HEALTH AND SAFETY CALENDAR

Use the calendar to plan ahead.

February

♦ Child Passenger Safety Week: February 8-14, 1998. Check that all children arrive and leave the child care facility safely buckled-up. If you see a car seat improperly placed or a child unrestrained, give the parents a reminder postcard or place one on their windshield. Use the order form on page 7 for a sample “I Couldn’t Help But Notice” postcard.

♦ National Children’s Dental Health Month: Check the order form on page 7 for free dental health materials.

♦ American Heart Month: Promote staff and child health with exercise, good nutrition, and check-ups. Check out the heart-facts on page 5 of this edition of HEALTH LINK.

March

♦ National Nutrition Month: Learn how to make healthy food choices when you must eat at fast food restaurants. Read the article on page 5 of this edition of HEALTH LINK. Earn 2 hours of child care training credit by completing ECELS’ new Menu Planning self-learning module. Use the form on page 7 to order.

♦ National Poison Prevention Week: Poisons can look like food products and other harmless items. Teach parents, staff, and school age kids in your care about look-alike poisons by putting together a look-alike display. For instructions and a workshop script, check off the order form on page 7.

April

♦ National TV Turnoff Week: April 22-28, 1998. To purchase an organizer kit, contact TV-Free America at 202/887-0436. For more information on TV turnoffs, see the article on page 7.

♦ Child Abuse Prevention Month: Shaken baby syndrome usually happens when a frustrated parent or caregiver shakes a baby who won’t stop crying. For a flyer describing how to prevent shaken baby syndrome, and for other child abuse materials, check the order form on page 7.

Pets in Child Care

Early childhood educators use pets in child care to teach children consideration, responsibility, and practical science lessons. Contact with animals can be fun for kids and staff alike! However, caregivers should know about potential risks involved with keeping pets in child care.

Bites. Household pets are capable of transmitting 30-40 infectious diseases to humans, and dog and cat bites are the most reported types of pet-inflicted trauma. Bacteria in dog and cat bites can cause cellulitis, (inflammation of the tissue under the skin). Cat bites are more likely to cause infection because they produce puncture wounds that bury germs deep in the tissue under a child’s skin. Dog bites tend to be tearing injuries where the germs can be flushed away under running water. Ferrets are unpredictable. Although ferrets are sold in pet stores, the Centers for Disease Control (CDC) still classifies them as wild animals. Ferrets are especially attracted to the smell of milk and can injure children who have milk around their mouths.

If an animal bites a child in your care, notify parents at once. Get medical help immediately if the wound is large or deep or is bleeding profusely. Use disposable gloves, and wash the wound thoroughly with soap and water. Control bleeding, (Continued on page 2)
Bacteria. The bacteria animals are most likely to transmit to humans is salmonella. Many animals, like geckos and turtles, are carriers of salmonella but don’t appear ill themselves. Campylobacter is another common cause of gastroenteritis associated with transmission of bacteria from infected dogs, cats, birds, and farm animals. Children and staff must wash their hands thoroughly after contact with any animal.

Parasites. Cryptosporidium and Giardia picked up from infected animals can cause diarrhea in humans. Hookworm, heartworm, and tapeworms can also be transmitted to humans by dogs via the fecal-oral route. The risk of transmission of these illnesses can be reduced by screening pets for infection, avoiding intimate contact, and thorough handwashing.

Rabies. In the United States, the primary reservoir of rabies is wild animals like raccoons, skunks, bats, and foxes. Teach children to avoid wild animals when taking hikes, walks, or field trips.

Leptospirosis. Leptospirosis is a flu-like infection transmitted by contact with the urine of an infected animal. Dogs are the most common reservoir of the leptospira germ among pets, but reptiles, amphibians, fish, birds and invertebrates can also be infected. Keep children away from areas where animals urinate.

Disease from Cats. Cat-scratch disease causes fever and swollen glands and is usually transmitted by kittens. Cats older than 1 year are less likely to carry this disease. Another cat-associated infection is toxoplasmosis. A pregnant woman’s exposure to cat feces can cause serious congenital infection, miscarriage, or stillbirth. Testing of cats is not useful in preventing transmission of toxoplasmosis because by the time a positive test is obtained, it is too late to protect the human host. Pregnant caregivers, therefore, need to avoid contact with cat feces and need to have someone else dispose of cat litter daily. Pregnant caregivers should always follow the specific advice of their obstetricians.

