Seasonal Reminders about Influenza and Lice

Every fall, programs for children in groups face possible outbreaks of flu and lice. Flu can be life-threatening. Lice do not cause any disease, but are a big nuisance. ECELS recommends that all early education and child care programs actively use measures to prevent both.

Influenza

The best way to stop the spread of seasonal flu is to get flu vaccine as soon as it is available. Whether you get the shot or the nasal spray depends on your age, health condition and preference. The 2013 vaccines have either 3 or 4 strains of influenza virus material. If it is available, get the one with 4 strains. Both of the vaccines prepare your body to resist influenza.

Too many people believe myths about flu vaccine and about influenza. The vaccine does not give you influenza. It stimulates the immune system to recognize influenza viruses. While you might get a sore spot on your arm or feel a bit under the weather for a day or so, getting infected with disease-producing influenza is much worse. Influenza disease can make healthy people sick enough to miss months of work or school or worse. Sadly, each year thousands die from influenza. Flu vaccine could have prevented many of these severe illnesses and deaths.

Child care facilities should start promoting influenza vaccination in September and continue until everyone has received the vaccine or spring comes. With very few exception, everyone over 6 months of age should get annual flu vaccine.

In the fall, reinforce the value of practicing good hand hygiene and using an elbow or shoulder to catch a sneeze or cough. Flu viruses spread easily in group care settings. Adults and children in group care take the virus home and spread it in the community. Consider the risk that people who do not get flu vaccine pose to others while respecting their right to make individual decisions.

Act now for the 2013-14 influenza season.

- Many people have health insurance to pay for flu shots. Consider arranging with a local pharmacy to give vaccine to staff members and families who use the child care facility. Offer to pay something toward the cost of the vaccine for those who don’t have insurance. The cost of substitutes, and lost revenue from prolonged absence for illness will greatly exceed the relatively low cost of influenza vaccine.

- Contact your local health department to ask how your facility can find out quickly when outbreaks start to occur in your community.

- Set up an alert system to share information when episodes of infectious disease increase in a group in the child care facility.

- Use the Quick Reference Sheet about influenza from Managing Infectious Diseases in Child Care and Schools, 3rd edition to inform staff members and parents. This award winning, spiral-bound book has more than 50 easy-to-understand, reproducible handouts, sample letters and forms. Fall is a good time to offer useful handouts to families and staff members.

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Buy *Managing Infectious Diseases in Child Care and Schools, 3rd edition* from the American Academy of Pediatrics at [www.aap.org](http://www.aap.org) To order it by phone, call 888-227-1770.

Read updated information and download free materials on the website of the Centers for Disease Control at [www.cdc.gov/flu](http://www.cdc.gov/flu) and [http://www.cdc.gov/flu/freeresources/print-general.htm](http://www.cdc.gov/flu/freeresources/print-general.htm). ECELS suggests choosing these three that might be particularly useful in child care:


- **Take 3 Actions** [http://www.cdc.gov/flu/pdf/freeresources/updated/take3-poster.pdf](http://www.cdc.gov/flu/pdf/freeresources/updated/take3-poster.pdf) – a bit wordy single page to use for a poster. Good as a flyer and possibly as a poster somewhere people can stand and read the details, 11 x 17 inches, 232 KB file

- **Everyday Preventive Actions that can help fight germs like the flu:** [http://www.cdc.gov/flu/pdf/freeresources/updated/everyday_preventive.pdf](http://www.cdc.gov/flu/pdf/freeresources/updated/everyday_preventive.pdf) - a two page brochure with good content, but unlikely to be read if posted, 8.5 x 11 inches, 1.5 MB file

**Head Lice**

Head lice are little insects that live and lay their eggs close to the scalp. They bite and then feed on blood they draw. They glue their eggs (nits) to the hair. The eggs must be within ¼ of an inch of the scalp to hatch. Small pieces of dandruff are often mistaken for lice eggs. Dandruff slides off hair easily. The tightly-glued eggs are very hard to remove. Combing to remove the lice and nits is tedious. Lice spread easily in group care settings, mostly by head-to-head contact.

Lice die when they are away from the scalp for 48 hours. The eggs need the warmth near the scalp to hatch. The bite sites may itch for weeks, but the bites do not cause any other health problem. Having lice is upsetting and disruptive. A variety of chemical treatments and medications are available. Sadly, the lice have grown resistant to the chemicals available to kill the insects and their eggs. If misused, the chemicals cause more harm than the lice. Home remedies do not work.

