

## Sharpening Your Observation Skills

Robin Yu: Welcome, everyone. And thank you for standing by. My name is Robin Yu. And I'm the program assistant for the National Center on Early Childhood Health and Wellness. I am pleased to welcome you into our quarterly webinar for child care health consultants.

Today, we will be discussing health and safety observations. Before we begin the presentation, I do have some announcements for you. All participants will be muted throughout the presentation portion of the webinar. There is a slide presentation being shown through the webinar system. If you do have a technical question, please type it in the chat box on the right corner of your screen. There will be times where the presenters may ask you questions or to share your ideas. And the same thing, you can type your responses in the chat box. There is a lot to cover within the next hour. So, you may submit your questions anytime by typing in the chat box on your screen. Depending on the time, we make answer questions at the end of the webinar or in the child care health consultant community on MyPeers.

This webinar is being recorded. In a couple days, we will send you an email with a lot of information. It will include a PDF of today's presentation, a link to the recorded webinar, instructions for joining the Child Care MyPeers Health Consultants online community, a survey, and certificate. So, please be on the lookout for this very important email. Now I'll turn it over to my colleagues in the National Center, Kimberly Clear-Sandor and Tobie Barton.

Kimberly Clear-Sandor: Thank you, Robin. And welcome, everybody. We're so happy that you've joined us today as we begin our conversation about addressing health and safety through observation and collaboration. We have a diverse group of registered participants for today's webinar, including child care health consultants, directors, Head Start managers, and many others. We're so happy you're all here and joining us today to talk about health consultation and observation. And I love that everyone's saying hello in the chat box. So, right big hello right back out to all of you. My name is Kimberly Clear-Sandor. And I'm a senior training and technical assistant associate with the National Center on Early Childhood Health and Wellness. I'm a nurse. I'm a family nurse practitioner and a child care health consultant who's been working with program staff and families. I'm not going to tell you how many years.

But it seems to be getting up there more, and more, and more. I do love working with early childhood programs. And I find my early childhood partners are some of my favorite people in the world. So, I'm happy to be here with you today. And Tobie Barton, our colleague at the National Center, is also here. Tobie?

Tobie Barton: Hi, everyone. It's really great to be talking with you today. I'm also a senior training and Technical Assistance associate with the National Center on Early Childhood Health and Wellness. In particular, I have expertise in supporting child care health consultants, injury prevention, and playground safety.

Kimberly: Awesome. Thank you, Tobie. So, as we go through today's presentation, Tobie and I are going to be going back and forth a little bit. Tobie's going to be bringing the early childhood education perspective. And I'm going to be bringing that health and safety lens. And hopefully,

we can share how the two work together to create those really important learning environments that are healthy and safe so children can grow and learn. Our learning objectives for today's webinar are up on the screen. So, I'm not going to read them to you. But after the webinar, we hope that you'll all have knowledge of resources that will really support you as you build your observation skills and think about how you discuss your observations with your early childhood education partners in those programs.

So, that together you can work on improving those health and safety practices. There's many reasons an early care and education program may ask a health consultant to perform an observation. Perhaps, you've done a recent training, and the director is wondering how well the implementation is going in the classroom. And they would just like another set of eyes in there to check out how it's going. Or perhaps, you just want to do a check-in on some healthy behaviors such as hand washing or diapering, and the program director has thought it might be great if you could do some observations just to check in and see how it's going. And there are other times where you may just do an observation of general practices or general environment for just health and safety.

But it doesn't really matter the reason that you're doing the observation. It's critical that you as a consultant understand why you're doing it, understanding when you're looking into a classroom and the environment that's going on there that there's more than just health and safety going on.

There's a lot of learning going on. And that the health consultant who understands that there's characteristics and challenges as early childhood programs try to create these learning environments, that when you're doing your collaboration and working on observation, you have to keep these things in mind. So, to begin today's webinar, we're going to talk a little bit by grounding all of us in the world of early care and education and the work of early care and education programs. So, Tobie's going to share a bit about the characteristics of these programs, thinking about the standards, regulations, and approaches to learning and how they all impact how health and safety is covered in the program. So, with that, I'm going to turn it back over to Tobie.