Disease from Birds. Psittacosis is a prolonged lower respiratory illness caused by transmission of the germ Chlamydia psittaci to humans. Sick birds may have ruffled feathers, but sometimes birds can aerosolize organisms for weeks or months without showing symptoms of disease.

Disease from Fish. An organism called Mycobacterium marinum lives on fish and in aquariums. This germ causes chronic ulcerated skin lesions at sites of minor trauma after someone cleans a fish tank. Caregivers, therefore, should wear gloves when cleaning fish tanks and immunosuppressed individuals should avoid handling tropical fish and cleaning aquariums altogether.

Allergies. Many children are allergic to animal dander. Check whether any children have allergies to animals before bringing an animal into a child care space. Do not bring animals into rooms used by children with asthma.

Protect children from injury with these rules:

- Arrange for contact between children and the animal only when you know the characteristics, health hazards, and behavior associated with the animal. Make sure the animal is healthy and goes to a veterinarian for a check-up.
- Make sure that the introduction of the animal to children occurs in a quiet, controlled setting. Supervise all contact between animals and children closely. Be ready to remove the child immediately if the animal shows signs of distress or the child shows signs of treating the animal inappropriately.
- Do not let children have contact with animal excrement.
- Do not let children take food from an animal or disturb a sleeping animal.
- Do not let children interact with a mother animal or her babies while she is with them.
- Do not let children interact with an animal that is in a cage, pen, or tied up. Children should not try to pet a confined animal or stick fingers through openings in a cage.
A TEAM APPROACH TO UNDERSTANDING DEADLY INJURIES

Since 1994 a team consisting of medical professionals, social workers, forensic pathologists, coroners, children and youth agencies, members of the PA Chapter of the American Academy of Pediatrics (PA AAP), and members of the PA Department of Health and Public Welfare, have been reviewing all injury deaths, SIDS deaths, and undetermined deaths of children ages 0-19 years in the state of Pennsylvania.

The PA state Child Death Review Team (CDR) grew out of the PA AAP’s interest in identifying preventable child deaths. A state task force was convened in 1991. By 1993 the task force had reviewed a one month sample of death records and recommended establishing the Pennsylvania Child Death Review Team. That team became a reality in November 1994. Since then, county leaders have established teams in Philadelphia, Chester, Mifflin, Montgomery, Lehigh, Dauphin/Lebanon, York, Bucks, and Allegheny. The purpose of the teams is to analyze data and to develop prevention strategies on a more focused local level.

The main goal of a death review is to see what can be done to prevent injury deaths from happening in the future. The answer comes from a confidential analysis of data gathered from death certificates. The knowledge and experience of the team members enables them to make recommendations for prevention.

1996 data shows that the leading causes of death for children ages 0-5 years are: injuries from motor vehicle accidents, smoke inhalation from house fires, drowning while unattended in pools and bathtubs, and SIDS. In view of these data, the CDR team has supported a number of prevention strategies. These include: education of parents and caregivers on the use of infant and child car restraints, the use of smoke detectors in homes, use of pool enclosures, and the Back to Sleep Campaign for newborns and infants.

The PA State Child Death Review Team is funded by the PA Departments of Health and Public Welfare. For more information, call the PA AAP at 610/520-9123. For a copy of the annual report, use the order form on page 7.

-- Joanna McGrath, MSN, RN,C
Program Coordinator, PA State Child Death Review Team

NEW YEAR 1998

As 1997 closed, ECELS bid farewell to staff member Donna Mancuso who has begun pursuing her clinical pediatric goals. Donna will still work on special projects for ECELS and will continue to review self-learning modules. Good luck with your new endeavors, Donna!

In 1998, ECELS welcomes new Training and Technical Assistance Coordinator Laurie Grant, BS, RN. Laurie has a rich background in both pediatrics and psychology, and comes to ECELS from a position as a Director of a child care center for children with special needs. ECELS staff looks forward to sharing Laurie’s skills with child care providers and health consultants statewide.

Have a healthy and safe 1998!
MENINGOGOCCAL DISEASE

What is meningococcal disease?
Meningococcal disease is an infectious disease caused by the bacterium (germ) Neisseria meningitidis. This germ can cause meningococcemia or sepsis, an infection of the blood, and can also cause meningitis, an infection of the membranes around the brain and spinal cord.

