



## Information

### Healthy Child Care America Blueprint for Action

Every day, millions of our young children leave home to spend part or most of their day in some type of child care setting. Children participate in child care in a variety of settings, such as child care centers, family child care homes, or in-home care, at various hours of the day. In just 20 years, the percentage of children enrolled in child care has soared from 30% (1970) to 70% (1993). It is estimated that 75% of women with children younger than 3 years of age are employed — and in need of child care.

Healthy Child Care America is based on the principle that families, child care providers, and health professionals in partnership can promote the healthy development of young children in child care and increase access to preventive health services, safe physical environments, and a medical home for all children. Linking health professionals, child care providers, and families makes good sense — for maximizing resources, for developing comprehensive and coordinated services, and, most important, for nurturing children.

The purpose of this *Blueprint for Action* is to provide communities with steps they can take either to expand existing public and private services and resources or to create new services and resources that link families, health care, and child care. Communities using the *Blueprint for Action* are encouraged to identify their own needs and to adapt the steps within the document as needed. The 10 steps are not prioritized; communities can determine which step(s) should be implemented.

There are no quick and easy solutions to the challenges that families, child care providers, and health professionals face today in providing for and ensuring the healthy development of children. It is important that these three groups work together to expand and create partnerships. The *Blueprint for Action* will help communities as they set priorities and goals that will lead to healthier child care in America.

#### [Introduction](#)

Many communities are forging new ground to ensure that children are in healthy and safe child care environments. Review this introduction for information about its role in this process and suggestions for ways to get your own community involved in Healthy Child Care America.

#### [Background Information](#)

Learn how the *Healthy Child Care America Blueprint for Action* came about and the role it plays in promoting healthy and safe child care.

#### [Goals](#)

Review the 5 primary goals of Healthy Child Care America.

#### [Step One](#)

The first of 10 steps, Step One focuses on the primary mission of Healthy Child Care America—promoting safe, healthy, and developmentally appropriate environments for all children in child care.

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### **Step Two**

Learn more about increasing immunizations rates and preventive services for children in child care.

### **Step Three**

Learn more about accessing health and social service programs through this informative description of Step Three.

### **Step Four**

Step Four addresses the importance of promoting and increasing access to health screenings.

### **Step Five**

This portion of the Blueprint for Action provides information about conducting health and safety education programs for children, families, and child care providers.

### **Step Six**

Learn more about improving nutrition services in child care through these resources and examples.

### **Step Seven**

Refer to this section of the Blueprint for Action for information about training and ongoing consultation to child care providers and families.

### **Step Eight**

Learn more about providing support to child care providers and families caring for children with special health care needs.

### **Step Nine**

Step Nine addresses the role of child care health consultants in developing and maintaining healthy child care. Learn more about these consultants and specific resources for integrating them into your child care program.

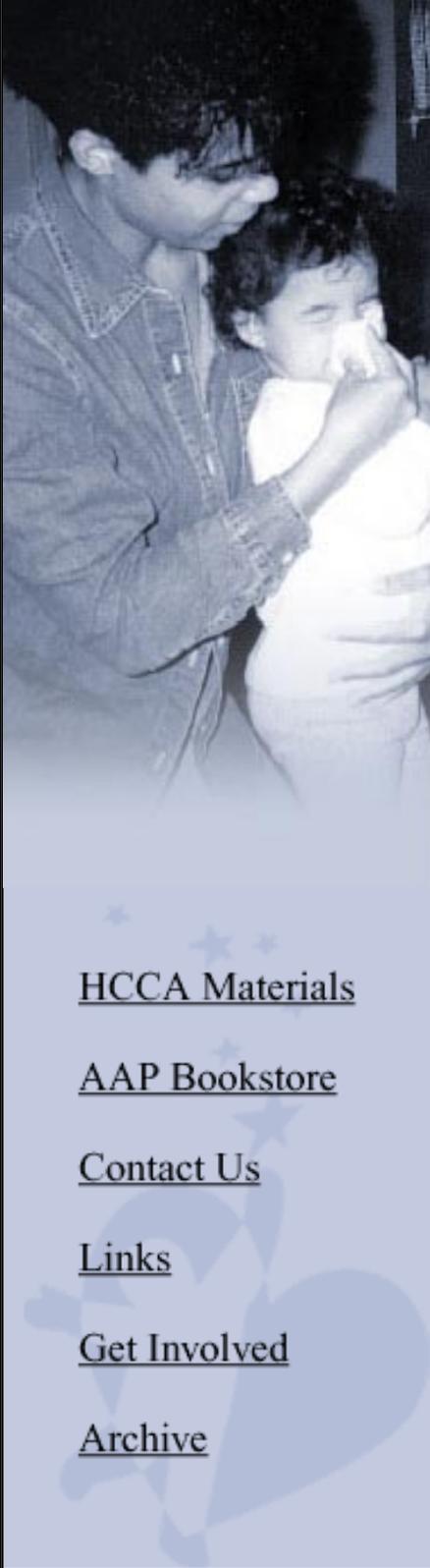
### **Step Ten**

Learn how to assess and promote the health, training, and work environment of child care providers through this final Blueprint for Action step.

### **List of Resources**

Refer to this page for a detailed list of resource materials cited in the *Healthy Child Care America Blueprint for Action*.

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### Blueprint for Action: Introduction

In many communities across the United States, innovative projects are forging new ground to ensure that children are in healthy and safe child care environments. These communities recognize that the public health community can combine efforts with the early childhood community to create the best care for the millions of children in child care. To reinforce these efforts and to stimulate others nationwide, 2 federal agencies, the [Child Care Bureau](#) and the [Maternal and Child Health Bureau](#), joined forces to launch Healthy Child Care America.

Healthy Child Care America was "kicked off" on May 10-11, 1995, as Donna Shalala, Secretary of the US Department of Health and Human Services, opened the National Child Care Health Forum. The forum brought together health professionals and early childhood professionals from localities, states, and national organizations and agencies. Together, they framed the *Blueprint for Action*, developing 10 steps communities can take to promote healthy and safe child care.

Communities across the United States are encouraged to launch their own Healthy Child Care America objectives, building on the *Blueprint for Action*, yet focusing on locally determined priorities and goals. The *Blueprint* presents important steps that communities can take to forge linkages between child care and health professionals, such as strengthening nutrition services or increasing immunization coverage in child care. Communities may choose to take action in all 10 areas or may focus their efforts on areas of particular interest.

The Action Step Strategy Sheets, resources, and examples cited in the 46-page *Blueprint* provide possible strategies that communities can use to implement particular action steps. The strategies can be used by child care providers, health professionals, families, child care regulators, policymakers, and businesses, as well as child care resource and referral agencies.

There are already many examples from which to learn. Some communities have created health "warmlines," linking child care providers with an on-call health care professional who is familiar with the particular needs of children in child care. Other communities have involved health professionals in their licensing and monitoring process. Rural areas have accessed health and safety training through satellite linkages, and in several instances, Medicaid has funded outreach efforts among child care networks to enroll eligible children in the program. It is the goal of Healthy Child Care America to help inform communities about these promising practices.

Review [background information](#) about the *Blueprint for Action*.



## Information

### Blueprint for Action: Background Information

Healthy Child Care America and the *Healthy Child Care America Blueprint for Action* are the result of a strong shared vision of the [Child Care Bureau](#) and the [Maternal and Child Health Bureau](#). This vision is twofold: (1) Create and maximize linkages between health care professionals and the child care community and (2) develop comprehensive and coordinated services to benefit children across the country.

The Child Care Bureau, located within the US Department of Health and Human Services [Administration for Children and Families](#), was established in January 1995. Establishment of the Bureau brought together 4 existing child care programs to provide a focal point for child care at the federal level. The Child Care Bureau is dedicated to enhancing the quality, affordability, and supply of child care for all families. The Child Care Bureau administers federal funds to states, territories, and tribes to assist low-income families in accessing quality child care for children while parents work or participate in education or training.

The Maternal and Child Health Bureau, located within the US Department of Health and Human Services [Health Resources and Services Administration](#), has existed for more than 80 years. Health and safety in child care settings was first included as a funding priority in 1984. Since that time, the Maternal and Child Health Bureau has launched major efforts to support health and safety in child care, such as collaboration with the [American Public Health Association](#) and the [American Academy of Pediatrics](#) (AAP), to develop National Health and Safety Performance Standards for Out-of-Home Child Care Programs and create the [National Resource Center for Health and Safety in Child Care](#).

### National Child Care Health Forum

In January 1995, the Child Care Bureau and the Maternal and Child Health Bureau planned the National Child Care Health Forum to promote the healthy development of children in child care and to encourage partnerships among health professionals and child care providers. This conference served as a launching pad for the Healthy Child Care America campaign.

Representatives from the following organizations attended the planning meeting:

- [Administration for Children and Families](#)
- [American Academy of Pediatrics](#)
- [American Public Health Association](#)
- [Association of Maternal and Child Health Programs](#)
- [Centers for Disease Control and Prevention](#)
- [Indian Health Service](#)
- [Maternal and Child Health Bureau](#)
- [National Association of Pediatric Nurse Practitioners](#)
- [National Association of Child Care Resource and Referral Agencies](#)

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### **Blueprint for Action**

Participants were asked to provide feedback on a preliminary draft of the *Blueprint for Action* and to suggest the agenda and format for the conference. The planning group determined that the *Blueprint* should serve as a working document to provide guidance for communities. Structured in such a way that communities could adapt the document to meet individual and group needs, the *Blueprint for Action* presents action steps that communities can take to support families, health care professionals, and child care providers in caring for children.

Working with the Child Care Bureau and the Maternal and Child Health Bureau, the planning group developed a draft *Blueprint for Action* to be presented at the forum. The partnership between the 2 departments and participants at the planning meeting continued to grow following the January meeting, and additional organizations were invited to participate in the forum.

The 180 participants of the National Child Care Health Forum, all experts in the area of health and safety in child care, contributed suggestions for revising the *Blueprint for Action* draft into an official document. The *Blueprint for Action* is not meant to be static, but rather a dynamic document that can be adapted and used as needed within a community. Most important, the *Blueprint for Action*, along with suggested strategies, resources, and examples for implementing the action steps, is a document to assist communities in the development of healthy child care and partnerships among families, health care professionals, and child care providers.

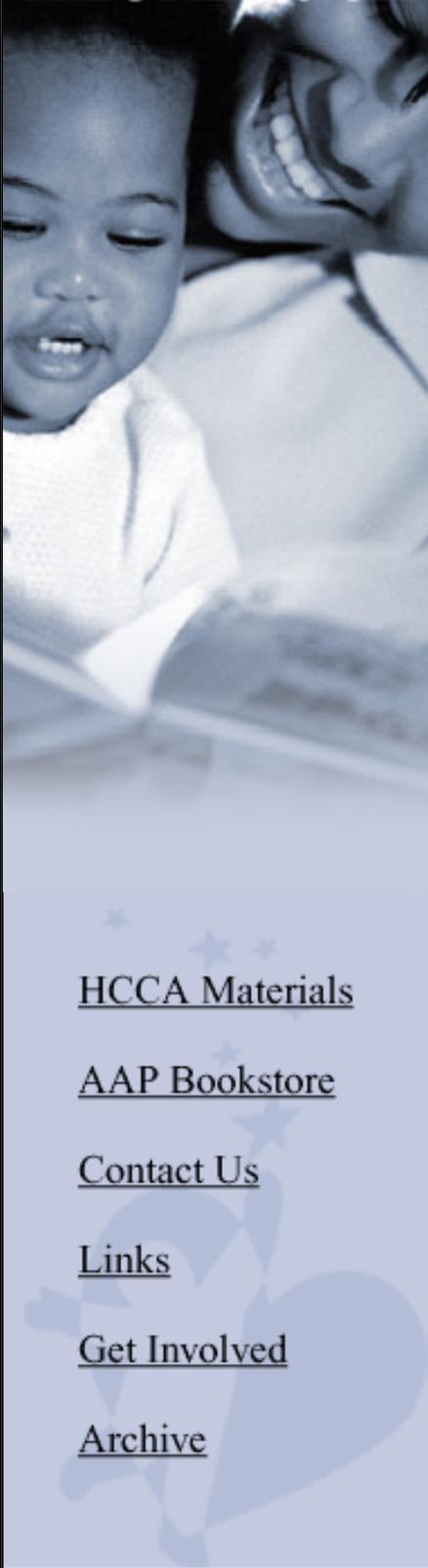
It will be exciting to see partnerships taken to another level as everyone works together to promote health in the lives of children. Each day provides an opportunity to become involved, and each day we all have the ability to make a difference.

Learn more about [Healthy Child Care America goals](#).