Tobie: Thank you, Kim. So, one thing to keep in mind is that child care health consultants are often health professionals who may come from a variety of specialty areas, a variety of health care delivery settings. And they might be unfamiliar with the purpose and the goals of early education. And the most successful consultants work with programs to support health and safety. And they do so within that context of early care and education programs. So, they really have an understanding of the program's perspective. They have an understanding, obviously, of the importance of health and safety.

And they help the program identify those health and safety priorities. But it can be complicated. Because programs are also trying to meet learning goals. They're trying to meet regulations. They're trying to establish an early care and education framework. And sometimes health doesn't always fit in perfectly with that. And health consultant plays a really important role of merging those two worlds — of merging health and safety with the goals of early education. It's important to remember the ways that health and learning overlap. So, as you know, through the development of nurturing relationships, an early childhood environment

may lay the foundation to support the development of physical, social, emotional language and communication skills.

Research demonstrates that the significant growth that happens in the early brain and in child development during those first five years of a child's life and the positive effects that quality early childhood programs have on children's learning health and success in life all can happen while meeting the needs of the families and child care — all can happen while meeting those health and safety goals as well as those early education goals. So, as I mentioned, today's early care and education programs are usually licensed and regulated by a state agency. And in some states this may create minimal health and safety standards in order to operate an early care and education program. In some states those regulations support much higher standards for health and safety. It's very important that the child care health consultant has an understanding of the regulations that govern each state's programs. Research on child development has really driven the early childhood field.

And so we see a lot of states now supporting quality as well when thinking about how to establish and support early care and education setting. So, quality environments are recognized as critical in supporting children. And a component of quality is creating activities and opportunities that are aimed at supporting children's optimal growth and development. So, for example, a teacher may place a child on their tummy and put objects that are just out of reach to promote the mastery of those reaching and grasping and rolling over skills that are so important for their development. And so through careful observations and assessments and planning, teachers can create opportunities for children to explore their environments and to maximize their learning.

And states have supported early care and education programs that are striving to be quality settings for young children. So, there are a lot of different ways to look at quality. In general, it's important for a child care health consultant to understand the goals of an early care and education program. It's important for the CCHC to support children's healthy growth and development. And it's important for a CCHC to be effective in collaborating with the early care and education programs with the staff and the directors in those programs in order to meet those goals.

Kimberly: Tobie, I think when you go through these items that create a frame for all the work being done in early care and education, as a health consultant walking in we may look at just the health and safety piece. So, thinking about all these other pieces that are going on at the same time really allows that health consultant to be more effective with their observations and planning with the program.

Tobie: Absolutely. This website here on the slide is a great resource to find your state regulations. So, as a child care health consultant, if you're not familiar with the regulations that are in place to ensure those health and safety standards in the programs that you're working with, this is a great place to find those regulations. And each state is different. Each state has their own set of regulations. So, CCHCs need to be aware of the regulations that govern the environment in which they work. And then, of course, they also need to know the evidence-based health and safety standards such as those found in caring for our children that can support that program in moving along a quality continuum.

So, in states that may have only minimal health and safety requirements in their regulations, the child care health consultant can support programs and moving from those minimal requirements to meeting what we know are the best practices in health and safety. And then here are some resources to learn more about quality rating improvement systems within states to see why our QRIS systems support programs in building quality and in meeting the basic needs of children — so protecting their health and safety and building positive relationships and providing those wonderful opportunities for stimulation and learning that happens in the early care and education environment. So, the CCHCs can look up whether their state has a QRIS system. They can find out if the programs that they're working with are involved in attaining those quality marks or attaining a quality rating. And then if they are, the child care health consultant can support the programs and make sure that they're meeting all of the health and safety components of that quality system.

Many QRIS systems use the environment rating scales as a way to identify quality environments. So, as a CCHC it's interesting to look at the components of the scales to develop your sense of what are you looking for when you enter an early care and education environment. How do you know it's a quality environment? The environment rating scales are available for all types of early care in education settings from family child care to infants and toddler programs all the way to school programs. This is just one tool that programs use to assess quality and to maintain quality. But these tools can be really helpful for a CCHC who may need to understand more about what a quality early childhood environment looks like, especially if they've come from a health background and may not be as familiar with the goals of [Inaudible] setting.

