

LISTEN UP!!

... for *News* you can *Use*

Keeping child health forms up-to-date is a burden with a purpose. Without up-to-date immunizations and check-up care, young children can catch vaccine-preventable diseases and become disabled by conditions that must be detected and treated during early childhood. Child care regulations require that providers have documentation that children are up-to-date according to the current recommendations of the American Academy of Pediatrics (AAP).

Remember that the AAP recommends hepatitis B, chicken pox (varicella) vaccine, anemia and lead screening for all young children now. The AAP recommends TB screening for children who are at high risk of exposure to TB only. All children should have vision, hearing and developmental screening at every visit, with objective testing for vision and hearing beginning at three years of age. The first visit to the dentist should occur by three years of age also.

Besides needing to comply with the regulation, caregivers must be sure children get recommended preventive health services because children in group settings have more exposure to infectious disease.

(Continued on page 2)

HEALTH AND SAFETY CALENDAR

Use the calendar to plan ahead.

May

- ◆ **National Trauma Awareness Month:** For free coloring /activity books that teach about traffic, gun, fire, and farm safety, contact the American Trauma Society, Pennsylvania Division, at 717/766-1616. Ask about trauma prevention training in your community too!
- ◆ **Breathe Easy Month:** Call 800/LUNG-USA for information on clean air activities sponsored by the American Lung Association. Learn about Secondhand Smoke and Asthma and earn child care training credit by completing ECELS' self-learning modules. Check off the order form on page 7.
- ◆ **National Transportation Safety Week:** May 11-17, 1997. Make sure all children under 12 years of age ride in the back seat of vehicles. To borrow a video that teaches kids to buckle up, call TIPP at 800/CAR-BELT.

June

- ◆ **Active Play Equipment Safety:** The Consumer Product Safety Commission reports that between 1990 - 1994, there were more than 31,000 accidents associated with backyard swing sets requiring treatment in a hospital emergency room. *The National Health & Safety Performance Standards* state that playground equipment should be checked on a monthly basis, and surfaces on a daily basis. Learn how to keep your indoor and outdoor active play areas safe, and earn child care training credit by completing ECELS' new Safe Active Play self-learning module. Use the order form on page 7.
- ◆ **Cooling / Ventilation:** *The National Health & Safety Performance Standards* recommend a draft-free temperature of 68°-82° F in all child care spaces. Have a reliable air conditioning contractor check out your facility's system. If you use fans, mount them high on the wall or ceiling. Make sure they are working properly now.

July

- ◆ **4th of July:** Teach children to stay clear of sparklers or snakes. All other classes of fireworks are banned in Pennsylvania. Urge parents to leave fireworks to the professionals for a safe holiday.

(Continued from page 1)

Improving the System

The PA Department of Public Welfare, the PA Department of Health and the PA Chapter of the American Academy of Pediatrics are working together to develop more efficient and effective ways to check child health records. During 1997, DPW and ECELS put some parts of the new system in place. The new system will increase the accuracy of the review of records and the ability of ECELS to offer timely technical assistance to child care providers.



The **first** improvement is to make it easier for providers and doctors to get copies of DPW forms. DPW supplies the Child Health Appraisal form, the CY51. The CY51 is a triplicate form that child care providers can order directly from the DPW warehouse now. To order forms from DPW, obtain a requisition form from your DPW Regional Office. One copy of the CY51 is for the child care provider's file; one copy is for the child's health professional to keep in the child's chart in the medical office; and the third copy is for the child care provider to give to DPW for an audit of compliance with the DPW requirement. Health professionals can use their copy as a template to update the child's child care record each time the child gets another check-up.

Use the most current version of the CY51 to keep child health data up-to-date and stay in compliance with DPW regulations. Try to give the forms to parents when it is time for their children to have a check-up visit. That way, you will remind the parent to schedule a check-up and the doctor or nurse clinician can use your input during the assessment.

Child care providers should fill out whatever information they already know before giving the CY51 form to the parent to take to the child's doctor. Be sure to fill in the contact information for the child care facility so the doctor knows who is requesting the information. (Some parents do not know the correct name, address or phone number of the child care facility where they take their child for child care.) Also, write on the form any health information already collected in the child's file so the doctor can review and update that information before signing the form. Attach a note that describes any concerns you have about the health of the child so that information is available to the doctor too.

Many parents do not understand that routine preventive health services require a special visit, different from the visits made for sick care. If the parent does not make an appointment for preventive care, the child may need services that cannot be given during a sick visit. When the child care provider needs the CY51 form completed, the child may have to make an appointment to catch up.



