

NORTH CAROLINA CHILD CARE HEALTH AND SAFETY BULLETIN

NORTH CAROLINA CHILD CARE HEALTH AND SAFETY RESOURCE CENTER

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About The Resource Center

The NC Child Care Health and Safety Resource Center is a project of the Department of Maternal and Child Health, School of Public Health, The University of North Carolina at Chapel Hill. Funding for the Resource Center originates with the Maternal and Child Health Title V Block Grant of USDHHS's Health Resources and Services Administration/Maternal and Child Health Bureau, awarded to the University under a contract from the Division of Public Health, NCDHHS.

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In This Issue

- 1 Child Safety
- 2 Celebrate the Week of the Young Child
- 3-4 Protect Children From Abuse
- 5-6 Parent Pages
- 7 Selecting Safe Plants for Outdoor Learning
- 7 Child Care Licensing Rule Changes
- 8 Ask the Resource Center

Child Safety

Children deserve to live and play in safe environments and with the security that the adults in their lives will care for them and help keep them safe. Whether in the home, in child care, school or in the community, it is the responsibility of adults to provide a safe and nurturing world for children to grow and develop into healthy adults.

How can adults in today's world offer children a safe environment? We can child proof our homes and our child care facilities, make our playgrounds safe, practice safety drills, wear safety pads, helmets, and other gear. We can feed our children healthy foods and teach them rules and behaviors that will keep them safe and healthy.

How can we help children learn to be safe? Children model their behavior after the adults in their lives. We help them when we consistently model healthy and safe behaviors and routines. When we take a head count before leaving the playground, practice emergency drills, keep shoes tied, clean up spills, and pick up toys children learn that their safety is valued. When we take care of our bodies, eat well, sleep well, exercise and show respect for one another, children learn that their health and well being is valued.

To take care of others we need to take care of ourselves. It comes back to the message we get when we are flying in an airplane. When the oxygen masks drop down we are told to put on our



mask first and then help our child. We wouldn't be able to help if we didn't have the oxygen we needed, so we must begin with ourselves.

This issue of the North Carolina Child Care Health and Safety Bulletin will address a number of topics related to child safety. Unintentional injuries are the number one health hazard for children. They are also the leading cause of disability, permanent or temporary, in those over the age of one year. (Arena and Settle). Children in today's world face risks and hazards never experienced by previous generations. Advances in technology have both enriched and endangered our lives. The threat of terrorism is present in all of our lives. As responsible adults, we must be the overseers of the children around us, learn how to take care of situations that may arise, and teach children safe and healthy behaviors. At times you may need to seek more information, medical or professional help. We can never eliminate all unintentional injuries, but we can learn ways to create safe environments that will reduce injuries and teach children that their safety is important and that they are important in the world.

References:

- Arena, J. and Settle, M. (1987). *Child Safety is No Accident*. Berkely Books, NY.
- Smith, C. and Hood, A. (retrieved 2/10/03). *Safety First: Preschool Safety Education*, Healthy Child Publications, Harbor Springs, MI, retrieved 2/10/03 from www.healthychild.net/Articles/SF27SafetyEd.html



Celebrate the Week of the Young Child April 6 – 12

NAEYC designates the Week of the Young Child dates and theme for the purpose of promoting the needs of young children, their families, and the early childhood programs that serve them. The theme for 2003 Week of the Young Child is "Children's Opportunities – Our Responsibilities."

The Week of the Young Child is a time to acknowledge children in a special way. It is a time for the community to let the children know they are valued members of society – they are the future. Many child care facilities across the United States take this opportunity to strengthen their commitment to the goal that each and every child experience the type of early environment – at home, at child care, at school, and in the community – that will promote their healthy development and support early learning.

Each child care facility can find a way to make this week a time to do something special to celebrate children. Inviting families and community members to join in the fun helps raise public awareness regarding child care.

Suggested activities:

- Invite families to participate in your story time and other reading activities. Some parents, grandparents, or other family members may enjoy reading or telling stories to a group. Others might become a reading partner to a child in the classroom, while some parents may prefer to chaperone a field trip to the library.
- Hold a kick-off breakfast for family and community reading partners. Photograph children and their partner (preferably someone who can read with the child more than once a week). Then post the pictures on a sheet of paper. Ask the child-adult partners to write their comments about the books they read under their picture throughout the week.
- Encourage families to "turn off their tvs" by organizing a family night. During the night offer adult-child activities that families can repeat at home.
- Invite parents to the outdoor play area and provide parent-child activities that promote physical activity and emphasize the importance of exercise to healthy growth and development.