Kimberly: I find it really helpful to look at the environment rating scales. Because it helped me as a consultant begin to understand what was going on in the room. So, when I saw a couple of pillows lying in a corner, I didn't really understand what those pillows were. I was just thinking about, wow, I hope they launder those pillows. And going through the environmental scales, I began to understand the importance of having a cozy corner and a quiet place for children to go. So, I think it's a nice way to begin familiarizing yourself with some of the — in a very concrete way — some of the goals of the classroom environment.

Tobie: Yeah. Absolutely. And it can give the child care health consultant a really nice opportunity to start thinking about what the health and safety implications and concerns might be in a quality environment from knowing that the pillows are there. What are the things that you might want to start thinking about? What are the reminders that you might want to provide to the staff so that they can still provide that quality environment, but also make sure that they have those underlying health and safety considerations in place? And so another place where child care health consultants can go to learn about strengthening early childhood programs is to look at the state early learning standards and guidelines.

So, over the past 10 years or so, states have moved forward with initiatives to strengthen their early childhood programs by emphasizing accountability for child outcomes. And one of those efforts has been the development of these early learning guidelines. And all 56 states and territories have developed early learning guidelines for children in their state, particularly for preschool children. And nearly all of them also have guidelines for infants and toddlers. So, the

document that's linked here on this slide will take you to the early learning guidelines for all 56 states and territories. And it provides a really great opportunity to become familiar with what some of those learning goals are.

Kimberly: So thanks, Tobie. This is a really high level review of some of the pieces and components that the early care and education program are pulling together as they create the classroom or the environment that a health consultant is going to walk in and observe. So, I think it's nice to be grounded in the goal of the program. The programs are set up for those to be early learning environments. And that creation of the learning environment is driven by many different factors. They have early childhood best practices, research. There's a whole body of work that informs the work that's going on in the classroom. And so while we may be bringing that health and safety lens into the classroom, that lens really has to be very complementary of the work that they're doing as early childhood educators.

So, that opportunity to be as successful as you can as a consultant, to be supportive is really having an understanding and that openness, willingness, curiosity to work with a program to understand how they're meeting all their education goals so that your support to them can be given in a way that is meaningful. It's not extra. It's just part of how — it becomes part of how the way the work is done. So, what does all that look like? What are we thinking about when we talk about putting learning and early childhood principles together? So, let's go ahead and take a look at this. Tobie and I are going to look at this water play activity from two different perspectives. So, Tobie, you go ahead and start with the ECE perspective.

Tobie: Sure. Well, I think as all of you can see this is a water table activity. So, teachers know that generally play for children is critical to their social, emotional, cognitive, physical development. So, a water table can offer a great opportunity for play. It allows hands-on experience. It allows children and teachers to talk about what they're doing, to talk about what they're feeling, to talk about what problems they might be solving related to the water, possibly keeping the water inside the basin. It allows children an opportunity to play. It allows children to maybe be given a task. So, in this picture, for example, maybe they're trying to sort the different fruits into types or into colors. It certainly offers opportunities for cooperation in terms of taking turns and communicating with their peers.

But just generally an opportunity to experience growth in their sensory, motor social skills to understand spatial relationships. It can bring in an opportunity to talk about natural science, to support imagination through pretend play. And they're just fun. They're fun for the kids. They can be a really great activity in the classroom.

Kimberly: Well, Tobie, I love that those are all the wonderful things going on. But the first time I looked at water play in a classroom as a nurse, I was like, yuck. What are all these little dirty hands doing in the same basin there? I thought, that's like that's like having a big that all the kids are playing in. And from the infection control perspective, I was like, okay. Is the tub clean? Is the water clean? How do we clean the tub? How many hands are in there? How can we prevent the spread of germs? How do we make sure that if a kid has a cut on their hand, they're not spreading germs or getting germs? Are those toys even clean? Are they cleanable? Who's watching the kids? Could they fall in? Could there be a drowning concern? Is there splashing water all over the floor?

So, it's funny when you think about, oh, there's all this good stuff going on there. But our first impression might have a whole list of other concerns about health and safety — infection and safety and all that good stuff. So, let's go ahead and let's give it a try with all of you. So, here's a classroom. And in the chat box, tell us all the good, educational things that we see are going on in there. Right. This is an opportunity — an opportunity to put on your early childhood glasses and look through the lens of how does this classroom meet some of those early learning goals that programs in your state may have? I see folks are already telling us lots of great things. There's child-size furniture. There are lots of colors. There's alphabet letters — so learning opportunities. There's imaginative and dramatic play, science areas, books, opportunity to make choices. Yeah. Look at this classroom.