The best preventive measure is to avoid head-to-head contact when someone in the group has lice. Shared objects do not pose as much of a risk as once thought. However, it is best to wash/launder articles in contact with the head between users. Drying at the hot setting of the dryer for at least 5 minutes kills lice. Bagging articles for at least 2 days allows crawling lice to die.

Use the Lice Quick Reference Sheet from *Managing Infectious Diseases in Child Care and Schools, 3rd edition* to educate parents and staff members. (See the top of this page for how to buy the book.) Anyone with lice should be referred to a health care provider for treatment. No-nit policies don’t help control the spread of lice, but may help identify someone who was treated and caught lice again.

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**Refresh Your Sign-up for E-Mail Alerts from ECELS now!!!**

**Everyone** must sign up on the new ECELS website to continue to receive “E-Mail Alerts” from ECELS. The ECELS website address has not changed. It is [www.ecels-healthychildcarepa.org](http://www.ecels-healthychildcarepa.org). However, the software for the new website cannot accept the e-mail list from the old website.

Since moving to the new website, ECELS has temporarily used a separate system for e-mailing during a transition period.

Use of this “make-do” approach must end soon. ECELS will lose anyone who has not signed up on the new website system. ECELS uses the E-Mail Alerts to send a notice when the ECELS T/TA team has posted new material, handouts, posters, professional development activities, newsletters, or other content relevant to early education and child care. Please sign up on the new website so we can stay in touch.
Pennsylvania (PA) is giving high priority to environmental health in early learning programs. In 2010, the Heinz Endowments gave a generous grant to PA’s Office of Child Development and Early Learning (OCDEL) for an environmental health initiative. The grant funds the PA Early Childhood Education (ECE) Healthy & Green Initiative.

Planning for the Initiative engaged many partners. They included pediatric and environmental health experts, the Pennsylvania (PA) Key and PA’s Departments of Health, Education, Environmental Protection and Conservation and Natural Resources. The Initiative’s advisors decided to adapt a program called Eco-Healthy Child Care® for use in PA. This program is part of the work of the Children’s Environmental Health Network (CEHN). To learn more about CEHN, go to http://www.cehn.org/ehcc.

One of the activities of the PA Healthy & Green Initiative is a three hour Eco-Healthy Child Care® workshop. Early in 2013, the PA AAP’s ECELS T/TA staff taught professional development instructors how to teach the workshop. The content focuses on how to reduce environmental hazards for children and staff. Some of the topics are: using the Eco-Healthy Child Care Checklist®, improving indoor air quality, controlling radon exposure, reducing use of pesticides, and avoiding lead poisoning. ECELS encourages center and home-based early learning professionals to register for the workshop. It qualifies as a K7, Topic Code 84, health and safety event. Check the PA Key Calendar for a scheduled presentation or ask your Regional Key about it. If you want to schedule a workshop for a group, contact ECELS to locate a qualified instructor.

Over 300 Keystone STARS programs applied for Healthy and Green grants of up to $5,000 for environmental improvements. Many applicants want to reduce exposure to radon and lead. Others want to improve indoor air quality. Some want to control pests without overuse of pesticides. ECELS participated reviewing grant applications and provided technical assistance to grant applicants.

ECELS developed a set of Model Environmental Health Policies that correspond with the Eco-Healthy Child Care® content areas. These fill-in-the-blank policies help learning facilities update their documents and educate everyone in the program. The policies are on the PA Key website at www.pakeys.org. Either use the direct hyperlink to the policies or, on the PA Key website, select Early Childhood Programs, then Healthy and Green, and then Mini-Grants Program. On the bottom of the Mini-Grants Program page, look for Forms. The Model Policies are on the list of forms. Check out the Eco-Healthy Child Care® and PA Reference pages and other resources accessed from the left frame of the Early Childhood section of the PA Key website.

All early educators and school age child care programs can use the tools of the PA ECE Healthy and Green Initiative. It’s easy to use the Eco-Healthy Child Care® Checklist, ECELS and Early Intervention Technical Assistance (EITA) are making the workshop curriculum available to EI providers too. Everyone involved with children can use the information.

Contributed by Libby Ungvary, ECELS Director and Samantha Balbier, PA Healthy and Green Consultant

Choking Injures Many Children

Choking is a leading cause of injury among children. It can be fatal, especially in children 4 years of age or younger. Food and objects worn around the neck are common causes of choking. Young children should not wear any necklace-like objects that encircle their necks. Watch out for pacifier ribbons, teething ring necklaces, jewelry and clothing with tie strings.