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## Information



### Blueprint for Action: Goals

The following are goals for Healthy Child Care America:

- Safe, healthy child care environments for all children, including those with special health care needs
- Up-to-date and easily accessible immunizations for children in child care
- Access to quality health, dental, and developmental screenings and comprehensive follow-up for children in child care
- Health and mental health consultation, support, and education for all families, children, and child care providers
- Health, nutrition, and safety education for children in child care, their families, and child care providers

Go to [Step One](#) of the *Blueprint for Action*.

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### Blueprint for Action: Step One

**Promote safe, healthy, and developmentally appropriate environments for all children in child care.**

Responsive caregiving must take place within a setting that is consistently safe and supportive. In a safe, nurturing, highly interactive setting, whether this is a family home or a center, children feel confident to fully explore and experience their environment free from injury or harm. Safe, secure transportation of children to and from the setting also should be ensured. In evaluating the quality of a child care facility or program, families should receive information about conditions and methods that promote the physical safety and emotional security of the children.

### Strategies for Implementing Action Step One

#### First Steps

- Promote awareness of and disseminate [Caring for Our Children: National Health and Safety Performance Standards: Guidelines for Out-Of-Home Child Care Programs](#) and the [Head Start Program Performance Standards](#).
- Involve parents in promoting safety within the child care program. Example: Hold a playground "clean-up day" and parent meetings on safety practices and awareness.
- Disseminate a list of local health and safety resources and services to child care providers and a list of local child care resources to health professionals and clinics.
- Identify health professionals and child care providers who can share information on the importance of safe, quality child care. Example: Use local media (radio stations, newspapers) to acknowledge specific providers or programs dedicated to child health or child care services.

### Use Partnerships to Enhance Systems

- Establish partnerships with community colleges and/or local educational institutions to conduct workshops on child care health and safety guidelines.
- Create coalitions of health professionals and child care providers to promote healthy, safe child care.
- Establish a partnership with [local child care resource & referral agencies](#) to inform families about safe, affordable, available child care services in or near their community.
- Conduct outreach efforts that provide training, materials, and support to unregulated providers, and invite them to local training sessions and workshops.
- Involve the local business community in a campaign to promote awareness of joint responsibilities among health professionals, child care providers, and families. Example: Promote and support activities such as health fairs and special outreach efforts.

- Involve local businesses in supporting your local Healthy Child Care America program.

### Examples

The following are examples of organizations that have successfully implemented Step One of the *Healthy Child Care America Blueprint for Action*.

**Atlanta Family Child Care Health and Safety Project, Save the Children Child Care Support Center**  
**1447 Peachtree St NE**  
**Atlanta, GA 30309**

This project addresses the following issues that can negatively impact the health and safety of children in family child care:

- The large number of unregistered providers
- The high turnover rate among registered providers
- The need for information about the most effective ways to train and support family child care providers, especially in their role as a health resource for parents

Project staff help link child care providers with services and organizations that improve and support quality child care. These include the [Child and Adult Care Food Program](#), [child care resource and referral agencies](#), professional provider associations, training opportunities, child care resource rooms, and the child care provider "warmline." Staff also develop and distribute educational health and safety materials, resource guides and health and social service referral information, a pamphlet for parents on choosing child care that meets health and safety standards, and a child health record keeping system for child care providers and parents. In addition, the project provides free health and safety training and assistance to help low-income providers meet health and safety standards.

**Child Care Coalition of South Central Connecticut**  
**419 Whalley Avenue**  
**New Haven, CT 06511**

Representing a broad range of individuals and agencies interested in children's issues, this organization is concerned with affordable, accessible, quality child care. In addition to center-based and home-based providers, the Child Care Coalition of South Central Connecticut (CCC/SCC) members include parents, health professionals, social service agencies, and local school districts and businesses. The Coalition receives administrative support from INFOLINE, Connecticut's child care resource and referral service, sponsored by United Way of Connecticut. The CCC/SCC provides a forum for parents, health professionals, and child care and human services providers to exchange information and collectively address issues of concern. Building links between child care providers and other professionals working with young children and families is a major focus of the Coalition. Activities include advocating for affordable, accessible, quality child care; disseminating information at the local level pertaining to state and federal child care policy issues; publishing a newsletter; providing consultation to area businesses regarding employer-sponsored child care options; and conducting workshops on health and developmental issues for child care providers, parents, and health professionals.

### Resources

Refer to the following resources when implementing Step One.

***Accreditation Criteria and Procedures of the National Academy of Early Childhood Programs***

National Association for the Education of Young Children  
1509 16th St NW  
Washington, DC 20036-1426  
800/424-2460

This manual describes the policies and procedures for accreditation of early childhood group programs for children ages birth through 8. The manual presents criteria for high-quality programs in the areas of staff interactions with children and parents, curricula, and staff qualifications and development. Appendices include information on developmental appropriateness, immunizations, and food programs.

***Caring for Our Children: National Health and Safety Performance Standards: Guidelines for Out-of-Home Child Care Programs, Second Edition***

American Academy of Pediatrics  
141 Northwest Point Blvd  
Elk Grove Village, IL 60007-1098  
800/433-9016

This manual describes standards for planning and establishing a quality program of child care. They are intended for use by anyone working in the child care system in the United States, including those who direct or work in facilities and those involved in licensing and regulation. The standards addressed include staffing; program activities for healthy development; health protection and promotion; nutrition and food service; facilities, supplies, equipment, and transportation; infectious diseases; children with special needs; administration; and recommendations for licensing and community action. The publication also provides rationale for each standard, along with comments and resources for obtaining more information. Distinctions are made between standards that apply to child care centers, large family child care homes, and small family child care homes.

***Caring for Our Children: Video Series***

American Academy of Pediatrics  
141 Northwest Point Blvd  
Elk Grove Village, IL 60007-1098  
800/433-9016

This videocassette program demonstrates how to comply with various guidelines in the manual and consists of the following 6, 30-minute videocassettes: Standards and You, Basic Caregiving, Ready for Anything, Setting Up for Healthy and Safe Care, Keeping It in Shape, and Illness in Child Care.

***Child Care and Ill Children and Healthy Child Care Practices***

National Association for the Education of Young Children  
1509 16th St NW  
Washington, DC 20036-1426  
800/424-2460

This resource guide lists organizations, programs, individuals, and publications on related to children's health in child care settings and the care of ill children.

***Health and Safety in Family Day Care: An Introductory Course for Family Day Care***

### **Providers**

National Center for Education in Maternal and Child Health  
2000 15th St North, Suite 701  
Arlington, VA 22201-2617  
703/524-7802

This training package (available for loan only) is designed to increase family child care providers' awareness of their role in creating a safe and healthy environment for children in their care. Six modules are contained within the following volumes: Communicable disease, home safety, and first aid (Volume I); Food safety and nutrition (Volume II); and Managing children's behavior (Volume III). Each module presents information on the specific topic, as well as goals, learning objectives, learning strategies, evaluation criteria, and teaching aids and resources. Complete instructions are included to guide the trainer in preparing for the sessions.

### **Healthy Young Children: A Manual for Programs**

National Association for the Education of Young Children  
1509 16th St NW  
Washington, DC 20036-1426  
800/424-2460

This basic manual is used by programs and providers to promote and protect the health and safety of children, staff, and families in child care programs. The 1995 edition, representing a comprehensive review of current information on health and safety policies and practices, replaces all earlier editions of this publication.

### **Model Child Care Health Policies**

Pennsylvania Chapter of the American Academy of Pediatrics  
Early Childhood Education and Linkage System  
Building 2, Suite 307  
Rosemont Business Campus  
919 Conestoga Rd  
Rosemont, PA 19010  
610/520-9125

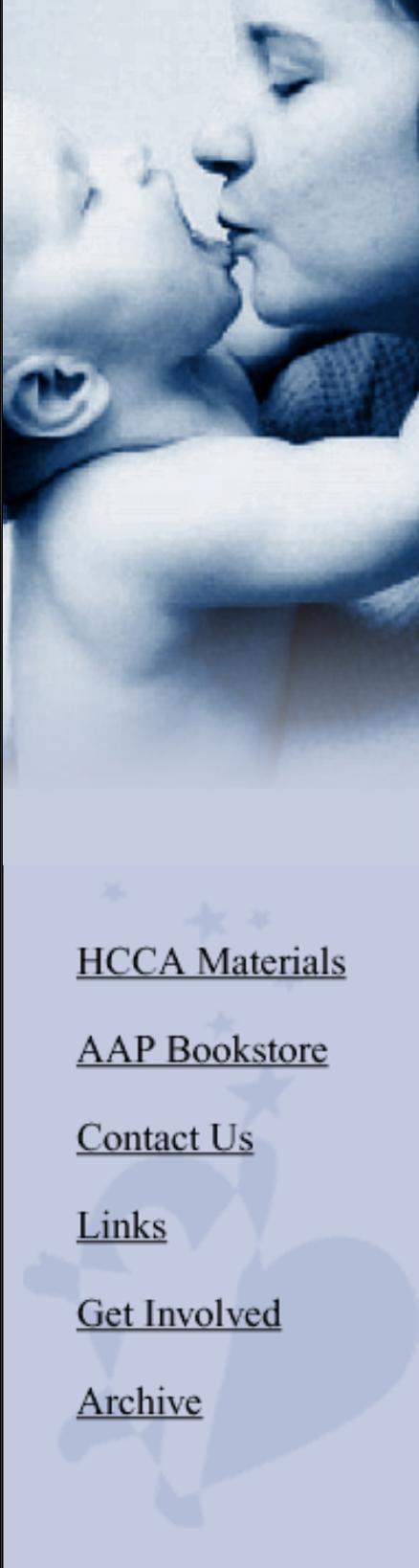
These model health policies for all types of out-of-home child care programs were developed by the Pennsylvania Chapter of the American Academy of Pediatrics Early Childhood Education Linkage System. Guidelines are provided for many relevant child care health topics, including care of ill children, medication administration, emergency and evacuation plans, and food handling and feeding. Included are sample forms, checklists, and procedures that can be adapted to reflect site-specific information. The publication also lists conditions requiring immediate medical attention, a table of symptoms of common childhood illnesses, and sample nutritious menus.

Review **Step Two** of the *Blueprint for Action*.

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### Blueprint for Action: Step Two

#### Increase immunization rates and preventive services for children in child care settings.

Although immunizations have dramatically reduced the incidence of many infectious diseases, we recently have witnessed outbreaks of serious infection because too many of our young children have not been fully immunized. Nationally, only 78% of all 3-year-old children have been age-appropriately immunized; in licensed child care facilities, however, 94% of the children have been immunized – demonstrating the critical contribution of child care settings as an access point for children's health services. To increase immunization rates, both families and providers should receive information on resources.

#### Strategies for Implementing Action Step Two

##### First Steps

- Disseminate immunization schedules and information to child care providers, families, and employers.
- Disseminate the AAP immunization "dose counter" or other effective tools to track a child's immunization status to child care providers and families.
- Train child care providers and families to use the immunization schedule to determine if a child's immunizations are up-to-date.
- Publish and distribute information on places that provide immunizations free of charge or at low cost.
- Inform families about the importance of immunizations in preventing childhood diseases.
- Contact local health clinics about the possibility of offering immunizations at child care settings during evening hours and weekends.
- Encourage states to adopt the **immunization schedule** approved by the **Centers for Disease Control and Prevention** (CDC), the **American Academy of Pediatrics** (AAP), and the **American Academy of Family Physicians**.
- Ask local businesses to provide incentives to families/children who are immunized. Example: Free admission to amusement parks or restaurant coupons for children with up-to-date immunization records.

##### Use Partnerships to Enhance Systems

- Contact professional health organizations such as the **National Association of Pediatric Nurse Practitioners**, AAP, and local nursing and medical schools about providing, coordinating, or connecting child care programs with immunization services.
- Partner with existing national immunization campaigns such as those sponsored by Kiwanis and Rotary clubs. (For more information about these and other

national immunization resources, refer to the [Childhood Immunization Support Program Web site](#).)

- When available, use statewide immunization registries to track children in need of immunizations. Link immunization records maintained in child care programs to preexisting registries.
- Use child care resource and referral agencies as liaisons between immunization services and child care programs.
- Develop linkages with the CDC State Immunization Regional Outreach Consultant to coordinate community immunization. Contact your local public health department for the outreach consultant's number.

### **Examples**

The following are examples of organizations that have successfully implemented Step Two of the [Healthy Child Care America Blueprint for Action](#).

