)-(10). It would be clearer to move this requirement to (2)(b), so that (2) and (7) would read as shown here.</p>
110-300-0356		<p>(3)A center licensee must not exceed the total capacity or age range stated on the child care license at any time except as provided in this section. All children on the premises, signed in to child care, on an off-site trip from the early learning program, or being transported by the early learning program staff are counted in capacity including the children of staff.</p> <p>(a) A center licensee must receive</p>	<p>The Director’s decision pursuant to CCDF requirements is to include a new section in 110-300-0355(3)(c) to include the care of 13 year old children and will align with WCCC WAC (110-295).</p> <p>Additionally, the CCDF 98.21 Eligibility processes states: “During the period of time between determinations or re-determinations, if the child met all of the requirements in</p>

Director’s Decisions Chart Summary			
WAC	NRM consensus text	Director’s decision	Rationale
		<p>department approval to care for a child with special needs, pursuant to WAC 110-300-0300, if the child is older than the maximum age identified on the license. A child with documented special needs may be in care up to age 19 and must be counted in capacity and staff-to-child ratio.</p> <p>(b) A child with special needs who requires individualized supervision pursuant WAC 110-300-0300(3) does not count in the staff-to-child ratio.</p> <p>(c) <u>A child who turns 13 years old permitted by chapter 110-290 WAC must be counted in both capacity and staff-to-child ratio.</u></p> <p style="text-align: center; color: red;">Weight #7</p>	<p>98.20(a) on the date of the most recent eligibility determination or re-determination, the child shall be considered eligible and will receive services at least at the same level regardless of: (F) Any change in age, including turning 13 years old during the eligibility period”</p> <p style="text-align: right;">IMPACT: All Stakeholder groups</p>
110-300-0400	(1) After completing a department orientation, an applicant must submit a complete license application packet, pursuant to chapter 43.216 RCW. This requirement also applies to a change of ownership. A complete license application packet includes: (b) Information about the facility to be licensed: (iv) E. coli bacteria and nitrate	(1) After completing a department orientation, an applicant must submit a complete license application packet, pursuant to chapter 43.216 RCW. This requirement also applies to a change of ownership. A complete license application packet includes: (b) Information about the facility to be licensed: (iv) E. coli bacteria and nitrate	<p>The Director’s decision is to replace NRM language decision to be consistent with NRM consensus language in 110-300-0235(4)(a) (4) If an early learning program space receives water from a private well, the well must comply with chapter 173-160 WAC minimum standards for construction and maintenance of wells.</p> <p>(a) Well water must be tested within six</p>

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WAC	NRM consensus text	Director’s decision	Rationale
	testing results for well water that is no more than three years old, if applicable;	testing results for well water that is no <u>more than twelve months old</u> , if applicable;	months of the date this section becomes effective and at least once every 12 months thereafter for E. coli bacteria and nitrates by a Washington state certified laboratory accredited by the department of ecology to analyze drinking water. IMPACT: All Stakeholder groups
110-300-0430	<p>Subsidy requirements.</p> <p>An early learning provider or program that receives child care subsidy payments under the Working Connections Child Care or seasonal programs must be licensed, certified, or contracted by the department and comply with all applicable requirements of chapter 170-290 WAC, as hereafter recodified or amended.</p> <p>Weight NA</p>		<p>The Director’s decision is to delete this requirement to comply with subsidy rules from the licensing WAC (110-300) since compliance with the subsidy regulations is required under subsidy rule chapter itself. This will eliminate the possibility that a provider is penalized twice for a subsidy rule infraction.</p> <p>IMPACT: All Stakeholder groups</p>
110-300-0435	<p>(1) The department cannot waive a requirement of state law (RCW) or federal law.</p> <p>(2) Pursuant to RCW 43.216.065, the department may approve a waiver from a rule in this chapter if it does not jeopardize the health, safety, or welfare of the children in care.</p> <p>(3) An early learning provider’s request for a waiver from a rule in this chapter must be:</p> <p>(a) Submitted in writing on the</p>	<p>(1) The department cannot waive a requirement of state law (RCW) or federal law.</p> <p>(2) Pursuant to RCW 43.216.065, the department may approve a waiver from a rule in this chapter if it does not jeopardize the health, safety, or welfare of the children in care.</p> <p>(3) An early learning provider’s request for a waiver from a rule in this chapter must be:</p> <p>(a) Submitted in writing on the</p>	<p>The Director’s decision is to add an additional provision (subsection (5)) to this section that indicates that a waiver may be revoked if the underlying rule that the waiver was based on has been materially altered or amended.</p>

