**MADE IN THE SHADE …**

**WARM WEATHER LUNCHES**

When planning warm weather field trips, lunches, and picnics, remember these tips:

**Keep lunches cold!** Keep refrigerated lunch items at 40°F or colder until you’re ready to go.

**Add something cold to the lunch bag.** Include a frozen drink box or a small plastic container filled with water and frozen to help keep the lunch cold.

**Freeze sandwiches.** Use coarse-textured breads that won’t get soggy upon thawing. Taken out of the freezer in the morning, the sandwich will thaw in time for lunch and keep everything else cool at the same time. Lettuce, tomato, and mayonnaise don’t freeze well. Keep these items refrigerated and pack them separately to add at lunch time.

**Maintain your cool.** Stock well-insulated coolers with ice or freezer packs. During transport, store coolers in the passenger area, never in the trunk. Once at the picnic site, keep coolers and water jugs in the shade.

**Meats and poultry.** Commercially precooked and ready-to-eat meats, such as corned beef, salami, and bologna are safer lunchbox choices than cooked-at-home meats. If you are preparing the meal on site, bring the meat packed on ice. Thaw the meat on a refrigerator shelf a night or two before you need it. If the meat is still partially frozen when you’re ready to leave, no problem. Just cook it a bit longer at the

(Continued on page 2)

**HEALTH AND SAFETY CALENDAR**

Use the calendar to plan ahead.

**May**

- **National Mental Health Month:** ECELS has 4 new fact sheets to help you care for children with behavior problems. Check out the order form on page 7 for copies of fact sheets on: biting, repetitive behavior, behavior problems, and the art of discipline. Remember … ECELS also has a Behavioral Data Collection Sheet and a Behavior Care Plan to define the problem and get help for children who have behavior problems. For those caregivers who have already been using these forms, please call ECELS with your feedback.

- **National SAFE KIDS Week:** May 1-8, 1999. This year’s theme is “Helping Every Generation Care for Kids.” For more information, check out the Pennsylvania SAFE KIDS Coalition web page at <www.pasafekids.com> or call 800/683-5100. For a SAFE KIDS injury prevention brochure, use the order form on page 7.

**June**

- **National Dairy Month:** Children 1-3 years of age need the equivalent of 2 servings of milk per day to get the recommended amount of calcium they need. Kids 4-8 years need 3 servings, just like adults. For more information on calcium, check out <www.nationaldairycouncil.org> and pick menu choice “Nutrition Clinic.” Or open the interactive refrigerator at <www.familyfoodzone.com> to check out Mini Milk Mustache news, Kids Cooking corner (great recipes), or pick the e-mail option and get your nutrition questions answered by a nutrition expert.

- **National Safety Month:** Using the checklist in Model Child Care Health Policies, have children join staff in a room-by-room hazard hunt. Award stickers and ribbons to the best child-detectives.

**July**

- **4th of July:** Teach children to stay clear of sparklers or (fireworks) snakes. All other classes of fireworks are banned in Pennsylvania. Urge parents to leave fireworks to the professionals for a safe holiday. For more information, check out the fireworks facts on page 3.
picnic. Cook hamburger patties, pork chops, and ribs until all the pink is gone. Cook poultry until there is no red in the joints and juices run clear. Prepare fish until it flakes with a fork.

**Fruits and vegetables.** Fresh, firm fruits and vegetables travel well. Wash them before packing to remove soil, germs, and insecticide sprays you can’t see.

**Keep raw and cooked items separate.** Wash hands before handling food, and again after working with raw meat or poultry, before handling other food. If there’s no water faucet available, rig a running water device with a large jug or container. Use clean utensils, plates, cups, and bowls (disposable is best). Put cooked items on a fresh plate, not the same one used with the raw product.

Still have questions? Call the USDA Meat and Poultry Hotline at 800/535-4555. Want to know which germs safe food handling protects you from? Read on …
Every year, Americans express their patriotism on Independence Day and celebrate other festive occasions with fireworks. As a result, approximately 12,500 individuals, more than half of them children, have fireworks-related injuries that require hospital treatment.

The Consumer Product Safety Commission classifies explosive devices into three categories: Class A (TNT and dynamite); Class B (cherry bombs and M-80s); and Class C (fountains, candles, bottle rockets, sparklers, and smoke devices). Only 12 states ban all Class C fireworks. Sadly, Pennsylvania law allows the use of fireworks snakes and sparklers by individuals. Sparklers are often considered by many to be harmless; however, sparkler temperatures can reach 1800°F, and can cause corneal (eye) abrasions and serious burns.