#### **Family Center of Washington County 32 College Dr, Suite 100 Montpelier, VT 05602**

To increase the immunization rates of children, the Rotary Club partnered with a local child care resource and referral agency to provide education and promotion on immunization topics. The Rotary Club helped lead an immunization group, sponsored a mall booth staffed by the resource and referral agency, and sponsored production of educational materials such as brochures on immunization.

#### **Family Child Care Immunization Project, The Center for Health Training 2229 Lombard St San Francisco, CA 94123**

This project is developing training and technical assistance to help family child care providers in California comply with immunization regulations. The project has developed training materials on immunizations in family child care, conducted immunizations training family child care providers, and provided training to local child care health consultants on ways to provide assistance to family child care providers on immunization-related issues. The project also analyzed the impact of educational materials, training, and technical assistance on the caregivers' and parents' knowledge of immunizations and on the children's immunization levels.

#### **Keep on Track, Child Care Resources 15015 Main St, Suite 206 Bellevue, WA 98007**

This project helps child care providers establish partnerships with families to increase the number of children who are properly immunized in Washington's King and Snohomish Counties. Keep on Track developed an immunization kit and trained public health nurses and Junior League volunteers to teach providers how to use it. The kit includes a parent information brochure, customized immunization chart, Washington State Certification of Immunization Status forms, and other materials. In addition, the project supports caregivers' efforts to educate parents about the importance of having children immunized on schedule, reporting their children's immunization status to their child care provider, and keeping accurate home records of their children's vaccinations. Keep on Track is administered by Child Care Resources (a CCR&R agency), funded by the SAFECO Corporation, and supported by other partners including the Seattle-King County Department of Public Health, the [National Healthy Mothers, Healthy Babies coalition](#), and [Volunteers of America's Child Care Resource and Referral Network](#).

## Resources

Refer to the following resources when implementing Step Two.

### **Every Child by Two: A Plan for Action**

Every Child by Two  
747 Eighth St SE  
Washington, DC 20003  
800/637-0323

This packet outlines solutions and actions that communities and individuals can take to achieve the goal of having all children immunized by age 2. Other brochures included in the packet address immunization of children through Medicaid, computerized tracking and follow-up systems, community involvement in immunization programs, and **medical homes for all children**.

### **Immunization Dose Counter**

American Academy of Pediatrics Publications Department  
141 Northwest Point Blvd  
Elk Grove Village, IL 60007-1098  
800/433-9016

This pamphlet provides health care professionals and parents with guidelines on the schedule and types of vaccines that children should receive, such as diphtheria, tetanus, and pertussis (DTP); polio; Haemophilus b conjugate (Hib); measles, mumps, and rubella (MMR); and hepatitis B. Two recommended regimens of vaccines are presented – one regimen for children whose first vaccinations were given on schedule and the other for those whose first vaccinations occurred later than 1 year of age. This folder was reviewed by the **Centers for Disease Control and Prevention** and the **American Academy of Pediatrics**.

### **Local Health Department Strategies for Improving Childhood Immunization Rates**

National Association of County Health Officials  
440 First St NW  
Washington, DC 20001  
202/783-5550

This manual helps communities reach the Healthy People 2000 objective of having 90% of US children appropriately immunized by the age of 2. Topics include establishing links with other community agencies; mobilizing community resources; using volunteers in immunization efforts; establishing new immunization sites; providing culturally competent staff; developing special outreach programs; conducting a public education campaign; developing data systems; collaborating with other agencies to contain costs; developing alternative funding mechanisms; and pursuing legislative changes.

### **Recommended Childhood Immunization Schedule**

American Academy of Pediatrics  
141 Northwest Point Blvd  
Elk Grove Village, IL 60007-1098  
800/433-9016

This schedule lists the recommended childhood vaccines as approved by the **American Academy of Pediatrics**, the **Advisory Committee on Immunization Practices**, the

**Centers for Disease Control and Prevention**, and the **American Academy of Family Physicians**. For more information about immunization-related issues, visit the **Childhood Immunization Support Program Web site**.

Review **Step Three**.

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### Blueprint for Action: Step Three

#### Assist families in accessing key public and private health and social service programs.

Millions of young children from low-income working families lack health insurance and could benefit from assistance programs such as Medicaid, their [State Children's Health Insurance Program](#) (SCHIP), and the [Special Supplemental Nutrition Program for Women, Infants, and Children](#) (WIC). Since children of working parents are likely to be cared for in some type of early childhood setting, child care providers can help families learn about Medicaid, SCHIP, and WIC benefits, as well as Title V of the Social Security Act, Part H of the Individuals with Disabilities Act (IDEA), Supplemental Security Income (SSI), and other federal and state programs.

#### Strategies for Implementing Action Step Three

##### First Steps

- Publish and post key phone numbers for accessing health and social programs.
- Post phone numbers and contact information of local child care resource and referral agencies.
- Obtain written materials such as flyers, brochures, and posters to display and distribute to families and child care providers.
- Hold a before- or after-school question-and-answer session on health programs and services for families.
- Meet with health care professionals to discuss providing services to children who are eligible for Medicaid. Example: In some instances, services can be provided in child care settings.
- Use joint application forms (Medicaid, Title V, WIC) when available for key programs.

##### Use Partnerships to Enhance Systems

- Use child care resource and referral agencies to identify families in need of health and social service programs when doing intake and to provide information about available services.
- Provide information to families and child care providers on how to access services and private and public health program resource directories.
- Conduct training sessions for child care providers on how to identify the needs and goals of families and children in their program and how to make appropriate referrals to health, nutrition, and social services.
- Promote partnerships among families, child care providers, and social service providers. Example: Form an advisory committee of child care providers, health care professionals, families, and staff from other community agencies to facilitate communication and to conduct outreach to ensure that services are being delivered.

## Examples

The following are examples of organizations that have successfully implemented Step Three of the *[Healthy Child Care America Blueprint for Action](#)*.

### **Children's Council of San Francisco and the City of San Francisco Department of Social Services**

#### **The Center on Budget and Policy Priorities**

**777 N Capitol St, Suite 705**

**Washington, DC 20002**

The Children's Council of San Francisco and the City of San Francisco Department of Social Services have worked together to make Medicaid (MediCal in California) enrollment easier for children of working parents. In addition to providing child care resource and referral services, the Children's Council determines eligibility for child care subsidies and screens families to determine whether children are likely to be eligible. Program specialists also assist families with child care referrals and routinely refer families with eligible children to the local MediCal office.

### **LOCATE: Child Care**

#### **Maryland Committee on Children, Inc**

**608 Water Str**

**Baltimore, MD 21202**

This statewide child care resource and referral agency worked with the Start Healthy, Stay Healthy project to help families who call the program's "community line" for information on appropriate and affordable child care. LOCATE screens callers for family income and participation in public benefit programs to better determine Medicaid and WIC eligibility. When it is likely that a family will be eligible for Medicaid, LOCATE sends a brochure and other information on applying for benefits. Other activities include being trained to answer parents' questions about Medicaid and mailing informational letters and brochures to licensed child care programs for distribution to parents.

### **Start Healthy, Stay Healthy, Center on Budget and Policy Priorities**

**777 N Capitol St, Suite 705**

**Washington, DC 20002**

Millions of young children from low-income working families lack health insurance and are missing out on important benefits available to them through the Medicaid program. To address this issue, Start Healthy, Stay Healthy, a national outreach project initiated by The Center on Budget and Policy Priorities in Washington, DC, enlisted early childhood programs to identify children who are eligible for Medicaid but not enrolled and help families apply for benefits for their children. The project's principal focus is to facilitate enrollment of eligible children in Medicaid, thereby lowering the number of children who are uninsured or underinsured. The project has developed outreach materials and strategies for early childhood programs on identifying children who are eligible for Medicaid assistance, making effective referrals, and facilitating Medicaid enrollment. In addition, project staff can provide training and technical assistance to state and local early childhood programs.

## Resources

Refer to the following resources when implementing Step Three.

**Enhancing Access to Services: State and Local Strategies for Improving Access to WIC Services**

WIC State Agency, District of Columbia Commission of Public Health  
1660 L St NW, 10th Floor  
Washington, DC 20036  
202/645-5663

This report presents the findings of a project designed to identify state and local interventions for improving consumer access to WIC services and to help disseminate information and share innovative ideas and best practices. The report includes background information on access issues, principal findings of a survey of state and local agencies, abstracts of state activities, project profiles of initiatives with a unique approach, and ideas for the future.

**Finding Children Missing Out on Medicaid: A Guide for Early Childhood Programs**

The Center on Budget and Policy Priorities  
777 North Capitol St, Suite 705  
Washington, DC 20002

Produced by the **Start Healthy, Stay Healthy project**, this kit provides a tool that child care resources and referral agencies, child care providers, social and health services staff, and others can use to screen children for Medicaid eligibility. This kit also includes basic information about the Medicaid program and managed care, as well as examples of successful strategies that programs have used to facilitate the Medicaid application process and to streamline enrollment.

**Head Start and Medicaid: Making the Connection**

Association for Children of New Jersey  
35 Halsey St  
Newark, NJ 07102  
201/643-3876

Developed by the **Association for Children of New Jersey, Head Start/State Collaboration Project**, this report describes a year-long effort to promote collaboration between local Head Start grantees and county Medicaid offices. The primary goal of the project was to define and implement policies and practices that streamline the enrollment of Head Start children in Medicaid. The report contains recommendations for state-level policy changes, a discussion guide for facilitating Head Start/Medicaid collaboration, and a special report on New Jersey's children and health care.

**Maternal and Child Health Bureau Fact Pack**

National Maternal and Child Health Clearinghouse  
2070 Chain Bridge Rd, Suite 450  
Vienna, VA 22182-2536  
703/821-8955

This information package contains 29 fact sheets describing the organization and operations of the **Maternal and Child Health Bureau** (MCHB). One fact sheet presents a chart depicting MCHB's divisions and branches within the overall organization of the US Department of Health and Human Services; another describes the functions of the MCHB. Remaining fact sheets describe MCHB activities in various health issues and initiatives.

**Medicaid and Child Care: Group Partnership Potential**

Zero to Three

2000 14th St North, Suite 380  
Arlington, VA 22201  
703/528-4300

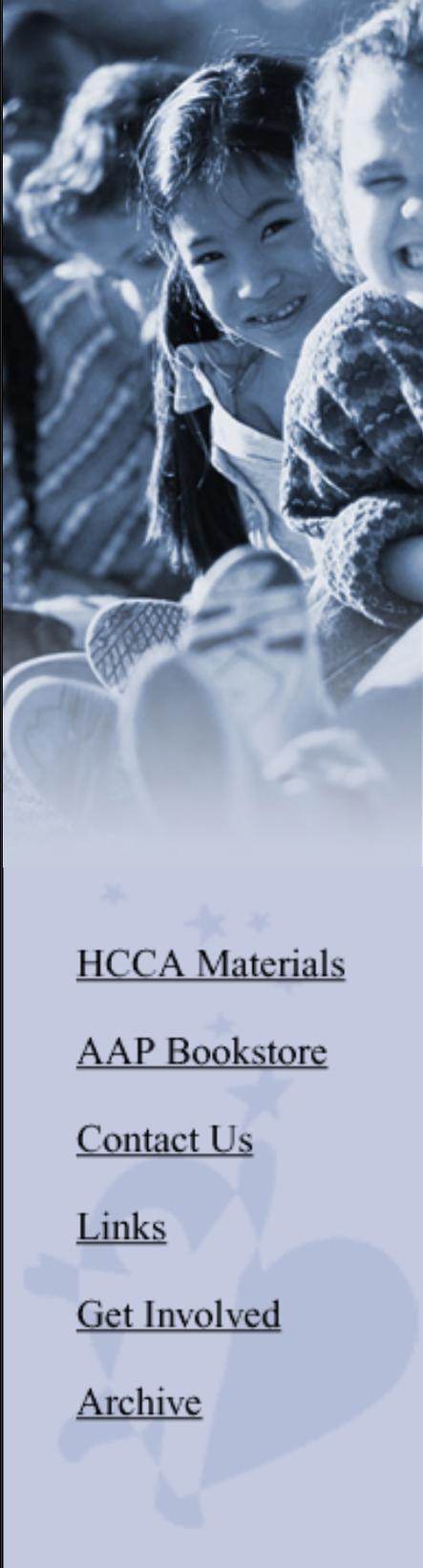
This paper discusses the services that early childhood programs can provide to better meet the health and developmental needs of young children. It describes how these services, when provided for eligible children and families, may be reimbursed by Medicaid. The paper also was published in *Young Children* (March 1992) by the **National Association for the Education of Young Children**.

Review **Step Four** of the *Blueprint for Action*.