The **second** improvement is to invite child care providers to submit to DPW a full set of copies of the most current child health records and an enrollment list when DPW sends the notice that the site's license is coming up for renewal. This gives providers a chance to have their records checked to see if they comply with the DPW regulation. When DPW receives the copies of the records and the enrollment list, DPW sends the data to ECELS for analysis using a software program, called ECELSTRAK. ECELSTRAK generates a Compliance Summary on data entered from a random sample of the facility's child health records. ECELS sends the Compliance Summary and a note about any problems ECELS had processing the data, to the DPW Licensing Representative and to the child care provider - with an offer of help to solve any problems identified in the review. DPW staff will use this information during their licensing visit. After a phase-in period, DPW plans to make this pre-visit review mandatory.

(Continued on page 3)

(Continued from page 2)

When child care providers do not send in their health records in time for the review to take place before the site visit, DPW staff will use the old system of on-site record review. DPW sends ECELS these data so they can be checked via ECELSTRAK too. ECELS returns the results of record checks done after the compliance visit and offers to help correct problems in the same way as the pre-visit data are handled. Although the reports will arrive after the licensing determination is done, providers can use the feedback to prepare for the next licensing visit.

Collaborating For Kids' Sake

As with any new system, we all need to work together to solve problems we uncover. Providers and licensing staff should use updated forms that correspond with current recommendations. ECELSTRAK analyzes the data for each child in a standard way, but the data sent to ECELS is sometimes incomplete or hard to read. The bottom line for everyone is to ensure that all children have received recommended preventive health services so they can be safe and healthy in child care.



Eventually, ECELS hopes child care providers will be able to check their own child health records using computers and software similar to ECELSTRAK. A number of child care providers are working with ECELS to try using ECELSTRAK on computers at their facilities now. In addition to the summary for each facility, ECELSTRAK can generate a notice for an individual child that parents can take to their child's health professional about any missing information. It also aggregates data by county, by region and for the state. This will allow ECELS to identify areas where more service is needed from local health professionals. Please call ECELS if you have suggestions or questions about the process.

-- Susan S. Aronson, MD, FAAP
ECELS Director

SNIFFING POISON STINKS ☠☠☠

The Central PA Poison Center reports more elementary and middle school age kids are inhaling products like aerosol air freshener, correction fluid, and permanent markers to get "high". Over time this practice can cause permanent damage to the nervous system and other organs such as the lungs, kidneys and liver. It can also result in instant death the first time the substance is inhaled.

Poison education begins early! Teach children that they cannot identify a poison by smell, because some poisons actually smell good. Caregivers can also teach children by **not** exposing them to scented markers and crayons. Kids should grow up thinking it's unsafe and weird to smell markers.

- Betsy Winger, Central PA Poison Center / Suzanne Bradley, Ed.

Counting Children Continues ... ECELS' Feedback

The Fall 1996 edition of HEALTH LINK highlighted the issue of supervising and counting children in child care. ECELS suggested methods caregivers could use to keep track of children at all times throughout the day. Some suggestions included:

- assigning caregivers to specific children
- educating staff about the seriousness of counting children
- assigning the last adult out of the room, building, or van to act as a "sweep"
- setting a watch alarm or other tone to remind caregivers to count children
- using mirrors and door chimes to check who is entering or leaving the facility
- communicating with cordless phones, monitors, or walkie-talkies about children briefly separated from the group

ECELS asked readers to share their experiences and ideas about counting children. Here's what we learned:



Some of you said you count children enough already and are confident of your ability to keep track of children in most situations.

ECELS responds: Remember that it takes just one glitch in your system to result in a lost child, injury or death. Even systems you feel are working well should be re-evaluated every 6-12 months when you update policies and procedures. It could save a child's life.



Some caregivers identified those times when children are most likely to go unaccounted for: mixed-age playground time, field trips, orientation of new children and staff.

ECELS responds: Identifying high risk situations is a great way to raise awareness of the importance of counting children.

Senior staff were most willing to accept the idea



of risk even in routine situations.

ECELS responds: Arrange for experienced and new caregivers to share information at your next staff meeting. Offer actual examples of what can happen when children wander unnoticed. Have each staff member contribute one actual or made-up possible scenario. Better to consider unpleasant consequences ahead of time than to let them actually happen.



Some readers liked the idea of including "counting children" in a caregiver's job description.

ECELS responds: Putting counting children in the job description underscores the seriousness of this most important task.