Encourage parents to attend public fireworks displays rather than to purchase fireworks for home use. When families feel they must have home fireworks despite the well-documented risks involved, children should never be allowed to ignite them, nor should they be around any devices without adult supervision. Misuse of fireworks, either by adults who have been drinking or by unsupervised children, accounts for the majority of fireworks injuries. And about 15% of the time, the injured party is a bystander.

Teach children to stay clear of any device that looks like a pack of matches or that has a fuse. Remind children that they may continue to see these devices strewn around streets, sidewalks, and playgrounds for days and even weeks after the 4th of July holiday has passed.

- - Based, in part, on the American Academy of Pediatrics’ policy statement, “Children and Fireworks.”

To read the American Academy of Pediatrics’ policy statement, “Children and Fireworks,” check out the website at <www.aap.org> and click menu selection, “Publications and Services.” For a flier warning parents about sparklers, use the order form on page 7.
Linking Health Care with Child Care

Children with special health care needs who attend child care may be eligible for supportive health services. ECELS receives many calls from child care facilities for technical assistance and training related to conditions such as asthma, allergies, diabetes, developmental delay, and mental health problems.

Depending on a child’s special needs, a caregiver may need to administer emergency medication, test blood sugar, provide special skin care, or give tube feedings. If a child in your program has health care needs that require specific intervention from caregivers follow the steps below:

1. **Partner** with the family to create a plan of action (who will do the advocating?)
2. **Link** with the child’s pediatrician, psychologist, psychiatrist, social worker or other health professional to build a relationship. Discuss the needs of the child.
3. **Advocate** for children to meet their needs so they can participate in child care and family life as fully as possible. Both your program and the family will need to tap into personal creativity and assertiveness.
4. **Create** a “team attitude” with the family, health professionals, and any other individuals who care for the child.
5. **Obtain** prescriptions or referrals for any needed services. The services may include training, physical or psychological care, and care planning. Physicians, physician’s assistants, or nurse practitioners are the usual starting point for services. However, other folks can be helpful in this process. Office staff, office nurses, and social workers can be key helpers.
6. **Access** the child’s insurance company or entitlement agency. In today’s managed health care environment, advocacy by the whole team is critical! The ideal person to lead the advocacy team is the person who wrote the prescription. The office of the prescribing professional usually has a protocol to follow in accessing health services provided by the child’s health insurer. This protocol is challenging for everyone involved. The family must partner with the prescribing health professional and may need to be the ones who champion the effort to get payment for services.

Examples of how the process can play out:

**Example 1** - A one year old with a diagnosis of reflux is loosing weight. The child does not exhibit developmental delay. Feeding therapy, nutrition education and/or medication may be recommended. Feeding therapy and nutrition support for very young children is considered medical therapy, and funding for this type of service may be provided by the child’s medical insurance company or by the early intervention agency.

**Example 2** - A four year old is biting and throwing things at home and while at child care. The child is developmentally on target. Despite time-outs, special attention, and other routine behavioral approaches, the child continues to appear in distress. Steps the caregiver should take in this situation include:

(Continued on page 5)
Partner with the family to discuss the problem and what resources the family can use for the next steps.

⇒ Obtain from ECELS a Behavior Data Collection Sheet to document the child’s behavior.

⇒ Present the parent with a copy of ECELS’ Special Care Plan for Children with Behavior Problems to be filled out by the child’s health care provider.

The caregiver might learn that the child is entitled to a social/emotional evaluation from the state Intermediate Unit (IU). Sometimes the caregiver might need to implement suggestions from the child’s pediatrician first. If these suggestions fail, the pediatrician should be asked to make a referral for a developmental behavioral pediatrician, or insist on an evaluation from the IU or local mental health service (called the Base Service Unit).

Remember:

✔ The Intermediate Unit serves children age 3-5 and there is an IU that serves every county in Pennsylvania.

Children birth to age 3 receive evaluation through the Early Intervention System.

✔ Call Connect at 800-692-7288 if you do not know the numbers of the Intermediate Unit or Early Intervention System in your area.

✔ Children may have access to mental health services through their family’s health insurance.

✔ Start by giving specific information about the problem to the child’s pediatrician or other routine source of health care. Ask the parent to contact the Intermediate Unit at the same time. Stay with the process until the child has completed an evaluation and has a plan of care with services that seem to help.

These steps may seem difficult but they are necessary to ensure that kids with special health care needs get needed services. For help, call ECELS at 800/24-ECELS.