Site by **CYKE, Inc.** 2003



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### Blueprint for Action: Step Four

#### Promote and increase comprehensive access to health screenings.

Many young children have undetected health conditions that, if untreated, could result in serious injury or illness. Child care programs can provide a key access point for conducting health and dental screening, including evaluation and referrals for conditions such as lead poisoning, impaired vision or hearing, and baby bottle tooth decay. Developmental screenings also are important components of comprehensive services. Recognizing and treating potentially harmful conditions earlier rather than later not only is more effective and less costly, but can prevent future problems.

#### Strategies for Implementing Action Step Four

##### First Steps

- Provide information about basic health screening and the importance of early identification, early intervention, and follow-up health services.
- Compile a list of community health resources and information for families on how to access services. Provide directories of local health services to child care providers for referring families and children for screenings.
- Start and maintain a health folder for each child, including health and medical coverage information.
- Encourage parents and providers to share information about the child's health on an ongoing basis.
- Contact professional health associations such as the [American Academy of Pediatrics](#) (AAP), [Association for the Care of Children's Health](#), [National Association of Nurse Practitioners](#), Maternal and Child Health offices, and Medicaid/ EPSDT programs about materials for parents.

##### Use Partnerships to Enhance Systems

- Bring health services into child care programs once a month (or use mobile units) to do screenings.
- Contact health departments and child care programs about conducting screenings. Train parents and other community volunteers to assist in health screenings.
- Teach families and child care providers how to access comprehensive health care services through community health centers, local maternal and child health programs, HMOs, etc.
- Use mobile vans and home visitors for screening in rural or migrant communities and other hard-to-reach populations.
- Contact state and local chapters of the [American Dental Association](#), [American Academy of Pediatric Dentists](#), Association of Dental Hygienists, and AAP about conducting dental and health screenings and disseminating materials.

## Examples

The following are examples of organizations that have successfully implemented Step Four of the [\*Healthy Child Care America Blueprint for Action\*](#).

**Healthy Beginnings, Early Childhood Services, Inc**  
**450 Jenks Ave**  
**Panama City, FL 32401**

This initiative provides onsite screening at licensed child care sites in 7 northern Florida counties. Early Childhood Services, Inc, administers a number of early childhood funding streams, including Title IV-A and [\*Head Start\*](#). Healthy Beginnings collaborated with Head Start's health and a nutrition coordinator to develop a coalition of health and safety providers. Health care professionals visit each licensed child care center twice a year in a mobile medical van donated by 2 local hospitals to complete basic screenings (eg, height, weight, heart, and dental). Funding comes from the local Kiwanis Club through its national initiative to provide safe and healthy beginnings to children under 5. The program produced measurable results--approximately 20% of children screened for physical health problems and 50% of those screened for dental health needs were referred for further services. The response from parents, particularly working parents who have difficulty scheduling routine health care for their children, is positive.

**The Health Check Program**  
**North Carolina Division of Mental Health, Developmental Disabilities, and Substance Abuse Services (MH/DD/SA), Child and Family Services Section)**  
**325 North Salisbury St, Suite 566**  
**Raleigh, NC 27603**

The Health Check Program was developed as a statewide initiative to improve access for Medicaid- eligible children to health services and comprehensive health checkups, including immunizations and vision, hearing, and dental screening services on a regular basis throughout childhood. As health problems are diagnosed in these children, Medicaid covers any medically necessary diagnostic or treatment services needed to treat the conditions. The goal of the program is to maximize the health and development of youth (from birth through age 20) by ensuring available, accessible, comprehensive, and continuous health care services. The program collaborates with the North Carolina Pediatric Society, the Academy of Family Physicians, and the Society of Internal Medicine to ensure an adequate pool of providers in target areas. Key program components include provider recruitment efforts, outreach and education, services by Health Check coordinators, coordination among local agencies, specialized care services, linkage to the WIC program, linkage to the North Carolina immunization registry, and an automated information and notification system.

## Resources

**[\*Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents\*](#)**

National Maternal and Child Health Clearinghouse  
 2070 Chain Bridge Rd, Suite 450  
 Vienna, VA 22182-2536  
 703/821-8955

These guidelines are responsive to the current and emerging health needs of infants, children, adolescents, families, and communities, with a special focus on health promotion and disease prevention. The Bright Futures guidelines present a longitudinal,

personalized, contextual approach to health supervision that complements the efforts of family, school, community, and media. The guidelines are developmentally based and each section contains a theme chapter, "snapshots" of developmental changes at each age, charts of developmental strengths and issues, family preparation for health supervision, interview "trigger" questions, developmental surveillance and milestones, information about immunizations and anticipatory guidance, health supervision summaries, and bibliographies. Appendices include a periodicity schedule, immunization schedules, a body mass index chart, and a general bibliography.

**Head Start Performance Standards**

Head Start Bureau Publications  
PO Box 1182  
Washington, DC 20013  
202/205-8560

This document presents the objectives and performance standards of Head Start in the categories of education services, health services, social services, and parent involvement.

**Recommendations for Preventive Pediatric Health Care**

American Academy of Pediatrics Publications Department  
141 Northwest Point Blvd  
Elk Grove Village, IL 60007-1098  
800/433-9016

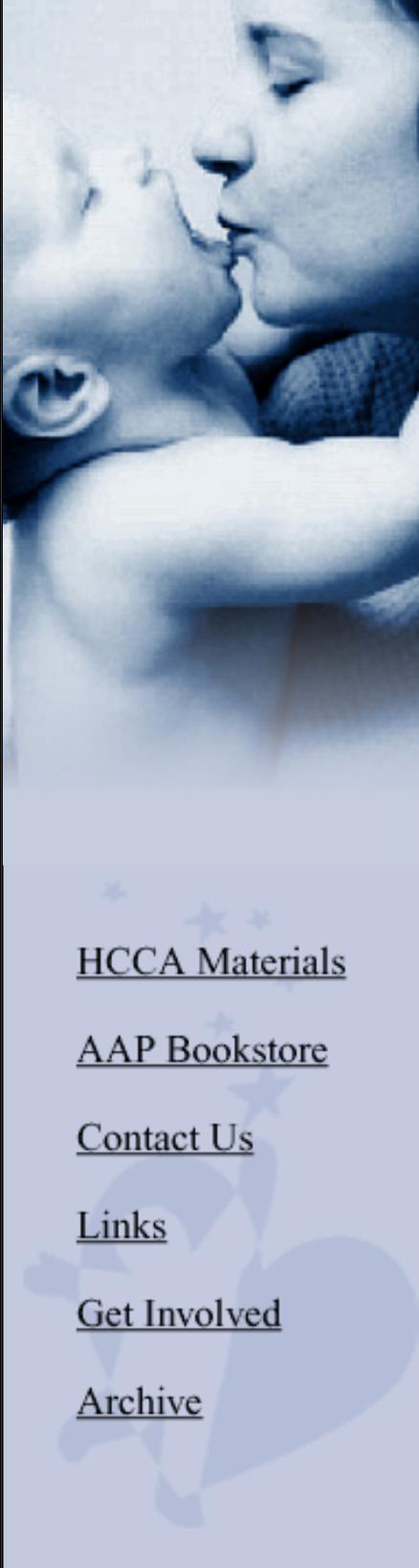
These guidelines are designed for the care of children and represent a consensus by the **Committee on Practice and Ambulatory Medicine** in consultation with national committees and sections of the **American Academy of Pediatrics**.

Read about **Step Five**.

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### Blueprint for Action: Step Five

**Conduct health and safety education and promotion programs for children, families, and child care providers.**

Promoting the safety and healthy growth and development of our children is a responsibility shared by all. Health professionals and child care providers working closely together can share information and training with staff and parents on issues such as immunization, injury prevention, physical fitness, and recognition of illnesses and developmental difficulties. Child care providers, in partnership with others, also can provide information on preventing deaths and injuries caused by car crashes, drownings, fires, suffocation, poisoning, and falls. When children learn early the importance of personal hygiene practices, such as brushing their teeth or washing their hands properly, and safety practices, such as what to do in case of a fire, these lessons can lead to good health and safety habits that last a lifetime.

### Strategies for Implementing Action Step Five

#### First Steps

- Collect and disseminate flyers, posters, and other educational materials on health and safety in child care and on injury prevention to providers and families. Example: Disseminate materials on safe transportation and playground, bicycle, and fire safety by setting up a safety awareness display, resource table, or bulletin board.
- Use area health education centers, nursing schools, colleges, hospitals, medical schools, health education programs, police and fire departments, health fairs, and public libraries as resources to educate providers, families, and children.
- Compile a list of resources that can provide training and or educational materials to families and providers, emphasizing home and facility safety checks.
- Promote awareness of the [US Consumer Safety Product Commission's](#) toll-free number (800-638-2772).
- Include health promotion information in electronic formats through the Internet, computer bulletin boards, and video lending libraries.

#### Use Partnerships to Enhance Systems

- Link with perinatal and maternal and child health organizational networks such as the [Healthy Mothers, Healthy Babies Coalition](#) to provide educational programs and disseminate information published by these groups.
- Coordinate health and safety training with local [child care resource and referral agencies](#).
- "Piggyback" with innovative campaigns such as the Sesame Street lead poisoning campaign and the [National SAFE KIDS Campaign](#).
- Create links among child care programs, families, and child care resource and referral agencies to ensure communication on health and safety issues.

- Use existing health and safety education materials from the local school district to train providers.

### **Examples**

The following are examples of organizations that have successfully implemented Step Five of the [Healthy Child Care America Blueprint for Action](#).

#### **Child Care Connections**

**246 Federal Rd, C25  
Brookfield, CT 06804**

This organization offers training to new and prospective child care providers. Included in the training for family child care providers is a health and safety seminar, funded through a private grant. In Connecticut, family child care providers must complete a State-approved Health and Safety First Aid course before becoming licensed. The child care resource and referral agency links providers with area resources that offer training, such as the Capital Region Education Council. The trainers usually conduct training programs at Red Cross sites throughout the state. Child care resource and referral staff also attend health and safety fairs and distribute health-related information to parents.

#### **Child Care Services**

**209 Milam, Suite C  
Shreveport, LA 71101-7228**

In addition to offering workshops on safety, nutrition, communicable disease, and other health topics, Child Care Services (CCS) has pioneered a partnership with public television to bring education on health, safety, and other child development topics into caregivers' homes. "Child Care 101" is shown at various times during a 2-week period over air space provided free of charge by Louisiana Public Broadcasting (LPB), the state's public television affiliate. The home telecourse, now entering its third year, broadcasts child development video programs produced by the [National Association for the Education of Young Children](#) and the University of Wisconsin. These programs address important health and safety issues, such as washing hands properly, covering electrical outlets, and securing medications and poisonous substances. Working closely with the LPB adult education coordinator, CCS helps plan and promote the 30-minute segments, as well as tape supplemental interviews with local child development experts. It also developed a short test featuring essay and true/false questions that "tele-students" must pass to earn credit toward Child Development Associate requirements. Other partners include the Louisiana Early Childhood Association and Dow Chemical, which have funded some of the videotape rental costs.

#### **Children's Safety Network at the National Center for Education in Maternal and Child Health 2000 15th St North, Suite 701**

**Arlington, VA 22201-2617**

The Children's Safety Network at the [National Center for Education in Maternal and Child Health](#) provides information, technical assistance, training, and materials to state and local health departments (especially Title V maternal and child health programs), policymakers, researchers, and injury prevention practitioners nationwide. Staff provide technical assistance in a broad range of areas including training; data collection; needs assessment; program development, implementation, and evaluation and target specific areas such as domestic violence and traffic injuries. Staff also facilitate networking among injury and violence prevention professionals and others, assist in designing new injury and violence prevention programs and program evaluations, and collaborate with key agencies, policymakers, and practitioners. In addition, CSN staff maintain a

comprehensive and current reference collection of injury and violence prevention resources and educational materials, help plan conferences and make presentations, and develop publications.

### **Resources**

Refer to the following resources when implementing Step Five.

#### **American Red Cross Child Care Course**

The 2-volume American Red Cross Child Care Course, with companion videotapes, contains the following units: preventing childhood injuries, infant and child first aid, preventing infectious diseases, caring for ill children, learning about child development, communicating with children and parents, and recognizing and reporting child abuse. The first 4 units are presented in the volume Health and Safety Units, and the remaining 3 are presented in the volume Child Development Units. The target audience includes caregivers, center directors, babysitters, parents, grandparents, and other family members. Contact your local [American Red Cross](#) Chapter for more information.