Many children choke on food. The size, shape and consistency of some foods make them more likely to be a choking hazard. In the August 2013 issue of Pediatrics, researchers reported that an average of 12,400 children ages 0 to 14 years of age were treated in Emergency Departments for nonfatal food-related choking annually. Candy caused 28% of the choking episodes. High-risk foods for hospitalization from choking are hot dogs, seeds and nuts.

See the fact sheet about choking prevention in the Publications on the ECELS website at www.ecels-healthychildcarepa.org. Print and copy this Fact Sheet as a handout or enlarge it to use it as a poster.
Staff Health Warning

Child care providers have a responsibility to advise their paid and volunteer female staff members about occupational health risks. One of these risks is the likely exposure to infections that can damage a fetus if the worker becomes pregnant. These infections include rubella, measles, mumps, chicken pox, hepatitis B, cytomegalovirus (CMV), herpes, parvovirus and HIV.

Young children may become infected with some of these infections with few or no symptoms. Close contact in child care facilitates spreads infections easily. Some of these infections are a risk to the fetus of a woman who did not develop immunity by having the infection or a vaccine. A blood test can tell if the woman is immune.

Child care providers should advise women who can become pregnant to discuss this infectious disease risk with their health care professionals. Good hand hygiene helps reduce this risk. However, women who are not already immune and are or intend to become pregnant may prefer to avoid contact with groups of young children during their pregnancy.

ECELS offers the following sample note that child care facilities can give to their female staff members to take to their health care professionals:

"Dear Health Care Professional:

(Name) works in a setting where she has contact with children in groups. Exposure of women during pregnancy who lack immunity to certain viruses can put their fetus at risk. Primary infection with human parvovirus B19 and cytomegalovirus can cause significant damage to a fetus. Vaccine-preventable viral infections can harm them too.

Human parvovirus B19 and cytomegalovirus (CMV) occur commonly among young, asymptomatic children. They may spread the virus for weeks or months. Vaccine-preventable infections are a growing concern because of international travel and vaccine refusal. Please discuss her childbearing intentions with your patient. Review her vaccine record and whether blood tests are appropriate to determine her immune status.

Sincerely,

(Director’s Name) (Child Care Facility Name)"

Advising teachers/caregivers not to kiss children on the lips. They should not allow children to put their fingers or hands in another person’s mouth. Since saliva can transmit some infections, nobody should share cups or eating utensils.

There are so many times in the day when hand hygiene is appropriate, it is easy to slip up. Children enjoy reminding each other, their teachers and their families. They like to sing hand washing songs, and count the seconds of lathering too. “Bubble one, bubble two, bubble three…”

Asthma Prevention

At www.noattacks.org, view clever songs and activities that teach children and adults how to prevent asthma episodes. This Environmental Protection Agency (EPA) website is available in English and Spanish. It has five sections:

- About Asthma
- How to Prevent Attacks
- Asthma Resources
- Kids Stuff (for school-age children)
- Media Center.

In the Media Center, hand puppets called the “Breathe Easies” sing one minute catchy message songs. View the Breathe Easies PSAs. Click here to watch them in Spanish!

Poor air quality can trigger an asthma attack. Use the EPA’s air quality daily forecast and sign-up for E-Mail Air Quality Alerts at www.airnow.gov. Learn about ways to reduce asthma triggers in schools at http://www.noattacks.org/triggers-in-your-school. From this part of the EPA website, download the Asthma Action Plan. The form lists relevant asthma triggers, instructions for asthma medicines, what to do for asthma symptoms, when to call for medical advice, and emergency phone numbers. Ask families to have the child’s health care professional complete the Asthma Action Plan, and share it with the child’s teachers/caregivers. Adults should share their own completed Asthma Action Plan with a supervisor.

To learn more about asthma in the early education and child care setting, use the ECELS Asthma Self-Learning Module for 2 hours of state-authorized training credit.
Oral Health in the Early Learning Environment

Sing to the tune of (Row, Row, Row Your Boat)

Brush, brush, brush, your teeth,
Brush them nice and clean.
Brush the tops and bottoms too,
And floss them in between.

What reasons do teachers/caregivers give for not doing oral hygiene as part of the curriculum?

- Just one more thing to add to the child care day.
- I don't have enough time.
- I can't get everything done as it is.
- Parents brush the children's teeth at home.