- - Laurie Grant, BS, RN

Accommodating a Child with Severe Food Allergy …

an ECELS success story

Recently a child care center director from Allegheny county called ECELS for help. The director wanted to enroll an 11 month old baby with a severe food allergy. The child’s mother explained to the director that the baby might need an epinephrine (adrenaline) injection for an acute attack. Often times, epinephrine can be administered through an easy-to-use pre-filled auto injector. In this situation, however, the child’s dose was smaller than the standard amount of medication that usually comes in auto-injectors. Child care staff didn’t know how they could safely administer the proper dose.

ECELS staff went to work and found a different kind of treatment kit that allows the user to administer smaller amounts of epinephrine. ECELS contacted the treatment kit manufacturer who sent a representative to visit the ECELS office. The representative demonstrated how the kit works, and provided a video, practice kit, and print material. ECELS forwarded all the emergency kit information to the child care facility, the child’s doctor, and the parents. The child’s doctor was able to prescribe the treatment kit, and a home health nurse went to the child care facility to teach staff how to use the kit. The child’s caregiver reports that everything is going well now and thanks ECELS for the help!
**ECELS Q & A**

**Q:** We’ve been hearing a lot lately about latex allergy. What is it? Do we need to be concerned about it?

**A:** Latex is the sap of the Hevea brasiliensis tree. Latex is used to make thin, stretchy products such as rubber bands, balloons, and surgical gloves. Lately, more and more products are being made with latex and doctors have noted more individuals becoming allergic to this substance at the same time. Allergy to latex can cause symptoms such as hives, rash, sneezing, watery eyes, wheezing, and shortness of breath. Latex allergy can even cause a life-threatening reaction called anaphylaxis.

The tendency to develop allergies is inherited. As with all allergies, you must be repeatedly exposed to latex before you develop a sensitivity to it. The more frequently and intensely you come in contact with latex, the more likely you are to develop the allergy. People with latex allergy are often also allergic to bananas, avocados, chestnuts, kiwis, and other fruits.

The Spina Bifida Association of America (SBAA) reports that between 18-73% of children with spina bifida are latex sensitive. Although the cause is not known, some scientists think that sensitization may occur from these children’s early, intense, and constant exposure to latex products (multiple surgeries, catheterization programs, diagnostic tests, etc.). If you care for a child with spina bifida or diagnosed latex allergy, you should have a special care plan on file. A special care plan is documentation of a child’s special needs, along with instructions you’ll need to care for the child. Call ECELS for help accommodating children with special health care needs. Use the order form below for a copy of a special care plan.

For more information on spina bifida and latex allergy, check out the SBAA website at <www.sbaa.org> For the ECELS fact sheet on spina bifida, check out the order form below.

--- Based in part on “The ABCs of Latex Allergy,” Henry Ford Health System, and the Spina Bifida Association of America Latex Information Page.

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**ECELS ORDER FORM**

(Pennsylvania Child Care Providers & Pennsylvania Health Consultants Only)

Please use this form to order any brochure listed below. Check the box beside the item you would like and return the form to PA AAP, ECELS, Rosemont Business Campus, 919 Conestoga Road, Bldg. 2, Suite 307, Rosemont, PA 19010-1353.

**Brochures/Handouts:**

(One copy per organization)

- Mental health fact sheets  
- SAFE KIDS injury prevention brochure  
- Fireworks flyer  
- CCIS agencies  
- Special care plan  
- Spina bifida fact sheet

**New Self-Learning Module:**

- Food Allergy  

(Using the Food Allergy Network’s Day Care & Preschool Guide to Managing Food Allergies, staff and children can learn about food allergies. Includes videos that must be returned within 7-10 working days. Submit a label reading activity and self-test for training credit.)

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Name: ________________________________________________________________

Organization: __________________________________________________________

Address: ______________________________________________________________

________________________________________________________________________

City: ______________________ State: _______ Zip: _______________________

Telephone # and Area Code: ____________________________________________
Meet ECELS Staff!

This edition, HEALTH LINK introduces you to ECELS Training and Technical Assistance Coordinator Susan Louchheim, CRNP.

Sue started her pediatric nursing career as a Project HOPE volunteer in the early 1970s, then worked as a health coordinator for Head Start, and later as a pediatric staff nurse in ambulatory care. Sue then became a pediatric nurse practitioner in 1982 and worked for eleven years as a consultant to Elwyn Preschool Development Center. Sue has been a health consultant with ECELS since 1990 and has shared her expertise caring for children with special health care needs for many years.

Sue’s hard work is valued not only by the child care providers she links with health consultants every day, but also by her co-workers who so

SUSAN LOUCHHEIM, CRNP

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