#### **Baby Safety Shower How-to Kit**

Office of Information and Public Affairs  
US Consumer Product Safety Commission  
Washington, DC 20207  
800/638-2772

Developed by the [US Consumer Product Safety Commission](#) and Gerber Products, this kit contains a planning guide with step-by-step instructions for hosting a baby safety shower. Contents of the kit include a baby safety checklist (English and Spanish versions), baby safety shower planning guide, sample invitation and certificate of attendance, publicity materials, baby safety game materials, publication ordering information, evaluation form, and other safety materials.

#### **Control of Communicable and Infectious Disease: A Manual for Child Care Providers**

Graduate School of Public Health, San Diego State University  
6505 Alvarado Rd, Suite 205  
San Diego, CA 92120  
619/594-3728

This manual for trainers of child care providers presents information and guidance on how to control communicable and infectious disease in early childhood settings. The manual's 4 sections address health policies, procedures for prevention, infectious diseases that cause illness in child care settings, and references (including a comprehensive review of both infectious and noninfectious diseases).

#### **How to Protect Your Child from Injury**

National SAFE KIDS Campaign  
PO Box 4779  
Monticello, MN 55365  
612/295-4135

This publication offers tips and helpful advice for parents on keeping children safe. The easy-to-read booklet with many colorful illustrations covers traffic injuries, drownings, burns, scalds, poisonings, chokings, and falls. A Spanish-language version is also available.

#### ***Infectious Diseases in Child Care Settings: Information for Directors, Caregivers,***

**and Parents or Guardians**

**Hennepin County Community Health Department**

Health Service Building, Level 3  
525 Portland Ave South  
Minneapolis, MN 55415  
612/348-2741

This manual informs administrators, child care providers, parents, and caregivers about infectious diseases commonly encountered in child care settings. The manual contains guidelines on hygiene to help prevent the spread of diseases and standards for diseases that must be reported by law to state or local health departments in Minnesota. The manual also includes 38 fact sheets with information on recognizing symptoms, understanding how diseases are spread, and preventing or controlling specific diseases, along with sample letters to parents and guardians, information on the Minnesota Immunization Law, a glossary, and a bibliography.

***Keeping Kids Safe: Child Passenger Safety in Out-of-Home Child Care-Resources and Tools***

**National Center for Education in Maternal and Child Health**

2000 15th St North, Suite 701  
Arlington, VA 22201-2617  
703/524-7802

This resource provides up-to-date information on child passenger safety, state and community contacts, and information on relevant materials, such as videocassettes, newsletters, brochures, and posters.

***National SAFE KIDS Campaign Resource Catalog***

**National SAFE KIDS Campaign**

PO Box 4779  
Monticello, MN 55365  
612/295-4135

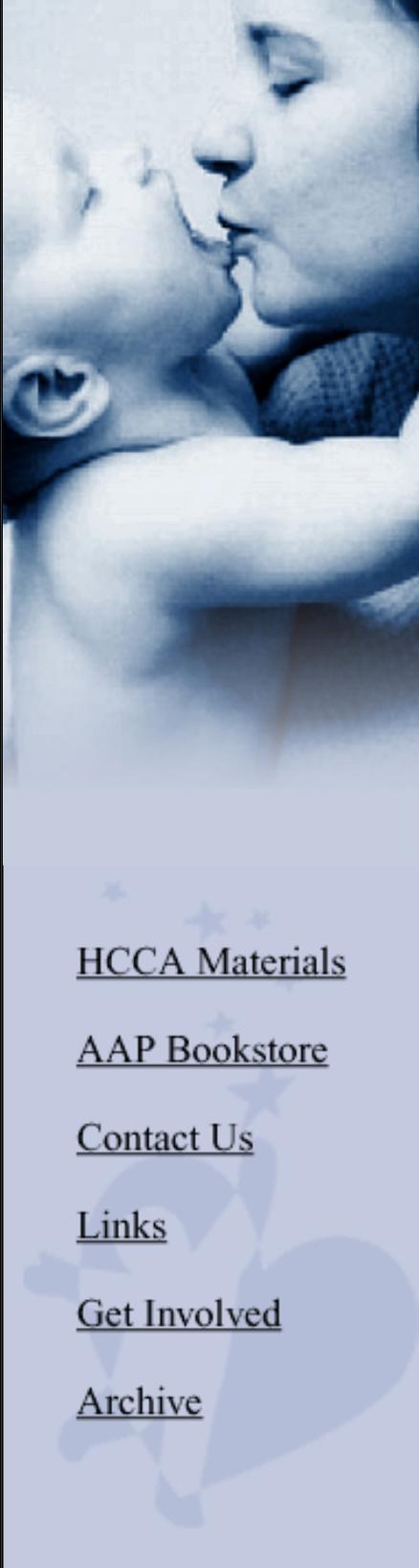
This booklet from the National SAFE KIDS Campaign lists information and resources available on injury prevention, bike helmets and bike safety, public policy, burn prevention and fire safety, and child occupant protection.

Go to **Step Six**.

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### Blueprint for Action: Step Six

#### Strengthen and improve nutrition services in child care.

Nutrition education and health promotion programs help to inform families and providers of the nutritional needs of all young children. When young children share nourishing meals and snacks together, they grow healthier, think more clearly, explore their world eagerly, develop language and social skills, and feel comforted and cared for. The developmental, cultural, and emotional needs of children should be considered in menu planning.

#### Strategies for Implementing Action Step Six

##### First Steps

- Post and distribute information from the [US Department of Agriculture \(USDA\) Food and Nutrition Service](#). Example: Distribute sample menus, information about meal portions, and the food pyramid chart.
- Provide families and child care providers with information on breastfeeding in the child care setting.
- Develop and disseminate a list of persons in the community who are trained in early childhood nutrition and child care nutrition issues.
- Publish nutrition information in local or community newsletters and disseminate through child care programs.
- Educate providers and families on cultural differences in food preferences and nutrition. Example: Disseminate educational materials or plan meals representing diverse cultures.
- Plan and conduct parent education activities such as cooking, picnics, potluck suppers, or shared meals with children in the child care program. Example: Teach menu planning, food safety, nutrition, healthy ways to cook, and healthy grocery shopping.
- Develop special healthy food activities for children.

##### Use Partnerships to Enhance Systems

- Link with local WIC programs, university-based Cooperative Extension Services, local and State health departments, [Head Start programs](#), and the [USDA Child and Adult Care Food Program](#) to provide nutrition consultation and training.
- Contact local public health nutritionists, hospital dietitians, and dietetic associations about providing consultation and training on nutrition education, food service, and health promotion, including food safety and sanitation.
- Encourage local schools to adopt the updated USDA nutrition standards and to participate in its Team Nutrition Program, which provides schools with training and technical assistance.
- Develop partnerships among families, child care programs, and local child care resource and referral agencies to share information about nutrition services in

child care programs.

- Train families and child care providers to monitor children's eating habits and changes in appetite, height, and weight to ensure that they are growing.
- Provide training and information to child care providers about the importance of family-style meals, food sanitation and food safety, and the benefits of providing children with a safe, calm eating environment.

### **Examples**

The following are examples of organizations that have successfully implemented Step Six of the [\*\*\*Healthy Child Care America Blueprint for Action\*\*\*](#).

#### **Capital District Child Care Coordinating Council 91 Broadway Menards, NY 12204**

This organization serves as an intermediary for the [\*\*US Department of Agriculture Child and Adult Care Food Program\*\*](#) to help meet the nutritional needs of children receiving care in 4 upstate New York counties. The Capital District Child Care Coordinating Council (CDCCCC) entered into a partnership that allows child care providers, early childhood educators, home economists, school food service directors, and dietitians to enjoy a 1-day training program, called Feeding Young Children in Group Settings. The goal of the course, which also was sponsored by Albany County Cornell Cooperative Extension and the New York State Department of Health, was to teach participants that feeding young children in group settings involves more than just "getting food into them." Objectives included helping parents and caregivers trust children's instincts and eating skills, learning how to teach nutrition to children through activities and storytelling, reviewing guidelines for food safety in child care settings, and learning to prepare foods from different cultures.

#### **Healthy Start ... Food to Grow On Food Marketing Institute 800 Connecticut Ave NW Washington, DC 20006-2701**

This information and education campaign for children promotes healthful food choices and eating habits as part of an overall healthful lifestyle. Developed by the [\*\*American Academy of Pediatrics\*\*](#) (AAP), the [\*\*American Dietetic Association\*\*](#) (ADA), and the Food Marketing Institute, the program targets families with young children ages 2 to 6, and is carried out by pediatricians and dietitians, as well as through supermarkets. Each of the organizations is involved in campaign activities. The [\*\*Food Marketing Institute\*\*](#) distributes a [\*\*Healthy Start Supermarket Kit\*\*](#) containing consumer nutrition brochures, quarterly newsletters for parents, a parent/child activity booklet, and a supermarket implementation guide. In addition, the AAP offers consumer nutrition brochures (available for purchase) to pediatricians, and the ADA offers bulk copies of nutrition brochures to registered dietitians and other health professionals. The ADA also offers the Healthy Start Supermarket Kit for purchase.

### **Resources**

Refer to the following resources when implementing Step Six.

#### **[\*\*\*Arizona 5 a Day for Better Health: Fruit and Vegetable Activity Book for Child Care Programs\*\*\*](#)**

Arizona Department of Health Services, Office of Nutrition Services  
740 West Adams St

Phoenix, AZ 85007  
602/542-1886

This book suggests ways of increasing the number of servings of fruits and vegetables for children and adults. It provides information on nutrients in fruits and vegetables and offers ideas on menu planning as well as purchasing, preparing, and serving fruits and vegetables. Also included are recipes and hands-on activities to help children learn about fruits and vegetables. The guide is designed for child care providers in Arizona but can easily be adapted for use in classrooms and homes in any state. A Spanish-language version was published in 1994.

***Breastfed Babies Welcome Here***

**US Department of Agriculture, Food and Nutrition Service**

3101 Park Center Dr  
Alexandria, VA 22302  
703/305-2620

This information package is designed for child care providers who care for breastfed babies. It contains a guide for providers, a brochure to give to mothers, and a poster. The provider's guide describes how to care for breastfed babies and how to encourage mothers to breastfeed and also includes information on storing and handling breastmilk. The mother's guide reviews the benefits of breastfeeding and offers information on returning to work or school, preparing the baby for transition to child care, and helping the provider care for the baby. The poster reminds parents that the provider welcomes breastfed babies.

***Celebrating Diversity: Approaching Families through Their Food***

**National Maternal and Child Health Clearinghouse**

2070 Chain Bridge Rd, Suite 450  
Vienna, VA 22182-2536  
703/821-8955

This illustrated guide presents ideas and suggestions for communicating nutrition education messages to persons from diverse cultural backgrounds. Early chapters discuss how to use food to create common ground, how food patterns change over time, and how people make food choices and later chapters address communicating with clients and families, working within the community, and meeting the challenge of the multilingual environment. The guide was supported by the **Maternal and Child Health Bureau, US Department of Health and Human Services**, and the **US Department of Agriculture Food and Nutrition Service**.

***Infant Nutrition and Feeding: A Reference Handbook for Nutrition and Health***

Counselors in the WIC and CSFP Programs

**US Department of Agriculture, Food and Nutrition Service**

3101 Park Center Dr, Room 607  
Alexandria, VA 22302  
703/305-2554

This manual is designed for staff who provide nutrition education and counseling to parents and guardians of full-term, at-risk infants who participate in WIC programs or in the Commodity Supplemental Food Program (CSFP). The manual includes basic information on the nutritional needs of infants, the development of feeding skills, breastfeeding, formula feeding, introduction of solid foods, infant feeding practices, food selection, sanitary food preparation and storage, oral health, vegetarian nutrition, and common gastrointestinal problems. Teaching aids include a summary of key points,

several appendices, and a bibliography.

***Making Food Healthy for Children: How to Meet the National Health and Safety Performance Standards: Guidelines for Out-Of-Home Child Care Programs National Maternal and Child Health Clearinghouse***

2070 Chain Bridge Rd, Suite 450  
Vienna, VA 22182-2536  
703/821-8955

This book serves as a guide for providing children with safe and healthy food and meeting the nutrition standards in ***Caring for Our Children: National Health and Safety Performance Standards: Guidelines for Out-of-Home Child Care Programs.***

The guide discusses topics such as keeping food clean, using foods that are safe to eat, promoting pleasant meals and snacks, planning to better meet children's food needs, and helping children and families learn about food. The guide also includes community resources, materials for parents, and resources for use in child care settings, such as menu information, infant feeding policies, and recommendations for food service staffing.

***Nutrition and Meal Planning in Child-Care Programs: A Practical Guide***

American Dietetic Association  
PO Box 4729, Department 0195  
Chicago, IL 60680-4729  
800/745-0775

This manual helps child care providers plan nutritious meals for children at child care centers or family child care homes and is based on the daily food and serving recommendations of the ***US Department of Agriculture***. Nutritional requirements of infants and children, sample menus for child care centers, and a list of resource agencies also are included.