While these common responses are understandable, the best practice benefits make it worth the effort. *Caring for Our Children*, 3rd edition (*CFOC3*) defines the best-practice standards for early learning programs. *CFOC3* Standard 3.1.5.1 states “Caregivers/teachers promote the habit of regular tooth brushing. All children with teeth should brush or have their teeth brushed at least once during the hours the child is in child care.” *CFOC3* Standard 9.2.3.14 has additional details: All child care programs should have an oral health policy that includes information about fluoride content of water at the facility, contact information for each child’s dentist, a resource list for children without a dentist, daily tooth brushing or rinsing the mouth with water after eating, use of Sippy cups and bottles only at mealtimes during the day and not at nap times, no serving of sweetened food products, promotion of healthful foods per the USDA Child Care and Adult Food Program, early identification of tooth decay, age-appropriate oral health education activities, and a plan for handling dental emergencies.

Dental disease is the most common chronic disease of early childhood. Cavities and decay in baby teeth can cause pain, inability to eat healthful foods and inability to learn. The decay can cause damage that is very expensive to repair. Poor oral health affects a child’s overall health and development leading to lifelong harmful consequences.

Cavities can be prevented, stopped and even reversed if they are caught and treated early. The acid made by germs in the mouth causes cavities. Regular brushing removes food that feeds the germs and reduces the number of germs that cause tooth decay. Consistent application of fluoride in toothpaste and drinking water helps harden the teeth against the acids that cause cavities.

Include **Tooth-friendly** snacks:
- Cheese
- Baby Carrots
- Apple Slices
- Cucumbers
- Nuts (for children 4 years of age or older)
- Yogurt
- Whole Grain Cereals
- Other fresh fruits and vegetables

Avoid **Tooth-unfriendly** snacks:
- Cookies
- Candy
- Crackers
- Sticky fruit snacks
- Juice and Juice drinks
- Sugary Cereals and other high sugar foods

For all children:
- Brush teeth with a fluoride toothpaste: Use a smear for infants with teeth; for 2-5 year olds use a pea-sized amount; for older children and adults use a ribbon of toothpaste.
- Provide healthy foods and limit sweet snacks and drinks. Read how much sugar is in a portion and the portion size on every product label.
- Schedule regular dental check-ups starting by 12 months of age and every 6 months thereafter.

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**Forming good habits at a young age can help a child have healthy teeth for life.**

Little People Day School of Columbia in South Central Pennsylvania has been dedicated to oral health care for their children for more than 30 years! The children brush their teeth twice a day as part of their daily curriculum. It is such a normal part of their routine that when someone suggested the center could change to brushing once a day, the center said “no.” So the children continue to faithfully brush their teeth after breakfast and after lunch. Congratulations Little People Day School of Columbia! You have earned special recognition from the South Central Regional Key, and Keystone STARS!


Contributed by Anne Dodds, South Central Regional Key Child Care Health Consultant

**Oral Health Self-Learning Module - FREE ECELS Credit Review**

While funding lasts, ECELS is offering a free module review for the 2013 updated Oral Health Self-Learning Module. Act now to receive one of the remaining free reviews. As with all ECELS Self-Learning Modules (SLM), ECELS T/TA staff will help users to successfully complete the SLM and earn professional development credit. This module includes new tools you can use in your program to support oral health.

The content of the Oral Health SLM includes online, interactive activities, a resource list, dental referral resources and activities teachers/caregivers can use. This self-learning module meets the STAR Level 2 Performance Standard for Health and Safety. Contact ECELS if you have questions at: [ecels@paaap.org](mailto:ecels@paaap.org) or 800/243-2357.

To view the updated Oral Health SLM, click the link or go to [www.ecels-healthychildcarepa.org](http://www.ecels-healthychildcarepa.org). Select Professional Development/Training, and then Self-Learning Modules. Scroll through the alphabetical list to the Oral Health SLM.

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**Infant-Toddler Quality Improvement Grant Awarded to ECELS**

ECELS-Healthy Child Care Pennsylvania (ECELS) has received a new three year federal grant. This grant is to help participating child care programs serving infants and toddlers to implement selected best practice standards from Caring for Our Children, 3rd edition (CFOC3). Keystone STAR 2 and STAR 3 centers are eligible to join the study.

ECELS is recruiting centers, evaluators, and child care health consultants to participate in the project. The federal funding allows conduct of the project in the areas served by the Southeast, Southwest, South Central, and Northeast Regional Keys. Centers will work with a child care health consultant (CCHC) for one year, and must commit to an initial and annual evaluation site-visit for two years thereafter. The grant will pay most of the cost of the child care health consultant services. The centers in the project are required to contribute a co-pay of $240 for their year of CCHC services.

Interested center directors, CCHCs or evaluators should contact Rosemary Johnston, RN, BSN, MSN, Project Coordinator [rjohnston@paaap.org](mailto:rjohnston@paaap.org), 484-446-3003.

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