Some caregivers suggested having "sweep" signs posted in those places we want to remember to check.

ECELS responds: Nice idea! To keep the idea fresh, replace the sign regularly. For instance, have children draw a picture of a broom or print the word "sweep" using paint or bold markers. Post the new reminders where the old "sweep" signs used to be.



Reminders such as wrist watch or clock alarms may lose their effectiveness as the novelty wears off. One creative caregiver taught the children in her group to count in Spanish during transition times. Each child would claim a particular number for that day and count off when directed. This caregiver told ECELS that on one occasion when she forgot to count, the children actually reminded her because they so look forward to showing off their new second language skills.

ECELS responds: What a wonderful way to keep track of kids and educate them at the same time!

Understanding Children's Growth Measurements

After a health professional weighs and measures a child, plots the measurements on a growth chart, and records the percentiles on a child's health assessment form, the information then comes back to you, the child care provider. Often there is no explanation of what the measurements actually mean.

What is a percentile?

A percentile compares a child's height or weight to other children of the same sex, age, or height in the United States. For example: If Marcie's height for age is at the 50th percentile, her height falls in the middle of the heights of other girls who are the same age. Marcie is taller than half (50%) the girls of the same age, and shorter than half. If Jeremy's height for age is at the 25th percentile, he is taller than 25% of the boys the same age, and shorter than 75%.

Percentile guidelines

You must compare weight and height percentiles for age with each other and follow the pattern of a child's growth over time to know what these measurements mean. If the percentiles are very different, or if they change suddenly, the child may have a growth problem. Taken alone, a single height percentile or weight percentile can have very different meanings.

A height less than the 10th percentile for age shows that a child is shorter than most children the same age. This may mean that the child:

- is normally short, especially if the parents are short
- is not growing properly.

A weight that is less than the 10th percentile for age shows that the child weighs less than most children the same age. This may mean that the child:

- is a short child (in the 10th percentile for height too) and the right weight for height
- is very thin if the height percentile is much higher than the weight percentile
- is dehydrated
- is losing weight or not gaining weight because of a disease.

A weight more than the 95th percentile for age shows that the child is heavier than most other children the same age. This may mean that the child:

- has a heavy bone and frame size (if the height percentile for age is also around the 95th percentile)
- is fat or obese.

How do I use height and weight percentiles in child care?

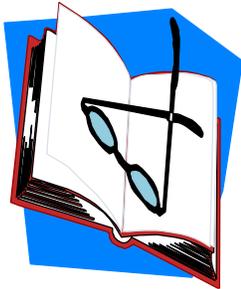
Most children can regulate the amount of food they eat. As a caregiver, concentrate on providing healthy food choices in a pleasant setting, provide opportunities to be active, and meet children's emotional and social needs without using food for punishment or reward. Doing this will provide a happy, healthy environment for the child to grow and develop the body that is right for that child.

For children whose weight and height percentiles for age are very different from each other, obtain the parent's consent to ask the child's health care professional for specific feeding instructions. Health professionals do not just use one set of measurements. They look at the pattern of growth over time to identify problems. You may need to make some adjustments in the feedings the child receives in child care.

-- Marianne Minsek Gordon, MPH, RD
Coordinator, Nutrition Education and Training Program
PA Department of Education

References

Measures of a Healthy Start, University of North Carolina.
Satter, E.M. *Internal regulation and the evolution of normal growth as the basis for prevention of obesity in children*. *Journal of the American Dietetic Association*. Vol. 96, No. 9, pp. 860-864, 1996.



ECELS BOOK REVIEW

Caregivers looking for help with children who play aggressively or who practice TV violence will enjoy reading *Moving Young Children's Play Away From TV Violence*. This 78 page spiral ring soft-back book describes:

- ◆ imaginative and imitative play for children ages 2-5 years
- ◆ how to help children understand the difference between real and pretend
- ◆ activities that encourage non-violent pretend play
- ◆ self-control and anger management abilities of children at different ages.

The guide also includes facts about kids and TV, and a sample letter to parents about limiting TV viewing. For purchase information, contact the Ready At Five Partnership, 300 Cathedral Street, Suite 500, Baltimore, MD 21201, 410/727-6290. Price is \$10.00 including shipping and handling.

Fire and Burn Education Program is a 93 page preschool fire safety curriculum full of games, songs, ideas for skits, and reproducible activity pages. To order, send \$19.95 plus \$3.75 shipping & handling to the Burn Prevention Foundation, 5000 Tilghman Street, Allentown, PA 18104. Call 610/481-9810 for information about member discounts. Coloring / activity books for preschoolers are also available from the Burn Prevention Foundation.