***Nutrition Education Curriculum: Parent Nutrition Kit***

Head Start Bureau Publications  
PO Box 1182  
Washington, DC 20013  
202/205-8560

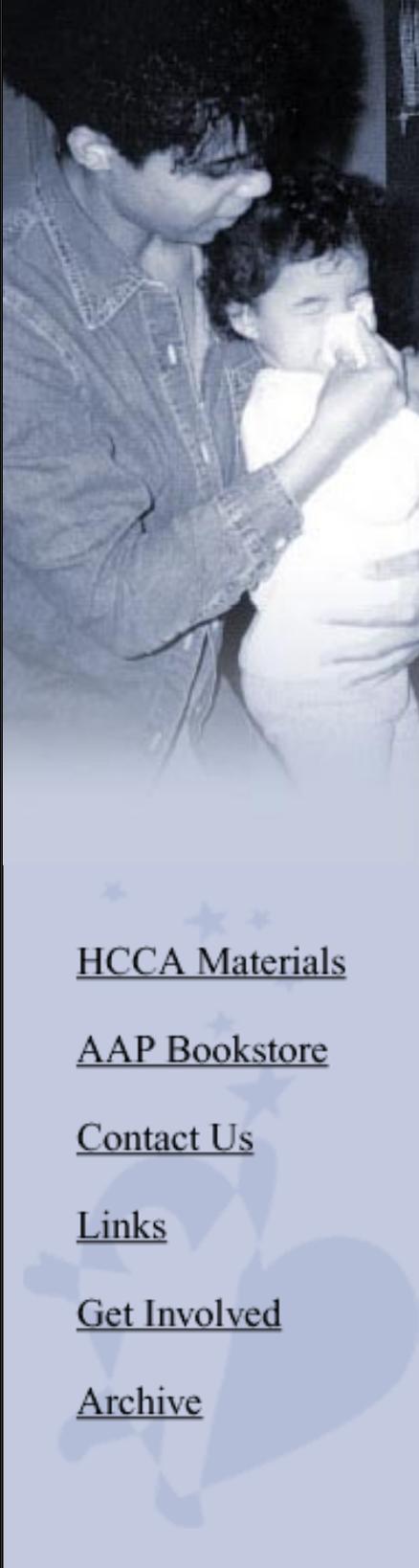
Developed as part of the *Head Start Nutrition Education Curriculum*, this teaching guide is designed to actively involve parents in educating their children about healthy nutrition. The kit provides display ideas, parent newsletters that can be reproduced, and suggestions for planning successful parent workshops.

Go to ***Step Seven***.

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### Blueprint for Action: Step Seven

**Provide training and ongoing consultation to child care providers and families in the areas of social and emotional health.**

Child care programs can promote healthy social and emotional development by informing and guiding child care providers and families in ways that encourage sensitive and age-appropriate care. They also can contribute to early identification and intervention of children who reflect the ill effects of exposure to violence, substance abuse, child abuse and neglect, or other emotional and behavioral problems. It is important to make more mental health services available to child care communities so that families and child care providers can take advantage of opportunities to enhance the social and emotional health of children.

### Strategies for Implementing Action Step Seven

#### First Steps

- Create links between the child care community and local mental health providers who can provide consultation, referrals, and resources.
- Disseminate information on available community resources and consultants in child development, mental health promotion, and intervention services. Example: Make a list of school social workers available.
- Offer families and child care providers training in stress management techniques.
- Schedule times when child care providers are available for parent-provider meetings; provide a drop box for parents' questions and comments.
- Conduct workshops that address child development, parent communication, violence prevention, and support for children who have been exposed to violence.
- Publish phone numbers and contact information for local agencies responsible for receiving reports of child abuse and neglect.
- Explore mental health services that could be provided within the child care setting, such as play and art therapy or referral services.

#### Use Partnerships to Enhance Systems

- Train providers and families to foster children's self-esteem and to recognize early social and emotional problems.
- Provide information to families, child care providers, and health care professionals about key social and emotional issues and usual levels of understanding and capabilities at different stages of child development.
- Train providers and families in using developmentally appropriate discipline.
- Establish ongoing communication between social service programs and child care providers.
- Link local family preservation and support services with child care providers.
- Provide training for child care providers, after-school providers, and health care

professionals in the detection and prevention of child abuse and neglect.

### **Examples**

The following are examples of organizations that have successfully implemented Step Seven of the [\*Healthy Child Care America Blueprint for Action\*](#).

#### **Quality Child Care and Mental Health Collaborative, Children's Council of San Francisco**

**One Second St, Fourth Floor  
San Francisco, CA 94105-3407**

This San Francisco-based alliance among 18 diverse agencies (4 mental health and 14 child care programs) works to promote the mental health of more than 2,500 children and families of low-income status. Supported through funds generated by a set-aside in the Bay City's property tax, the alliance provides preventive and direct mental health services to child care programs throughout the city, with members of the collaborative receiving first priority. Services available to caregivers of young children with emotional and behavioral problems include program consultation, individual play therapy, therapeutic play groups, case consultation, and crisis counseling. Services are offered to both child care centers and family child care programs and are tailored to meet their ethnic, linguistic, and cultural needs. The collaborative provides direct consultation to parents and providers and offers workshops for staff in the member programs. Workshop sessions address issues such as recognizing the impact of family violence on young children, working with drug-exposed children, and dealing with difficult parents. The group plans to expand training to reach parents through a special Saturday workshop on emotional and behavioral problems experienced by young children.

#### **Touchpoints Project**

**Child Development Unit, Children's Hospital  
1295 Boylston St  
Boston, MA 02215**

The Touchpoints Project delivers a training model for practitioners, emphasizing the building of supportive alliances among parents and professionals to address key points in the development of young children. The model is an outgrowth of the 1992 Touchpoints book written by T. Berry Brazelton, MD, as well as research at Children's Hospital in Boston. The Touchpoints model provides a form of outreach through which multidisciplinary practitioners can engage parents in important, predictable phases of their baby's development. The Touchpoints model stresses preventive health through development of relationships between parents and providers; acknowledges that developing and maintaining relationships is critical to appreciating cultural, religious, and societal family dynamics; and encourages the practitioner to focus on strengths in individuals and families. Touchpoints is not a stand-alone model; it is intended to be integrated into ongoing pediatric, early childhood, and family intervention programs.

**Child Care Mental Health Consultation Project  
Psychology Department, Montgomery College  
51 Mannakee St  
Rockville, MD 20850**

For more than 4 years, this volunteer project has provided mental health consultation services to child care programs in the metropolitan Washington area. Mental health professionals, psychologists, psychiatric social workers, analysts, and psychiatrists meet monthly with child care staff and directors to discuss developmental concerns, communication with families, and staff issues and to identify serious behaviors of young children. Monthly sessions are characterized by solving problems and developing

strategies, recalling patterns of past behaviors, and learning more about how children develop. The core committee of volunteers, which includes center directors, early childhood education specialists, and mental health professionals, is responsible for selection of centers, evaluations, and recruitment of consultants. One key element in the success of the consultation has been the crucial role of the child care director. Although participation is voluntary, the quality of commitment shown by the child care director has been the single best predictor of ongoing, effective consultation.

### **Resources**

Refer to the following resources when implementing Step Seven.

#### **Touchpoints**

Touchpoints Project  
Child Development Unit, Children's Hospital  
1295 Boylston St, Suite 320  
Boston, MA 02215  
800/447-2226

This book examines the patterns of growth and development in the emotions and behavior of children from infancy to 3 years of age. A broad range of developmental challenges are discussed, including allergies, bedwetting, crying, developmental disabilities, discipline, divorce, feeding problems, hospitalization and illness, hyperactivity, loss and grief, lying and related behaviors (such as stealing and cheating), prematurity, school readiness, self-esteem, separation, sibling rivalry, sleep problems, speech and hearing problems, stomachaches, headaches, and toilet training. The final section discusses allies in development, such as parents, grandparents, friends, caregivers, and the child's doctor.

#### **Caring for Infants and Toddlers in Groups: Developmentally Appropriate Practice**

Zero to Three  
2000 14th St North, Suite 380  
Arlington, VA 22201-2500  
800/899-4301

This guide demonstrates how to build strong relationships among children and families and families and caregivers, as well as among children and adults in the child care setting. The guide includes illustrations of appropriate and inappropriate practice, developmental milestones for babies and toddlers, and resources for further learning.

#### **Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood**

Zero to Three  
2000 14th St North, Suite 380  
Arlington, VA 22201-2500  
800/899-4301

This book presents a comprehensive framework for diagnosing emotional and developmental problems in children ages birth to 3 years. The publication is a product of Zero To Three's multidisciplinary Diagnostic Classification Task Force.

#### **Organizations Concerned with Child Abuse and Neglect and Family Violence Issues**

National Clearinghouse on Child Abuse and Neglect Information  
330 C St SW  
Washington, DC 20447

Phone: 800/FYI-3366

This directory of national organizations concerned with child maltreatment lists the services, products, and publications of these organizations along with descriptions of their programs.

***Character Development: Encouraging Self-Esteem and Self-Discipline in Infants, Toddlers, and Two-Year-Olds***

**National Association for the Education of Young Children**

1509 16th St NW  
Washington, DC 20036-1426  
800/ 424-2460

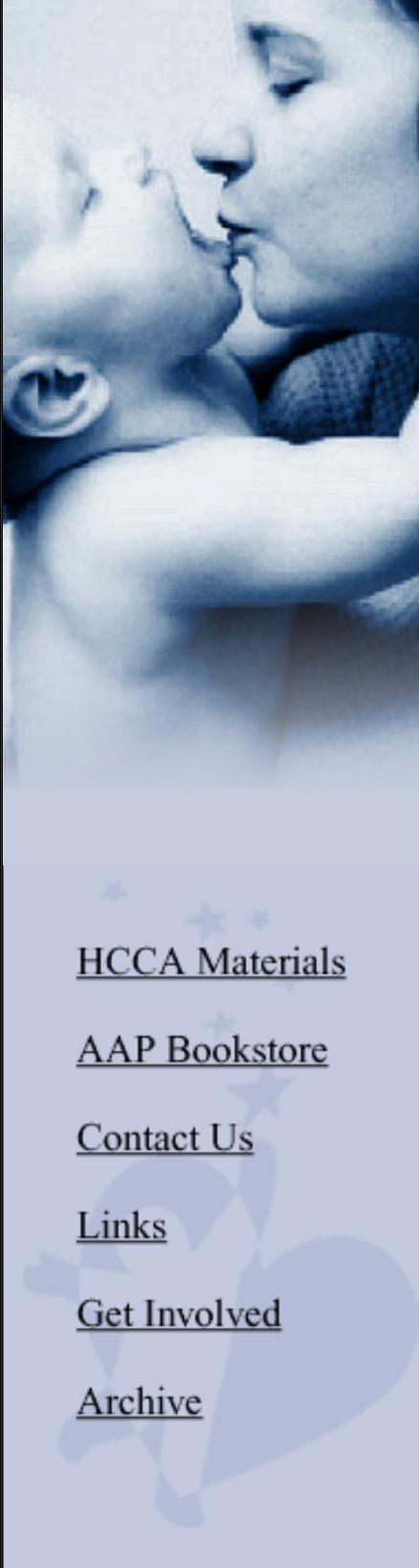
This book of essays describes ways in which child care providers and early childhood educators can provide high-quality child care in center-based or family child care settings. Topics include the development of self-esteem and character in babies and toddlers; goals for child care; the role of an optimal home in building character; toddlers' sense of self; respect; language; fun; discipline; and observable skills and behaviors in young children who are developing healthy character, self-esteem, and self-discipline.

Review **Step Eight**.

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### Blueprint for Action: Step Eight

#### Expand and provide ongoing support to child care providers and families caring for children with special health care needs.

Passage of the [Americans with Disabilities Act](#) (1992) has significantly strengthened access to child care for children with special health care needs. Child care providers and families need ongoing training, technical assistance, mentoring, and consultation to care for children with special health care needs. This will ensure that they are connected to a medical home that provides consistent, compassionate, and coordinated services that value the diversity of families and acknowledge the family's expertise in determining the care of their children. Providers and families also need information and resources about how the Americans with Disabilities Act will impact child care programs in areas such as inclusion of children with special needs in programs, eligibility for services, and removal of barriers in facilities.