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	<p>department’s form to the local licensing office;</p> <p>(b) Approved by the department director or the director’s designee prior to the early learning provider implementing the waiver from the rule; and</p> <p>(c) For a specific program need or child.</p> <p>(4) A granted waiver may be time specific or may remain in effect for as long as the early learning provider continues to comply with the conditions of the waiver. If the waiver from the rule is time limited, the provider must not exceed the timeframe established by the department.</p>	<p>department’s form to the local licensing office;</p> <p>(b) Approved by the department director or the director’s designee prior to the early learning provider implementing the waiver from the rule; and</p> <p>(c) For a specific program need or child.</p> <p>(4) A granted waiver may be time specific or may remain in effect for as long as the early learning provider continues to comply with the conditions of the waiver. If the waiver from the rule is time limited, the provider must not exceed the timeframe established by the department.</p> <p><u>(5) The department may revoke a granted waiver if a licensing rule which was considered in granting the waiver is materially altered or amended.</u></p>	
110-300-0436	<p>(1) The department cannot provide variance from a requirement in state (RCW) or federal law.</p> <p>(2) Upon written request of an applicant, licensee, Center Director, Assistant Director, or Program Supervisor, the department may grant a variance from a rule in this chapter if the proposed program alternative does not jeopardize the health, safety, or welfare of the children in care.</p> <p>(3) A request for variance from a rule in</p>	<p>(1) The department cannot provide variance from a requirement in state (RCW) or federal law.</p> <p>(2) Upon written request of an applicant, licensee, Center Director, Assistant Director, or Program Supervisor, the department may grant a variance from a rule in this chapter if the proposed program alternative does not jeopardize the health, safety, or welfare of the children in care.</p> <p>(3) A request for variance from a rule in</p>	<p>The Director’s decision is to add an additional provision (subsection (5)) to this section that indicates that a variance may be revoked if the underlying rule that the variance was based on has been materially altered or amended.</p>

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WAC	NRM consensus text	Director’s decision	Rationale
	<p>this chapter must be:</p> <p>(a) Submitted in writing on the department’s form to the local licensing office;</p> <p>(b) Approved by the department director or the director’s designee prior to the early learning provider implementing the variance from the rule; and</p> <p>(c) For a specific program approach or methodology.</p> <p>(4) A granted variance may be time specific or may remain in effect for as long as the early learning provider continues to comply with the conditions of the variance. If the variance from the rule is time limited, the provider must not exceed the timeframe established by the department.</p>	<p>this chapter must be:</p> <p>(a) Submitted in writing on the department’s form to the local licensing office;</p> <p>(b) Approved by the department director or the director’s designee prior to the early learning provider implementing the variance from the rule; and</p> <p>(c) For a specific program approach or methodology.</p> <p>(4) A granted variance may be time specific or may remain in effect for as long as the early learning provider continues to comply with the conditions of the variance. If the variance from the rule is time limited, the provider must not exceed the timeframe established by the department.</p> <p><u>(5) The department may revoke a granted variance if a licensing rule which was considered in granting the variance is materially altered or amended.</u></p>	
110-300-0450	<p>(2) An early learning provider must have and follow written or electronic policies, including:</p> <p>(e) Notification to parents or guardians if smoking occurs in family home or vehicle used to transport children during non-operating hours</p>	<p>(2) An early learning provider must have and follow formal written policies in either paper or electronic format, including:</p>	<p>The Director’s decision is this subsection needs to be deleted pursuant to 0420(2), which prohibits providers from smoking in their home or their cars at any time. If that rule remains, then 0450(2)(e) is moot.</p> <p>IMPACT: All Stakeholders</p>
110-300-0455	<p>(3) An early learning provider must keep daily staff attendance records for each</p>	<p>(3) An early learning provider must keep daily staff attendance records for each</p>	<p>The Director’s decision is to strike “who count in staff to child ratio” from this requirement.</p>

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WAC	NRM consensus text	Director’s decision	Rationale
	center classroom or family home program. These attendance records must be on paper or in an electronic format and clearly document: (a) The name of each staff member (including staff assigned to care for children with special needs and one-on-one care) and volunteers who count in staff-to-child ratio;	center classroom or family home program. These attendance records must be on paper or in an electronic format and clearly document: (a) The name of each staff member (including staff assigned to care for children with special needs and one-on-one care) and volunteers	The department thinks all adults present must be accounted for on staff attendance records. Intentionally ignoring volunteer who do not count in ratio seems like a decision to assume high risk and liability. IMPACT: All Stakeholders
110-300-0475	(2) An early learning provider must report by phone upon knowledge of the following to: (a) DSHS children’s administration intake (Child Protective Services) or law enforcement at the first opportunity, but in no case longer than 48 hours, pursuant to RCW 26.44.030 and .040, and to the department: (b) Emergency Services (911) immediately, and to the department within 24 hours: (c) Washington Poison Center immediately after calling 911, and to the department within 24 hours: (d) Local health jurisdiction or DOH immediately, and to the department within 24 hours: (e) The department at the first opportunity, but in no case longer than 24 hours, upon knowledge of any person required by chapter 110-06 WAC to have a change in their background check	(2) An early learning provider must report by phone upon knowledge of the following to: (a) DSHS children’s administration intake (Child Protective Services) or law enforcement at the first opportunity, but in no case longer than 48 hours, pursuant to RCW 26.44.030 and .040, and to the department: (b) Emergency Services (911) immediately, and to the department within 24 hours: (c) Washington Poison Center immediately after calling 911, and to the department within 24 hours: (d) Local health jurisdiction or DOH immediately, and to the department within 24 hours: (e) The department at the first opportunity, but in no case longer than 24 hours, upon knowledge of any person required by chapter 110-06 WAC to have a change in their background check	The Director’s decision is to use the original weight in this subsection 0475(2) of Weight #8 . NRM removed the weight entirely (Weight NA). The weight was removed because NRM felt that the requirements of subsection 0475 repeated the reporting requirement of subsection 0475(1). This is not the case. Subsection 0475(1) requires a provider to report to law enforcement of DSHS suspected child abuse or neglect. Comparatively, subsection 0475(2) requires providers to report a much broader range of incidents (e.g. death, attempted suicide, missing child, poisoning, etc.). The reporting requirements also detail who to report to and in what timeframe—requirements that differ from subsection 0475(1).

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	history due to: Weight #NA	history due to: Weight #8	IMPACT: All Stakeholders