

# [State of alabama child care center regulations](https://assignbuster.com/state-of-alabama-child-care-center-regulations/)

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## Abstract

The requirements for childcare centers, be it licensed Day Care or Home-based, varies by state. This assignment is to give the requirements as set by the State of Alabama for both types of facilities. Profound apologies offered to my professor for using easy-way-out by the shortcut of a copy/paste, which is the less attractive method in completing this assignment. The end-results are in pointing out the credibility and responsibility of those that care for children.

## State of Alabama Child Care Center Regulations

From the DHS Child Care Services Division in Alabama are as follows:

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| Agency Information  | Day Care Centers  | Home-based day care  |
| State Of Alabama Department Of Human Resources: Child Care Services Division Address: 50 Ripley Street Montgomery, AL 36130 Phone Number: 1-866-528-1694  | Director : * Must be at least 19 years old

Possess a high school diploma or general equivalency diploma (GED); * Must have at least 20 clock hours of training in administration and management and at least four clock hours of training in quality child care;
* Must have one of the following:

- 120 clock hours of preparation in child care and at least 12 months of operating experience as a child care worker or teacher or as a manager in a licensed child care or a state approved setting; -Or- - Possesses certificates from one of the following: Child Development Associate (CDA) certificate or a Certified Child Care Professional certificate from the National Child Care Association (NCCA) in addition to a minimum of twelve months experience as a child care worker, teacher, or manager in a licensed child care or other state approved setting; -Or- - Possesses an Associate’s degree in child development or early childhood education and a minimum of nine months of working experience as a child care worker or teacher or as a director in a licensed child care or other state approved setting; -Or- - Possesses a Bachelor’s degree in child development or early childhood education with a minimum of six months working experience as a childcare worker, a teacher, or director in a licensed childcare or other state approved setting. On going training is a requirement by state regulations.  | Owner/Provider: * Must be at least 19 years old;
* Must have a high school diploma or a GED;
* Must have 24 clock hours of preparation in child care and development

Childcare training shall include hours in each of these areas: * Child Development;
* Health, Safety and Universal Precautions;
* Quality child care and licensing;
* The Childcare Professional and the Family;
* Language Development;
* Positive Discipline and Guidance.
* Must reside in the house.

- Prior to initial licensing, the applicant/licensee shall submit to the Department a current Infant-Child (Pediatric) Cardiopulmonary Resuscitation Certificate (CPR) and a current First Aid Certificate. Thereafter , the licensee shall have at least twenty clock hours of training related to child care each year. Documentation of training shall be on file in the home. Childcare training shall include hours in each of these areas: * Child Development;
* Health, Safety and Universal Precautions;
* Quality Child care and Licensing;
* The Childcare Professional and the Family;
* Language Development;
* Positive Discipline and Guidance.

Training in CPR and First Aid shall not be counted toward required training hours. Further training is required for uninterrupted licensing of home-based care.  |
|  | Teachers: * Must be at least 19 years old;
* Must have a high school diploma or a GED (general equivalency diploma); and
* Must have a minimum of twelve clock hours training in childcare and development.

On-going training/retraining is required.  | Assistant/Substitute * Must be at least 19 years old;
* Must have a high school diploma or a GED;
* Must be available to help if caregiver must leave;
* Name, age, address, phone number, medical, and reference data must be on file at home. Documentation of a current Infant-Child (Pediatric) Cardiopulmonary

Resuscitation Certificate (CPR)  |
|  | Assistants: * Must be at least 16 years old;
* Must have finished eighth grade;
* Must be supervised by a teacher;
* Must not be included in the staff: child ratio
 |  |
|  | Physical Space 32 square feet of indoor activity space for each child, designated areas of indoor activity space shall be provided for each grouping of children. Bathrooms, kitchens, isolation room, office, halls used as passageways, and storage areas shall not be considered when computing activity space.  | Physical space DHS has the right to restrict or limit the use of specific areas of the home, such as but not limited to: outdoor play areas; bathrooms; rooms used by the children. -There shall be at least thirty-two (32) square feet of usable indoor floor space for each child the home is licensed or permitted to serve.  |
|  | Number and ages of children served: -Not to exceed, at any time, the number of children for which the center is licensed (stated on the license)  | Number and ages of children served: -The age range of the children received for care shall conform to the specifications on the license/permit. -There can be no more than 6 non-related children allowed. -No home shall be licensed for more than three children younger than twelve months of age.  |
|  | Nutrition and meals: Meals and snacks provided by the center for infants/toddlers shall comply with infant and child meal and snack patterns [shown in Section M., 2., page 73]. (DHR, 2009)  | Nutrition and meals: The licensee shall provide breakfast or a morning snack, a mid-day meal and at least one afternoon snack each day for the children in care. Meal and snack components and serving sizes [shall comply with patterns shown in Section M., on page 64.] (DHR, 2009)  |

## Conclusion

Web sites often post a list of regulations for childcare centers for the benefit of newcomers to a state. One website, which encompasses the basic data in each locale, is the Childcare Aware. org website. Information includes regulations and important contacts and valuable resources Military families have found this helpful when transferring to a new duty station. The information posted is easy to navigate and understand. The National Association of Child Care Resource and Referral Agencies (NACCRRA) provide accredited information in the “ Child Care Aware®, a program of Child Care Aware® of America, is partly funded by the Office of Child Care (OCC), Administration for Children and Families (ACF), U. S. Department of Health & Human Services.” (NACCRRA, 2015)

In reading over the list of both business positions, I find the most notable differences in requirements of Daycare and Home-based daycare are the director and teacher qualifications. What I do find the most disturbing is the minimum age allowed for both is nineteen (19) years of age. Granted, if a person has the certified credentials, the state licensing bureau will allow the public or private business to operate. Safeguards such as surprise inspections would tend to keep the directors more observant of proper operation requirements. My question is, however, how could a nineteen year old acquire the business knowledge at such a young age?