#### Strategies for Implementing Action Step Eight

##### First Steps

- Identify child care providers who provide services for children with special health care needs.
- Collect and disseminate information on requirements of the Americans with Disabilities Act within the context of child care.
- Invite representatives from programs serving children with special needs to meet with families and providers.
- Encourage parents of children with disabilities to serve as mentors for child care providers.
- Distribute information on available funding and child care resources to families who have children with special health care needs. In addition, distribute funding and resource information to organizations and advocacy groups that support the needs of these families.
- Provide child care programs with materials on the physical safety requirements of the facility, such as the required placement of ramps and railings in the child care setting.
- Set up ongoing training and support for family child care providers serving [children with special health care needs](#).

##### Use Partnerships to Enhance Systems

- Provide child care providers with training in child development and inclusion of children with special health care needs.
- Create partnerships among providers, families, and resource and referral agencies to share resources and promote the inclusion of children with special health care needs in programs.
- Include child care programs as key participants in the development of the [Individual Family Service Plan](#) (IFSP).

- Contact national advocacy organizations for families of children with special health care needs about opportunities for partnerships.
- Establish linkages between child care providers, Part H, University Affiliated Programs (UAPs), and other organizations such as the [YMCA](#) to provide support, information, and resources.
- Promote awareness of and disseminate information on local services for children with special health care needs.
- Ensure that a representative from the child care community serves on the state and local Interagency Coordinating Council for children with special health care needs.

### Examples

The following are examples of organizations that have successfully implemented Step Seven of the [Healthy Child Care America Blueprint for Action](#).

**Arizona Self Study Project, Arizona Department of Health Services  
Early Childhood Consultants  
OWCH  
411 24th St  
Phoenix, AZ 85008**

This project is a collaborative effort to improve the quality of care and education for all young children in Arizona's early childhood programs. Fifty early childhood programs are selected statewide to participate in the Arizona Self Study Project (ASSP) each year. The project provides consultation, technical assistance, and self-study materials developed by the National Academy of Early Childhood Programs (NAECP) to programs selected by sponsoring agencies. Each program uses the ASSP preassessment tool and the self-study materials to evaluate strengths and weaknesses in its classrooms, curriculum, parent involvement efforts, and administration, with reference to NAECP accreditation criteria and the ASSP Early Childhood Special Needs Component developed by the Arizona Department of Education. Programs work at their own pace to initiate changes through telephone and onsite assistance from the self-study coordinator and through training and technical assistance available through ASSP. The project is designed to (1) improve the quality of programs by focusing on developmentally appropriate practice, (2) integrate quality early childhood and special education methods into a model that meets the needs of all children, (3) expose teachers trained in special education to developmentally appropriate early childhood practices, and (4) expose teachers trained in early childhood to developmentally appropriate practices in special education.

**Meeting the Challenge Program, Child Care Connections  
1607 West Jefferson  
Boise, ID 83704-8640**

Through its Meeting the Challenge program, Child Care Connections (CCC), a child care resource and referral agency based in Idaho, is helping 3 centers and 5 family child care homes overcome the concerns and lack of training that often impede providers from including children with medically fragile conditions or disabilities in their child care settings. Incorporating the tools and methods developed by the University of Montana Child Outreach Project, Meeting the Challenge provides comprehensive training, technical assistance, and support to child care providers who wish to promote a safe and welcoming atmosphere for children with special health care needs. The program provides access to a toy and equipment lending library and sponsors workshops on topics such as arrangement of space to accommodate special needs, Individualized Education Plan (IEP) meetings, and the impact of the Americans with Disabilities Act . The program also provides each site with a consultant who conducts onsite technical

assistance and helps caregivers perform a self-assessment to evaluate their capacity to welcome children with special health care needs. Other unique components include an allowance of 3 hours per program for a trained, licensed substitute so that staff can attend an IEP meeting or observe other successful programs and up to \$200 per participating program to meeting program accreditation by the [National Association for the Education of Young Children](#) or the [National Association for Family Child Care](#). Funding for the initiative comes from Idaho Children's Emergency Funds. The CCC has become a model program for the rest of the state, and CCC staff are analyzing a provider satisfaction survey to help evaluate the program's success and plan for the future.

## Resources

Refer to the following resources when implementing Step Six.

***All Kids Count: Child Care and the Americans with Disabilities Act***  
**ARC National Headquarters**

500 E Border, Suite 300  
 Arlington, TX 76010  
 817/261-6003

This guide informs the child care profession about the law and familiarizes child care providers with the importance and value of including all children in regular child care settings.

***Child Care and the Americans with Disabilities Act: A Handbook for Inclusive Programs***

**Brookes Publishing Company**

PO Box 10624  
 Baltimore, MD 21285-0624  
 410/337-9580

This book identifies legal issues, suggests some cost-effective solutions, and presents a variety of materials for assistance in complying with the Americans with Disabilities Act. It also includes case scenarios, action plans, worksheets and checklists, comprehensive resource lists, and a glossary.

***More Alike than Different: Including Children with Special Needs in School Age Child Care Settings-A Staff Training Manual***

**New Jersey Department of Human Services**

Trenton, NJ 08625-0700

This training manual is designed to help bring more understanding and resources to the challenge of including children with special health care needs in school-age child care. It is designed as a series of freestanding workshops, each containing the necessary instructions for the trainer and all necessary handouts to be copied for workshop participants. The workshops address the following topics: introduction to inclusive school-age child care; assessment of personal feelings about children with special health care needs; empowerment of children and caregivers through positive, appropriate language; families of children with special needs; developmental characteristics of children with special health care needs; ways to adapt activities and environments for inclusive school-age child care; methods of communicating expectations to children; and resources for inclusive school-age child care.

***A Place for Me: Including Children with Special Needs in Early Care and***

**Education Settings**

**National Association for the Education of Young Children**

1509 16th St NW  
Washington, DC 20036-1426  
800/424-2460

This book reviews ways in which child care providers and early educators can include children with special health care needs in their programs. It provides a general description of these children's needs, explains the rationale for including them in the classroom, and suggests ways for teachers to examine and modify their past perceptions. The book reviews various procedures to ensure a safe physical environment and discusses ways of working with children with special health care needs. Information is provided relating to working with parents of these children and with other agencies. Resource lists include organizations, suppliers of relevant publications, a bibliography for teachers, and a bibliography of materials appropriate for children.

***Starting Point: How to Open Your Program (and Your Heart) to Children with Special Health Needs***

**National Maternal and Child Health Clearinghouse**

2070 Chain Bridge Rd, Suite 450  
Vienna, VA 22182-2536  
703/821-8955

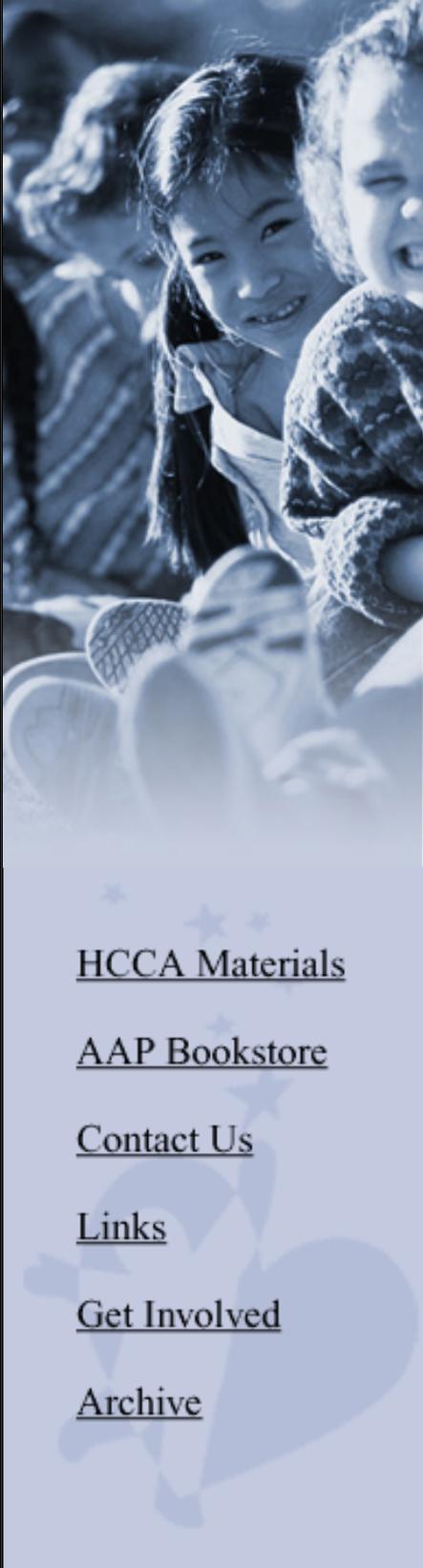
This handbook is designed as an introductory guide for child care providers who intend to include children with special health care needs in their programs. It offers practical information on the issues involved in caring for children with special health care needs (including techniques for working with children who are physically challenged), developing culturally competent services, ensuring confidentiality, preventing childhood injuries, taking health precautions to prevent the spread of communicable diseases, providing recreation and play activities, and dealing with challenging behaviors. The handbook includes a developmental play chart and a sample child care registration questionnaire. A Spanish-language version, *Punto de Partida*, also is available.

Review **Step Nine**.

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### Blueprint for Action: Step Nine

#### Use child care health consultants to help develop and maintain healthy child care.

Health professionals can play a vital role in the training of child care staff, as well as in the licensing, monitoring, and evaluation of child care facilities. Child care health consultants can provide guidance and assistance on a range of issues affecting the health and safety of children. These can be as fundamental as helping staff determine ideal placement of eating areas and diaper changing tables in facilities, or as technical as performing onsite assessments of hygiene and safety practices and assisting in the development of licensing standards. Trained child care providers who are informed about preventive health care and safety practices and resources can promote the healthy development of children and reduce illness and injury in child care settings.

#### Strategies for Implementing Action Step Nine

##### First Steps

- Convene a meeting of child care providers and health professionals to discuss the different roles of health care consultants in child care programs.
- Disseminate names and phone numbers of contacts for local health departments and licensing agencies.
- Disseminate information on child care programs that successfully use health consultants.
- Use existing training materials from organizations such as the [American Academy of Pediatrics](#) and the [National Association for the Education of Young Children](#) to conduct training programs.
- Provide a state toll-free phone number for information about federally funded (Title V) services in maternal and child health and services for children with special health care needs.
- Identify health professionals who have an interest in health and safety in child care in state or local communities.

#### Use Partnerships to Enhance Systems

- Offer training in child care issues for community health care providers.
- Involve health professionals in the development of licensing regulations. Example: Contact health providers for consultation when writing regulations addressing health in the child care program.
- Establish health and safety advisory boards (state, county, or local level) composed of health professionals, child care providers, and other representatives.
- Contact local chapters of national health professional organizations to identify and/or create and coordinate training opportunities for child care providers.
- Establish a model program such as the [Pennsylvania Early Childhood Education Linkage System](#) to link health consultants with child care programs.

## Examples

The following are examples of organizations that have successfully implemented Step Nine of the [\*Healthy Child Care America Blueprint for Action\*](#).

### Early Childhood Education Linkage System, Pennsylvania Chapter of the American Academy of Pediatrics

**Rosemont Business Campus Building 2, Suite 307  
919 Conestoga Rd  
Rosemont, PA 19010**

With so many young children in child care facilities, control of injuries and infectious disease is crucial. Early childhood settings also offer many opportunities for health promotion. Since January 1990, the Pennsylvania Chapter of the American Academy of Pediatrics (AAP) has operated the Early Childhood Education Linkage System (ECELS) project. This project provides health professional consultation, training, and technical assistance to improve early childhood education programs in Pennsylvania. To plan and carry out the work of ECELS, the Pennsylvania Chapter of the AAP works with government agencies, early childhood educators, and health professionals. The Early Childhood Education Linkage System serves an estimated 12,000 programs with more than 275,000 children. The programs include child care centers, family child care homes (both large and small capacities), and nursery schools. To improve the quality of group care, ECELS provides the following basic services: (1) linkages between health professionals and programs that care for young children in groups, (2) telephone advice about health and safety issues for early childhood professionals, (3) a free lending library of audiovisual materials (4) the quarterly newsletter, Health Link, which is distributed to all identified Pennsylvania early childhood care and education programs and ECELS health consultants, and (5) arrangements for health and safety training for caregivers, licensing staff, and health consultants for early childhood programs.

### **Healthline, California Child Care Health Program 1212 Broadway, Suite 904 Oakland, CA 94612**

The Healthline provides health and safety information to child care providers, the families they serve, and related professionals. Staff respond to inquiries about infectious disease, health promotion, lead poisoning prevention, health and safety housing requirements, and many other issues. The [\*\*California Child Care Program\*\*](#) has several other projects including the Child Care Health and Safety Consultation Service, which provides health and safety assessment, training, information, and resources to child care centers in San Francisco.