Here are some ways others have enjoyed celebrating the Week of the Young Child:

“We gather at our local mall with several other preschools. We start off with a parade that includes our staff, children and their parents. Then each preschool or child care program has a table set up throughout the mall, with activities for children to do. Parents and children really love this.”

– Terri.

“To “kick off” the week, on Monday, the children invited grandparents or a special guest to spend time with them in the classroom. The guests were able to play with their hosts in the block area, by helping the children build houses and roads, complete puzzles, play in the sand boxes and water tables, and participate in the dramatic play area, while pretending to be mommies and daddies. Guests were then able to have lunch with the children. A good time was had by all.”

– Karen Ermler,
Curriculum Specialist, Babyland.

“Every day of the week will be a different “fun” day. Pajama day, beach day, cowboy day, crazy hair day and on Friday we will all wear t-shirts that I had made in honor of the Week of the Young Child.”

– Amy, *Amy's House.*

However you choose to celebrate, enjoy the Week of the Young Child with the children in your care and their families!

Reference:

National Association for the Education of Young Children (2002). *NAEYC's Week of the Young Child*, retrieved 2/24/03 from www.naeyc.org.



Protect Children From Abuse

Child abuse is a non-accidental injury or pattern of injuries to a child for which there is no reasonable explanation. (California Childcare Health Program). It remains a horrific public health and social problem in the US. In 1999, approximately 3 million children were reported to state and local child protective services agencies for suspected child abuse and neglect. Nearly 100 US children die each month as a result of abuse or neglect, and thousands suffer physical and mental consequences, sometimes for the rest of their lives (Massey-Stokes).

All child care providers are required by law to make a report to their local Department of Social Services (DSS) if they have a reasonable suspicion that a child in their care has been abused or neglected. This includes child care center directors, teachers, aides, family child care providers, and school-age care providers. The program you work for is not allowed to fire you or discipline you for making a report, even if your supervisor disagrees with you.

The sensitive issue of child abuse needs to be carefully

handled. Reporting suspected child abuse is difficult, but necessary. The children in your care trust you to protect them from people who might hurt them.

It is normal to doubt your own judgment, fear parent reprisals,

Child care providers are in the unique position to be perhaps the greatest source of support and information available to parents of children in your programs. The child care setting is the only place where young children are seen day after day by people trained to observe their appearance, behavior and development. Below are some ways caregivers can help to prevent child abuse.

- ☑ Give families information on child development and appropriate discipline.
- ☑ Model good child care practices.
- ☑ Build a trusting relationship with families and discuss concerns.
- ☑ Help families establish positive relationships with their children.
- ☑ Refer families to community resources and support services.
- ☑ Inform parents that you are required to report suspected child abuse.
- ☑ Know the signs of parent burnout so you can offer support.
- ☑ Have a parent-staff workshop at your center with information about the issues.
- ☑ Educate young children about their right to say no.

worry about losing your job, and fear that the child will be withdrawn from the program. When carrying out your responsibility to report suspected abuse, it is important to acknowledge your own feelings and find the emotional support you need so your feelings and concerns do not prevent you from reporting suspected cases of child abuse.

In January, 2003, a news release from the NC Dept. of Health and Human Services states that reports of child abuse and neglect have risen 5 percent in a year. Now we need to go further and stop abuse before it happens.

Preventing Abuse in Your Child Care Center

Child care providers should take steps to reduce the possibility of child abuse or neglect occurring within the child care setting. In North Carolina, background checks are required for both prospective and current employees. The proposed NC Division of Child Development rule change requires household members in family child care homes and centers in a residence to submit criminal record checks. Other steps to take are:

- ♥ Provide a high level of visibility throughout the inside and outdoor areas, including restrooms. This discourages secretive activities. It also helps protect staff members who may be falsely accused of abuse.
- ♥ Conduct daily visual health checks when each child arrives. Document any scratches, bruises, or other apparent injuries.
- ♥ Educate yourself to recognize abuse or neglect.

Prevention efforts will protect many children from abusive environments but intervention will still be needed to insure children's safety. We need to know and recognize some of the signs and

Continued on Page 4

symptoms in order to know when to report child abuse and neglect.

Remember that all children sometimes act in these ways and all children can develop bumps and bruises due to normal childhood activities.

Physical abuse might be suggested by the following: unexplained bruises, selts, burns, or fractures; aggressive behaviors, fear of adults including parents; and emotional or physical withdrawal.