Early symptoms of meningococcal disease are like the flu: fever, chills, headache, generally feeling unwell, and in some cases a stiff neck. Sometimes there is a reddish-purple rash that may look like tiny bruises. The rash is flat and smooth, does not itch, and may spread quickly once it starts.

How does meningococcal disease spread?
The germ spreads by very close direct contact with secretions from the nose and throat such as kissing, coughing, sneezing, and by sharing mouthed items or toothbrushes.

Most people who come in contact with meningococcal disease do not become sick. In fact, some people carry the meningococcal bacteria in their noses and throats and never have any symptoms.

Household, child care, and nursery school contacts of infected persons are at increased risk, with attack rates more than 300 times higher than those in the general population. Among these contacts, children under 2 years of age are at highest risk.

How long are people with meningococcal disease contagious?
Incubation period is from 1-10 days, most commonly less than 4 days. Patients with meningococcal disease can transmit infection for approximately 24 hours after starting effective treatment.

What can parents and child care providers do?
- Notify parents, staff, and the local health department when someone in child care has meningococcal disease.
- Persons who have direct contact with infected individuals should consult their health care providers and should receive antibiotic therapy promptly to help prevent the disease from occurring.
- Practice careful hygiene, particularly handwashing. Do not kiss children on the lips or allow them to kiss each other on the lips. Do not share or allow sharing of mouthed items, drinks, food, or toothbrushes. Teach children to cough and sneeze into their armpits rather than covering their mouths with their hands. Clean and disinfect mouthed toys, eating utensils, and all potentially contaminated surfaces.

Exclusion
Individuals should be excluded as soon as meningococcal disease is suspected.

Children may be readmitted:
- with continuing fever and behavior change provided they have been evaluated by their primary care physicians who say they may return to child care.
- once they are able to participate.
- after receiving medication that may have been recommended by the health department or health care professionals.

Source:


Reviewed by:
Susan S. Aronson, MD, FAAP
Date: 10/8/97

Barbara Watson, MB, ChB, MRCP, DCH
Date: 10/13/97
**Heart Facts**

- Cardiovascular disease is the #1 killer in America. Lack of physical activity is a clear risk factor for heart disease.
- About 250,000 deaths per year in the U.S. are due to a lack of regular physical activity.
- The American Heart Association reports that 24% of Americans age 18 or older are not active at all.
- A 1994 study by the National Center for Health Statistics reports that 14% of children are overweight.
- Children spend an average of 17 hours a week watching TV in addition to the time they spend on video and computer games. Inactive children are more likely to become inactive adults.
- Try exercise activities that are fun, not exhausting:
  - walk
  - dance
  - jump rope
  - rake leaves and bundle into trash bags
  - vacuum vigorously
  - use music to keep you moving
  - organize an exercise activity outdoors for staff and children
  - on chilly days, simulate skating and skiing indoors with the children
- Cash in on the benefits of daily physical activity. Exercise helps:
  - reduce the risk of heart disease
  - keep your weight under control
  - improve blood cholesterol levels
  - manage high blood pressure
  - prevent bone loss
  - boost your energy level
  - manage stress
  - increase muscle strength
  - improve your self-image and your heart-healthy example to children!

--- Adapted with permission from information disseminated by the American Heart Association. For a free copy of the American Heart Association’s Fit in Fitness Quiz, use the order form on page 7.

--- **FAST FOOD... FAST TRACK**

Caregivers and parents sometimes take children to fast food restaurants for a special occasion. Other times parents bring fast food to the child care facility for specific celebrations.

To get the most out of fast food, follow these tips:

- When ordering combination meals for children, substitute fruit juice.
- Look for a salad bar. Many children like fresh fruit, carrot sticks, broccoli flowerettes, cottage cheese, and yogurt.
- Order the smallest, plainest hamburger or cheeseburger on the menu. These usually contain a lot less fat than the deluxe or super burger, because they are smaller and served without sauce or special dressing. Roast beef sandwiches often have less fat than hamburgers.
- Try a plain baked potato. Let children top the spud with selections from the salad bar like crunchy vegetables, cottage cheese, or grated cheese.
- If french fries are the choice, order the smallest size and share them.
- If available, try a grilled chicken sandwich. Regular chicken nuggets and sandwiches are usually deep-fat fried and loaded with fat.
- A soft taco or tostada with beans and a small amount of cheese are a good choice at a Mexican fast food outlet. Keep guacamole, sour cream and extra cheese on the side to control the amount. Avoid crisp fried tortillas.
- Select the thin crust type pizza and choose vegetable toppings like green peppers, onions, and mushrooms. Lean ground beef is also a good topper.
- For thirst quenchers, choose fruit juices, low fat milk, or water.
- For dessert, the best bet is a soft-serve cone or low fat frozen yogurt.