Staff Health Freebies

- ✓ Figure out your daily calorie intake and fat allowance by using a simple chart. Order the pamphlet "How To Develop a Daily Fat Budget" to learn about low-fat food choices.
- ✓ Caregivers interested in losing weight sensibly will want to read "The 50 Greatest Weight Loss Tips." This pamphlet delivers very practical tips in a non-threatening manner. If you think you've heard every weight loss strategy, try this pamphlet ... you'll be surprised to learn some new ones.
- ✓ You'll be motivated to begin that exercise program you've been meaning to start after you read "Not Getting Enough Exercise ... What's Your Favorite Excuse?"
- ✓ "Understanding Your Cholesterol" defines lipoproteins, triglycerides, and other medical terms in a very understandable way. Learn about ways to get your blood fats under control.
- ✓ The work of an early childhood educator is mentally challenging as well as physically exhausting. In fact, stress is listed as a child care occupational hazard in the *National Health & Performance Standards for Out-of-Home Child Care*. Make sure you get enough sleep to re-charge your body. Order a copy of "Sleep Problems: Tips From A to Zzzz."

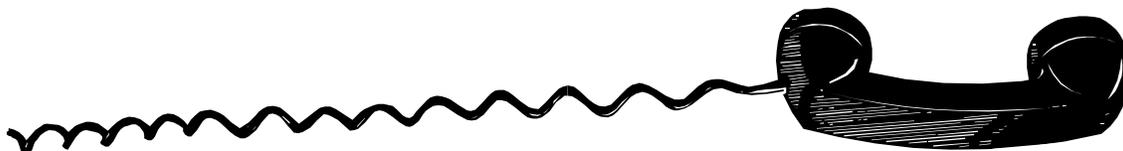
To order any of these pamphlets, use the order form on page 7.

It's For You !!!

Parents and caregivers can call the Beech-Nut Office of Consumer Affairs at 800/523-6633 and ask to hear a tape on a particular infant care topic. Taped messages are recorded by nationally recognized experts in child care, pediatrics, nutrition, and child psychology. Some topics available to callers include:

- Tape #3 When can I start to use cow's milk? Alvin M. Eden, MD
- Tape #4 Colic: Why does baby cry every day at the same time? Segundo Perez, MD
- Tape #20 Should I discipline my baby? Burton White, PhD
- Tape #23 How important is fluoride for baby's teeth? Bruce Douglas, DDS
- Tape #28 How do I know when baby is ready for solid foods? Ellyn Satter, RD

Call Beech-Nut for a list of other taped messages available. The hotline is accessible Monday through Friday, 9:00 am - 8:00 pm EST.



ECELS Q & A

Q: Can I enroll an unimmunized child in my child care program?

A: The Pennsylvania Department of Public Welfare's child care licensing regulation § 3270.131 requires child care facilities to have children's age-appropriate health assessments on record. This means that children's health records must be up-to-date for immunizations, screenings, and preventive care as recommended by the American Academy of Pediatrics.

If a child's health record is not up-to-date, DPW can cite the program for being out of compliance. Confusion develops when parents request a medical or religious exemption. The child care licensing regulations do not expressly state what a program can do in this situation. If you wish to enroll an unimmunized child, get the parent's request for medical or religious exemption in writing and ask your DPW licensing representative for guidance. Providers enrolling unimmunized children may wish to consult an attorney to discuss any legal risks.

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)

- How To Develop a Daily Fat Budget
- The 50 Greatest Weight Loss Tips
- Not Getting Enough Exercise ...
- Understanding Your Cholesterol
- Sleep Problems from A to Zzzz

Self-Learning Modules:

- Secondhand Smoke
- Asthma
- Active Play

Name: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone w/area code: _____

ECELS AWARD

The Spring 1997 award goes to family child care provider Lorraine Ann Perillo of Bucks County. Lorraine has completed seven ECELS self-learning modules in the past two years and has earned 13 child care training credits. Lorraine began earning credit by checking the immunizations of the children in her care as part of the Immunization self-learning module. She is currently working on the Fire Safety module.

Children in early care and education programs benefit when caregivers like Lorraine Perillo keep learning about health and safety. Great work, Lorraine!

LORRAINE ANN PERILLO

IN THIS ISSUE:

- Checking health records
- Poisons
- Counting children feedback
- Growth measurements
- Tube feedings insert

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