Sexual abuse might be suspected when a child: engages in sexual activity that is not appropriate for the child's age, and/or has a detailed understanding of sexual behaviors; returns to bedwetting or stops talking; has sleep difficulties including nightmares; or has pain, itching, bruising or bleeding in the genitalia or frequent urinary infections.

Emotional abuse is sometimes the cause of: speech disorders, delayed physical or emotional development; habit disorders such as rocking or thumb sucking; unduly passive or extremely demanding behavior; antisocial, depressed or delinquent behavior; and very low self esteem.

Signs of neglect include: abandonment by caregiver, unattended medical needs, hunger, poor hygiene, lice, distended stomach, poor social skills, pale complexion, listless demeanor, regular display of fatigue, or self destructive behavior.

Neglectful situations may be the result of poverty rather than parental lack of concern for their child's welfare. Being sensitive to the special circumstances of families living in poverty will help you determine whether supportive services are needed for the family or if neglectful care is the issue and DSS must be notified. Successful interventions include: provision of an adequate income, food supplements, affordable housing, health care, child day care, parental education, job training, and

employment opportunities. When adequate support is provided, families have the opportunity to take care of their children.

References:

Health and Safety Notes (2003). *Child Abuse Prevention*, California Childcare Health Program, retrieved 3/6/03 from <http://www.ucsfchildcarehealth.org/webpages/childabuse.htm>

Massey-Stokes, M. (retrieved 2003). *The Medicine Chest: Shaken Baby Syndrome*, retrieved 2/24/03 from www.healthychild.net/Articles/MC32ShakenBaby.html. Healthy Child Publications, Harbor Springs, MI.

National Clearinghouse on Child Abuse and Neglect Information (2001). *Prevention of Neglect*, retrieved 3/6/03 from <http://www.calib.com/nccanch/pubs/user-manuals/neglect/prevent.cfm>

NC Department of Health and Human Services (2003). *Reports of Child Abuse Rise 5 Percent*, retrieved 2/24/03 from www.dhhs.state.nc.us/pressrel/1-29-03.htm

Palmer, D. and Smith, C. (2003). *Safety First: Preventing Abuse in Your Child Care Center*, retrieved 2/24/03 from www.healthychild.net/Articles/SF29Abuse.html. Healthy Child Publications, Harbor Springs, MI.



April is

National Autism Awareness Month
National Youth Sports Safety Month
National Child Abuse Prevention Month

April 2 is Kick Butts Day (kick the smoking habit!)

April 6 – 12 is Week of the Young Child

April 7 – 13 is National Public Health Week

April 13 – 19 is National Infants Immunization Week

April 21 – 25 is National Playground Safety Week

May is

Asthma and Allergy Awareness Month
Child Passenger Safety Month
Mental Health Month
Skin Cancer Awareness Month
Healthy Vision Month

May 1 is Worthy Wage Day

May 3 – 10 is National SAFE KIDS Week

May 5 is Children's Day, Cinco de Mayo

May 6 is Childhood Depression Awareness Day

May 9 is National Child Care Provider Appreciation Day

May 11 – 17 is Food Allergy Awareness Week

May 15 is International Day of Families

parent



s a f e d

Poison Prevention:

The most common age for poisonings among children is under 5 years of age. Young children are very curious, and they will eat or drink almost anything. This year in the US, two million children will swallow a form of poison.

Poison Prevention Tips

- Keep medicines and dangerous products locked up and out of reach of children.
- Ask for child-resistant containers for medications, but know that these caps will only slow the child down!
- Never call vitamins or medicine "candy."
- If you are called away while using a dangerous product, take it with you.
- Make sure young children and pets are kept away from products such as paints, floor stripping, paint removal, pesticide applications, and fertilizers. Keep these items locked. Use non-toxic alternatives when possible.
- Keep children away from flaking or chipping paint, particularly in houses built before 1960 because the paint could contain lead. Have old paint tested for lead.
- Keep products in their original containers. Never transfer dangerous products into food or beverage containers.
- Do not mix chemicals. Read product precautions before use.
- Identify plants around your home and make sure they are safe. Get a safe plant list from the Poison Control Center. Teach children not to put any part of plants in their mouths.
- Have the poison control number on the telephone.



We encourage you to copy page 5 and 6 and distribute them to parents.

For poisoning emergencies or information, call 1-800-876-4766.

Keeping Your Cool With Kids . . .

1 Take time for yourself each day. In our fast paced world, we often neglect taking care of ourselves. It's easier to keep your cool when you have nurtured yourself and met some of your own needs.