--- Adapted with permission from the Food Marketing Institute. For a copy of the U.S. Department of Agriculture’s pamphlet “Take Out Foods” use the order form on page 7.
Local Management Agencies (LMAs) in the Philadelphia five county region are now providing information and referral services in addition to child care subsidy eligibility. Share with parents their LMA contact information: Philadelphia county 888/461-KIDS; Bucks county 800/371-2109; Chester county 800/870-2323; Delaware county 800/831-3117; Montgomery county 800/281-1116.

Delaware Valley Association for the Education of Young Children (DVAEYC) is hosting its annual Spring conference at the Pennsylvania Convention Center in Philadelphia March 13 & 14, 1998. ECELS staff will present workshops on Food Allergy, Using Books to Teach Children About Health, and Caring for Children with Behavior Problems. For more information, call DVAEYC at 215/963-0094. ECELS will be there … how about you?

Health consultants and center directors in Centre and nearby counties looking for a parent-staff education meeting topic can borrow a model display to teach farm safety. The display shows 20 common farm hazards and is available from AgrAbility for Pennsylvanians. The model is bulky and cannot be mailed, but folds for easy transport. Call Senior Project Associate Doug Schaufler at 814/863-7868 for more information.

The “I Am Your Child Campaign” announced that the First Years Last Forever parent video is available as a free rental at local Blockbuster stores.

Health consultants! Caregivers! Let’s hear from you! Call or write to ECELS to share stories of interest to local child care providers. ECELS staff of 6 tries to address the health and safety needs of a quarter of a million children in group care in Pennsylvania. We need eyes and ears all over the Commonwealth … help us out!

IT’S HERE !!!
The 3rd edition of “Preparing For Illness” is included with this edition of HEALTH LINK. Start off 1998 by using these exclusion and readmission guidelines to help keep kids healthy all year.
Many children begin their child care day by watching TV shows like Sesame Street™ and Lamb Chop’s Play-Along™. There may not be anything inherently wrong with watching a quality program every now and then in child care. But keep the recommendations of the American Academy of Pediatrics (AAP) in mind:

⇒ The AAP says to limit children’s TV viewing to 1 to 2 hours and choose only quality programs.
⇒ Active play time develops mental, physical, and social skills.
⇒ Young children don’t know the difference between programs and commercials.
⇒ Children who watch violence on TV are more likely to display aggressive behavior.

Make sure you let parents know how much TV viewing (if any) occurs in child care, and encourage them to limit TV in the evening. For a TV viewing brochure developed by the AAP and the Public Broadcasting Service (PBS), use the order form on page 7. For web browsers, check out the PBS site at <www.pbs.org> and the American Academy of Pediatrics’ site at

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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:**

- Car Seat Reminder postcard
- Dental Health Month materials
- Poison Look-Alike Display info
- Child Abuse Prevention materials
- Child Death Review Annual Report
- Fit in Fitness Quiz
- Take Out Foods pamphlet
- TV viewing brochure

**Self-Learning Module:**

- Menu Planning
  
  Learn how to plan healthy & nutritious meals. Video must be returned to ECELS within 10 days.

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Name: ____________________________________________________________

Organization: __________________________________________________________________________

Address: _______________________________________________________________________________

_____________________________________________________________________________________

City: ________________________ State: ______________ Zip: __________________

Telephone # and Area Code: ________________________________________________
ECELS AWARD


Ken has been a sanitarian with the PA Department of Health for nearly forty years and has moved with his position to the PA Department of Environmental Resources and most recently, to the PA Department of Agriculture in 1995.

Ken has shared his expertise with ECELS for nearly a decade and regularly contributes food safety and sanitation tips to help keep kids healthy in Pennsylvania child care.

Kenneth W. Hohe

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