Home-based daycares operate as babysitting mode while Daycares are more educational based for toddlers and older children. Infants benefit from interaction by responsible adults who are caring for them while the parent is away, which is evident in either daycare or home-based care. Lack of certified personnel (could) harm a child in either business. It is a parent’s responsibility to check thoroughly the credentials of any establishment prior to leaving their child in the hands of caretakers

Website Credibility Ratings:

Alabama Department of Human Resources found athttp://dhr. alabama. gov. The State of Alabama is a credible website in that it lists the exact expectations and requirements of all out-of-home childcare. The regulations listed as per the State of Alabama Legislation, which are easily cross-referenced. This website is not a politically run site which invites blogs and advertisements. When cross-referencing any regulation, one can find the citation within the State of Alabama’s laws. If one wishes to take it further, searching within the State of Alabama and its legislative branch of state senators, the original bills and can be found by title or by the names of original house bills as presented to the state.

NACCRRA , or National Association of Child Care Resource and Referral Agencies found in numerous locations, listed and categorized in ChildcareAware. org. NACCRRA is responsible for overseeing the content of Childcare Aware. This website has the list of professionals in the field of childcare. The website also includes the accreditation link for education in the childcare field as well as a convenient interactive map to find the specifics of each state for the licensing guidelines. Finally, the website does provide compliant business reference of childcare facilities that adhere to the specifications under the NACCRRA. It is not a politically biased source, nor is it a blog. References

DHR, (2009). Retrieved fromhttp://dhr. alabama. gov/documents/MinimumStandards\_DayCare. pdf

DHR, (2009). DHR, (2009). http://dhr. alabama. gov/documents/MinimumStandards\_DayCareFamilyHomes. pdf

NACCRRA (2015). State Child Care Licensing. Retrieved fromhttp://www. naccrra. org/about-child-care/state-child-care-licensing

I would like to add a personal note, (and apologize to my professor for doing so in a formal assignment.) In the early 1980’s there were few regulations covering home-based care. I left my four children, ages 5 months to 6 years old, under the care of a person, recommended by a friend, while I worked full time. One day my husband and I arrived to pick up the children in the late evening. The youngest daughter, just barely 5 months old was in the woman’s lap, crying uncontrollably. The caretaker stated that she had been this way for three hours, (and yet she had failed to call me). What I noticed immediately was her right arm was dangling and not tensed up with fist balled like her left side. In questioning the caretaker, she claimed not to have a clue what was wrong with the baby’s arm. We left the other three children with her and headed straight to the hospital.

After processing and viewing the x-ray, local police arrived at the Navy hospital. Not being allowed to see or comfort my baby, but I managed to sneak a peak of the x-rays from a distance. The x-rays revealed the tiny upper arm, the bones formed an “ X,” it was no small wonder why the child was so distraught. The authorities chose to accuse me personally with abuse upon my child.

The authorities continually refused to check my whereabouts for the entire day by checking with my employer, which would prove that I did not harm my child. After months of harassment by both Navy and civilian officials, they finally checked both my alibi and the background of the caretaker and her family. This turnabout came when I finally stated that I would sue all involved parties if they did not cease the endless barrage of accusations. The discovery included the revelation that the woman and her older son (age 15) were unfit to be caretakers due to history of mental illness (now called Bi-polar). She finally admitted to the authorities that she and her oldest son had intentionally snapped the baby’s arm. They were frustrated that at 5 months of age the baby was not yet flipping over or attempting to sit up. I had filled the woman in on the baby’s slow development prior to hiring her services. The baby contracted meningitis when she was in the newborn nursery (as had over 90 others during that time); her cognitive and physical development was months behind the standard ‘ charts’ for heathy children. I had stayed at the hospital with my one-week-old daughter, defying orders to go home and just forget her. (The commander in charge of the unit said that I already had three children at home, and if I lost her, it would not make any difference! This angered me. They made me stop breast-feeding, claiming the spinal meningitis could have been spread by doing so. When they finally discovered that one infected nurse had caused the outbreak, there was no official apology issued the parents.) I watched babies surround me die from this horrible infection. Those that died did not have their parents with them, holding, rocking, and consoling their babies. (This is yet proof more that a parents contact with their babies gives the infant the love and support so very much required in their cognitive growth.) Sixty-five infants died during a span of one week.

Now that laws and regulations are in place for those that care for our children, if we do not thoroughly check out a person or business, we can blindly place our children in harm’s way.