2 Know what to expect from your child developmentally so your expectations are realistic. If we know that developmentally toddlers are supposed to say "no" to everything we say or that as adolescents move towards independence, their developmental task is to challenge their parents, it's easier to not take things personally. When we take things personally, that's when anger and defensiveness often sets in.

3 Be sure that your communication is clear. Sometimes kids seem defiant and don't do what we ask because they haven't understood our expectations. Use short statements; make one statement at a time; be visual with what you want (e.g. demonstrate, use pictures).

4 Listen to your child. Listening and understanding is not the same thing as agreeing. The best way to show the child that you are listening and that you do understand is to "say out loud" what your child is feeling, wanting, or needing. When kids feel like they are being heard, they don't have to "up the ante" – misbehave even more – to get our attention.

5 Praise your child. Most of us respond more to a positive comment than a negative one. Kids want to please their parents. They will increase the behavior that you seem to notice – and like – the most.

6 Take a "time out." Sometimes, when everything else is not working, and you feel yourself reaching a breaking point, you need to take a "time out." Remove yourself from the child (if it is safe to do so) or count to 10 before you react.

7 Call Prevent Child Abuse. When you need more than tips, call Prevent Child Abuse at 1-800-4-AChild (1-800-422-4453) and speak with a counselor.

Resource:

Spencer, C. (retrieved 2003). *7 Tips For Keeping Your Cool With Kids*, retrieved 2/24/03 from www.childabuse.org/7tips.htm

1.800.246.6731



Shaken Baby Syndrome

The leading cause of death from physical abuse in the US is Shaken Baby Syndrome (SBS). Victims of SBS range in age from a few days to 5 years with the average being 6 – 8 months. The injuries result from the vigorous shaking of an infant or child by the arms, legs, chest, or shoulders. The severity of the injuries are comparable to falling from a third story window.

Shaking a baby is extremely dangerous because a baby's muscles are very undeveloped. The movement tears blood vessels and nerves in the brain and causes the brain to swell. The devastating consequences of SBS may include mental, physical, or emotional problems and crib death.

If a baby or young child shows any of the following symptoms of SBS, immediately call 911:

- Dilated pupils
- Difficulty breathing
- Altered consciousness
- Seizures (rolling of eyes upward into the head)
- Blood spots or pooling of blood in the eyes.

Vomiting, irritability, constipation, and lethargy can be signs of shaken baby syndrome. A baby with these symptoms should be carefully monitored and medical attention should be sought if symptoms persist.

To avoid unintentional SBS:

- Never toss a baby or young child into the air! This can lead to head and neck injuries.
- Never try to calm a baby by extreme bouncing on the knee. This is jarring and can cause head or neck injury.
- Shaking a baby is not a first aid technique to rescue a baby who is choking or not breathing. Keep your first aid and CPR certifications up to date so you can provide the correct first aid or CPR rescue.

Shaken baby syndrome is 100% preventable. Below are resources for more information on SBS and the ways to prevent SBS.

Reference:

Massey-Stokes, M. (retrieved 2003). *The Medicine Chest: Shaken Baby Syndrome*. retrieved 2/24/03 from www.healthychild.net/Articles/MC32ShakenBaby.html. Healthy Child Publications, Harbor Springs, MI.

Resources for Child Abuse and Shaken Baby Syndrome:

National Center on Shaken Baby Syndrome, 2955 Harrison Blvd. #102, Ogden, UT 88403; 888- 273-0071; www.dontsbake.com

Prevent Child Abuse America, 200 S. Michigan Ave., 17th Fl., Chicago, IL 60604-2404; 312- 663-3520; www.preventchildabuse.org.

The Shaken Baby Alliance, PO Box 150734, Ft. Worth, TX 76108; 877-6-ENDSBS; www.shakenbaby.com

Healthy Self Image

Children, like adults need healthy self-esteem. Children who feel good about their own abilities are more confident and better able to manage life's daily challenges. Self-esteem is developed through the love, encouragement, and security provided at home and through genuine accomplishments.

Children learn and develop at different rates, and though each child will have different talents, no child is good at everything. Some may run fast, while others may read early, speak clearly, or be the first to tie their shoes. Offer children opportunities to develop and practice new skills and discover budding talents. When parents acknowledge their accomplishments, whether it's putting a toy away, getting dressed, kicking a ball, or writing their name, children learn that their parents appreciate their accomplishment and respect their abilities. Let children know that it is okay to make mistakes and that even adults make mistakes sometimes!

Healthy Image Activity for Home

Let your child choose an activity in which you or the whole family will participate. Let the child be the leader or teacher for the activity.

Books to Read:

I Like Me! By Nancy L. Carlson (New York: Viking, 1988).