### **Minneapolis Department of Health, Health Promotion Nursing Services 2021 E Hennepin, Suite 230 Minneapolis, MN 55413**

In an extraordinary display of public commitment to promoting healthy child care, the Minneapolis Department of Health employs 9 nurses to provide consultation and training to more than 600 local licensed family child care homes and center-based child care programs. The child care team also includes sanitarians, health educators, nutritionists, and a dentist. To ensure that their expertise is effectively used, the Greater Minneapolis Day Care Association (the local child care resource and referral agency) is a major partner in the program. Funded through the Health Department's budget since the mid-1970s, the program evolved through a steady stream of requests from child care providers who felt entitled to the same level of public health consultation received by the school system. Today, each monthly visit from a nurse ensures that caregivers and

directors receive immediate responses to their health questions and individualized consultation on issues such as appropriate diapering and sanitation procedures, ensuring safe playground and indoor equipment, and proper handling of medications. Family child care homes receive the service free of charge, and centers pay a modest fee of \$180 per year.

**Satilla Child Care Resource and Referral Agency, Inc**  
**201 State St, Suite 200**  
**Waycross, GA 31501-3552**

In 1995, the Satilla Child Care Resource and Referral Agency (SCCRRRA) held four 2-hour sessions on controlling disease and detecting illness in child care settings. In addition to presenting agency training programs, SCCRRRA informs providers of other training opportunities through a newsletter and monthly telephone updates. Health and safety aspects are addressed during SCCRRRA training sessions, presented in the conference programs, and included in the session "How to Start an FDC Home." The SCCRRRA also has conducted onsite training sessions for child care centers and presented a 4-hour training program that included health and safety information for unregulated providers (relative care) for the Department of Family and Children's Services. Through a lending library, SCCRRRA makes available videocassettes to providers on topics such as sanitation, disease control, and safety.

### **Resources**

Refer to the following resources when implementing Step Nine.

#### **The ABCs of Clean: A Handwashing and Cleanliness Education Program** [The Soap and Detergent Association](#)

475 Park Ave South  
 New York, NY 10016  
 212/725-1262

The ABCs of Clean program strives to educate preschool children, their teachers, and parents about handwashing and surface cleaning to help reduce the spread of infectious disease. Children's materials include a storybook, 2 posters, matching game, take-home story, and an audiocassette featuring 3 songs and a story. Materials for teachers and parents include a videotape (1/2-inch VHS), teacher's guide, and take-home material for parents. Developed in conjunction with the [Head Start Bureau](#) and the US Public Health Service, the program was designed for use in Head Start and preschool classrooms, in-home training, and training for child care workers. The program is now being used by health professionals, educators, home economists, child care workers, and others interested in the health of young children and families.

#### **Center-Based Early Childhood Program: Early Childhood Education Linkage System Evaluation Instrument**

##### [National Center for Education in Maternal and Child Health](#)

2000 15th St North, Suite 701  
 Arlington VA 22201-2617  
 703/524-7802

Used by the [Pennsylvania Chapter of the American Academy of Pediatrics](#) to gather data on its Early Childhood Linkage System, this questionnaire assesses a child care center's health and safety program and identifies problems for correction. Included are questions about staff turnover and illness, parent relations and communication, nutrition, first aid, sanitation and poisoning, transportation, care of ill children, water safety, and recordkeeping, as well as a place for documenting information from a physical inspection of the site. This questionnaire is part of the Early Childhood Health Promotion

Project's final report on ECELS.

***Tools for Effective Training***

California Child Care Health Project

**Graduate School of Public Health, San Diego State University**

6505 Alvarado Rd, Suite 205

San Diego, CA 92120

619/594-3728

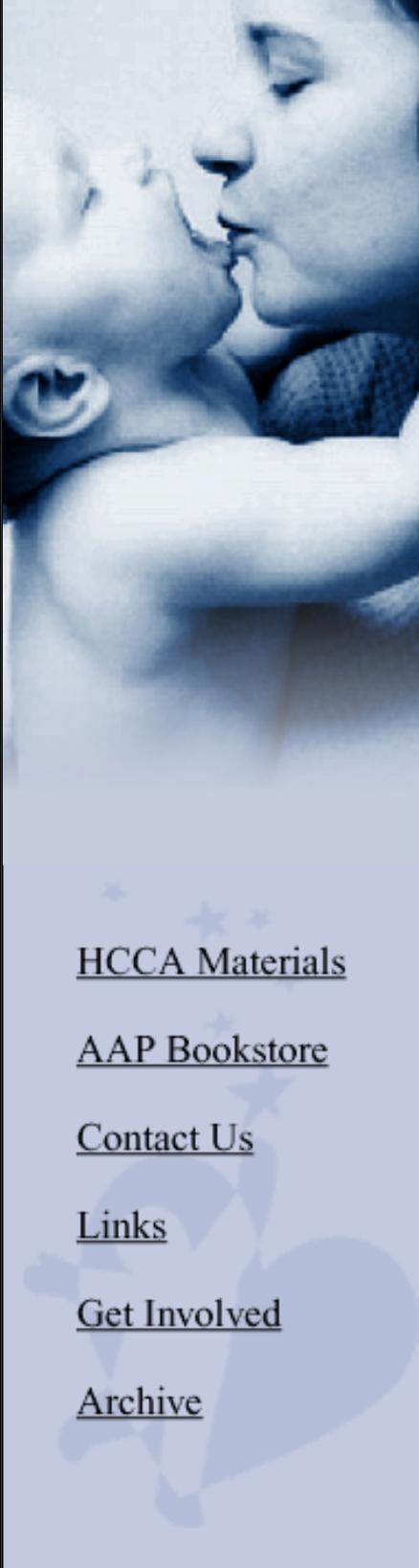
Developed by the California Child Care Health Program and San Diego County Consortium, this package of training tools is directed toward instructors who offer health and safety education for child care providers. The trainer is challenged to carefully plan and present the workshop with the goal of maximum practical application for each participant. Featured topics include preparing for sessions, presenting materials effectively, and closing a session. Practical teaching tips also are included with excerpts from the California Child Care Health Project Orientation Manual.

Go to **Step Ten**.

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### Blueprint for Action: Step Ten

**Assess and promote the health, training, and work environment of child care providers.**

A healthy child care setting and continuing education in the health and safety of children and staff can help providers in meeting day-to-day challenges. Avoiding back injury, reducing risk of infectious disease, and scheduling adequate rest breaks can enhance job satisfaction and the overall well-being of child care providers. Healthy staff provide the best care for children.

### Strategies for Implementing Action Step Ten

#### First Steps

- Train child care providers in methods of reducing infectious disease. Example: Practice proper techniques for handwashing and diaper disposal.
- Disseminate information to child care providers on recommended working conditions (eg, child:staff ratios, breaks).
- Provide information to staff on the hazards of smoking and on local smoking cessation programs.
- Provide information to pregnant child care providers about recommendations for working in child care programs during pregnancy.
- Provide information to child care providers about occupational hazards and measures to reduce these hazards. Example: Train providers on using the proper posture when lifting and carrying children to reduce leg and back injuries.
- Incorporate aerobic activities in the child care curriculum. For example, schedule 15 to 20 minutes of aerobic/fitness activities for providers and children each day.
- Provide adult-size furniture for child care providers.

#### Use Partnerships to Enhance Systems

- Train providers to control infection by treating all human blood and certain body fluids as if known to be infectious for the human immunodeficiency virus, hepatitis B virus, and other blood-borne pathogens (Universal Precautions).
- Provide information to health professionals about health challenges in child care settings. Example: Inform providers about necessary health screenings and the health hazards to which they are exposed.
- Offer low-cost safety training programs for child care providers.
- Develop personnel policies that address paid sick leave, vacation, and health benefits for child care providers.
- Offer stress management workshops and training materials for child care providers, or provide information on such resources in your community.
- Recognize the contribution of child care providers to the community. Example: Produce a promotional newsletter or articles, plan a "recognition day."
- Work to ensure mentoring and adequate compensation for child care providers.

## Examples

The following are examples of organizations that have successfully implemented Step Ten of the [\*Healthy Child Care America Blueprint for Action\*](#).

### California Child Care Health Program

**1212 Broadway, Suite 904  
Oakland, CA 94612**

The California Child Care Health Program (CCHP) is program provides outreach and education on child care and safety and offers a toll-free telephone number with information on all aspects of staff health. The public health nurse, mental health consultant, and physician on staff answer and research questions. The CCHP also offers training to the child care community on "Hot Topics in Health and Safety," informing those who work with young children about subjects such as adult immunization needs, safeguards for those of childbearing age, procedures that help prevent back and other injuries, modeling of appropriate preventive health practices, and guidelines for seeking substitute staff for health reasons. The CCHP believes that staff health issues must be incorporated in all health and safety outreach and education. Without healthy staff, a child care setting cannot provide a healthy program for children and their families.

### Seattle-King County Department of Public Health

**2124 Fourth Ave  
Seattle, WA 98121**

This public health department offers a wide range of services for licensed child care facilities in Seattle and King County. The goal of the Child Care Public Health Program is to protect and promote the health of children by educating children, parents, and staff about prevention of injuries and disease and how to foster a healthy environment for positive growth and development. Health education programs are one of the services offered by the Department of Public Health and the City Child Care Health Team. These programs include topics such as stress management for child care providers, back injury prevention, and strategies for promoting healthy self-esteem in adults. The burnout prevention and stress management program consists of recognizing symptoms of burnout, nurturing the individual, and advocating for good health. The back injury prevention program focuses on preventing injury by exercising and modifying the environment. The program has adapted an occupational safety slide show, applying the lessons to early childhood settings in which staff constantly bend, lift, and sit in small chairs or on the floor. The self-esteem promotion program presents key factors that influence self-esteem, with group discussion about how self-esteem affects the ability of adults to relate positively to children.

## Resources

Refer to the following resources when implementing Step Ten.

### ***Balancing Work and Caregiving for Children, Adults and Elders***

#### Sage Publications

PO Box 5084  
Newbury Park, CA 91359-9924  
805/499-9774

This book explores how employees with caregiver roles juggle the responsibilities of work and family. The authors consider multiple factors contributing to stress and work-related outcomes (such as absenteeism, review policies, benefits, and services) from the perspectives of the employee and the employer; analyze methods for assessing employee needs; and provide recommendations for national and local policies.

***Breaking the Link: A National Forum on Child Care Compensation***  
**National Center for the Early Childhood Workforce**

733 15th St NW, Suite 1037  
Washington, DC 20005-2112  
202/737-7700

This book identifies successful programs for increasing salary levels in the child care profession, creating partnerships among employees and parents, and developing funding options.

***Keeping Healthy: Parents, Teachers, and Children***  
**National Association for the Education of Young Children**

1509 16th St NW  
Washington, DC 20036-1426  
202/328-2604

This pamphlet presents the following 5 steps that parents and group child care providers can take to prevent communicable disease: (1) prevent the spread of germs, (2) require certain immunizations, (3) report illness, (4) exclude (for health reasons) some children, staff, or parents (guidelines for illnesses requiring exclusion), and (5) be prepared. The pamphlet presents detailed instructions and illustrations on how to carry out each step. The same information is available in poster format for easy reference.

***MCH Program Interchange: Focus on Training Materials for Early Childhood Health***

**National Maternal and Child Health Clearinghouse**

2070 Chain Bridge Rd, Suite 450  
Vienna, VA 22182-2536  
703/821-8955

This annotated bibliography lists training materials such as books, journals, posters, brochures, and kits that address early childhood health issues, including well-child care, immunizations, safety information, and mental health.

***Protecting Child Care Center Employees from Exposure to Bloodborne Pathogens: A Guide for Developing a Comprehensive Exposure Control Plan***

Maryland Committee for Children, Inc  
608 Water St  
Baltimore, MD 21202-4079  
410/752-7588

This manual explains how the Bloodborne Pathogen Standard affects owners and administrators of child care centers in Maryland. The standard, developed by the **US Occupational Safety and Health Administration**, was adopted by the State of Maryland to protect employees from exposure to bloodborne pathogens such as the human immunodeficiency virus and hepatitis B. It requires owners and administrators of child care centers to formulate exposure control plans and train their employees to avoid exposure. The manual presents the standard, suggested steps for compliance, a sample plan with forms, suggested precautions and procedures, and a list of resource organizations.

View the *Blueprint for Action* **Resource List**.



## Information

### Blueprint for Action: Resources

The following materials were referenced in the [\*Healthy Child Care America Blueprint for Action\*](#). Many of these resources have been revised, so be sure to check with the referenced organization for the latest version.

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