I Make Music, by Eloise Greenfield (New York: Black Butterfly, 1991).

All About You, by Catherine and Laurence Anholt (New York: Viking, 1992).

A Day's Work, by Eve Bunting (New York: Clarion, 1994).





April 21 - 25 is National Playground Safety Week!

When we often think of playground safety, we generally think about equipment safety, maintenance and supervision. These are valid concerns about which a wealth of information is available. To learn more about playground equipment safety, maintenance, and supervision go to the website for the National Program for Playground Safety, www.uni.edu/playground/safety_week.html

Child Care Licensing Rule Changes Proposed for April 2003

The NC Child Care Commission is proposing some changes to the licensing rules for child care centers and family child care homes in April 2003. You may review a full copy of the proposed rule text by going to www.dhhs.state.nc.us/dcd/rultext.pdf. You may also call DCD at 919-662-4535 or toll-free at 1-800-859-0829 to request a copy of the rules.



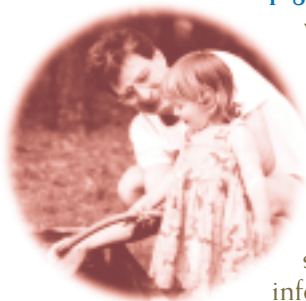
Selecting Safe Plants for Outdoor Learning Environments



Plants are a wonderful resource for play and learning. They can provide a variety of play settings, and they provide the valuable shade we need in summer months.

Whether you have great gardening skills or not, try to provide natural areas in your outdoor learning environment where plants can grow. Plants stimulate all the senses – touch, sight, taste, smell, and hearing. They provide opportunities to explore and learn. They offer opportunities for children to see food growing and to watch birds and insects in their natural habitats. Plants change with the seasons. When choosing plants consider fragrance, size, texture, and auditory stimulation. A useful resource by Robin Moore, Director of the Natural Learning Initiative at NC State University, is a book called *Plants for Play: A Plant Selection Guide for Children's Outdoor Environments*, available through MIG Communications, (510)845-0953.

Many child care providers have valid concerns about poisonous plants that grow in North Carolina. There are many resources available to help you identify which plants are poisonous and to determine the toxicity level of the plant. Poisonous plant lists are available through the NC Division of Child Development, 1-800-859-0829



When developing an outdoor learning environment, take an inventory of existing plants, and evaluate them for play value, potential shade value, and assess their safety. Make sure plants are not poisonous and that they do not present other serious problems such as choking hazard, thorns or sharp parts. Two great resources for information about the use of plants in outdoor learning environments are listed below.



References:

Moore, Robin (1993). *Plants for Play*, Berkeley, CA, MIG Communications.
National Program for Playground Safety (2003). *Playground Safety Week 2003*, retrieved 2/24/03 from www.uni.edu/playground/safety_week.html

Ask the Resource Center

A father called to let us know his adult sister would pick up his son at the end of the day. We were very uncomfortable letting someone we don't know take the child from the center. We don't want to put any child in a potentially dangerous situation. Do you have any suggestion for us?

NC Division of Child Development Child Care Regulation, .0801 (4), states "The application shall include the names of individuals to whom the center may release the child as authorized by the person who signs the application." Though it does not state what to do to change the authorized individuals, it would be to everyone's advantage to develop a policy that protects the child's safety. Your staff and the child's parent/guardian will feel more secure knowing the child is going home with an authorized individual. By following procedures outlined in a policy your center may also reduce its liability risk.

As you develop your policy consider the following:

- How your center will document changes or additions in individuals authorized to pick up a child.
- What to do if an authorized individual arrives in an impaired state.
- How to authorize an individual to pick up a child in an unexpected situation, as in your situation.
- How the staff will make sure an individual they don't know is the person authorized to pick-up the child.
- How to inform staff and parents about the policy.

The Child Care Health Consultant (CCHC) in your area will be able to assist you in policy development. We encourage you to call us at 1-800-246-6731 for information about the National Standards for Health and Safety and to find out how to contact the CCHC in your area.



HEALTH BULLETIN

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EDITOR:

Janet McGinnis

CONTRIBUTORS:

Jonathan Kotch, Lucretia Dickson, Jacqueline Quirk, Jeannie Reardon, Judy Sowerby.

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FOR MORE INFORMATION

or if you would like to send comments

WRITE:

NC Child Care Health & Safety
Resource Center
1100 Wake Forest Road, Suite 100
Raleigh, NC 27604

OR CALL:

1-800-246-6731

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8 • HEALTH AND SAFETY BULLETIN • APRIL 2003

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