There's so much going on that can meet those educational goals that a program may have. And all that are really focused on meeting the needs of the children — so things that are small, things that are easy to manipulate, furniture that's the right size.

Kimberly: Music, plants. It's child friendly. It's accessible. There's natural lighting. It's inviting. All these things are important pieces —

Tobie: And thinking from that quality lens too, I noticed that a few people have noted that there are dolls of varying colors and races, that there is a lot of photographs and pictures on the wall, that there are things that are down low right at the children's eyesight. And those are all the things that you might look at through that quality lens to really know that this is an environment that's meeting the needs of the kids in a respectful and comprehensive way.

Kimberly: Okay. So, we know good learning is going on in this room. So, as we put on our health and safety glasses, let's hear in the chat box, are there any areas you might look in here and notice a health concern or a safety concern or just questions you might have or things you might notice that address health and safety?

Tobie: Kim, I already see a couple of people are noticing there's a plant in the classroom and asking about whether the plant might be poisonous or if we know for sure it's non-poisonous.

Kimberly: The easy access to that window.

Tobie: Maybe some supervision concerns too, since it's a pretty crowded classroom. We're not sure whether there are spaces for children to hide. Asking whether the shelves are secured to the walls.

Kimberly: Yeah. Somebody notices the radio that's there. Is the vision of the teachers blocked? They don't see bolts on the cabinet, so worried about tip-overs. Someone's asking is there a string hanging from the shade? Are the toys in good condition? Are there cleaning supplies out? Everyone notices that radio. Because the common thing we see out there is the music with the cord.

Tobie: Yep. I noticed a couple of people asking about whether some of the toys are washable. Also considering whether some of the toys have small parts that might be easily mouthed.

Kimberly: Are there beaded eyes on the stuffed animals? So, you're wondering what age classroom is this for. Is that a choking concern? Even the location — so some picked out it's a heavy plant. It could fall if there was shaking there or if someone went to go grab it. Would that

be a concern? Is there dust and debris on the shelves? Okay. You guys are primed. So, I just went ahead and highlighted a couple of things. So, the cord, the window, the blinds. We talked about the stuffies. Are they safe? Are they launderable? Are they part of that cleaning and sanitizing schedule? Are they safe for the kids? Got that plant. Everyone's talking about that plant. Is it safe? Is it poisonous? Are there berries on it? And Caring for Our Children is a national database of health and safety standards. And they say one of their most downloaded standards is about the poisonous plants.

So, really making sure that those science opportunities are there. But is it safe? We also pointed out the surfaces in the corners. We notice these are rounded corners and easily cleanable surfaces. We notice a carpet — is it a low pile? Is it washed? Is it vacuumed? How is that cleaning and sanitizing of that handled? Looking at the chairs, are they stable? Are these the right height so the feet can touch the floor? And I see even 10,000 more things coming in. Are the posters held with staples? Are things treated so that they have a flame retardant in them? So, there's so many things to begin to look at through that health and safety lens. The question is how do you begin to — how do you begin to find that soft point or that balance point where you have health and safety and learning, both goals being met? So, that you can have that healthy and safe environment but make sure that learning can happen.

So, children need to be able to explore. We want them to check things out and to touch things and feel things and be able to move and go to different places to meet their needs. So, how do we do that and balance health and safety at the same time?

So, we put together this slide to show you how we thought about marrying the learning and the health and safety around the water table. So, we can agree that the water table's great. And there's so many wonderful things that can happen with science and pouring and touching and all that good stuff. But how can we make it a healthy and safe activity? How can we let them have that opportunity but make sure nothing happens? We don't want them to get hurt. We don't want them to get sick. So, we come up with a plan to change the water. We come up with a plan about how we're going to clean and sanitize the basin.

We wash the hands before and after participation. We make sure that the kids don't have open sores on their hands. Maybe we put a mat on the floor so that the water doesn't create a slipping hazard. And there may be other things that you can do. But really thinking about the learning so that you don't just take the water table away. That's not going to work. There's a lot of good stuff that can happen there. So, how can we work together to marry the two things so that the activity can happen and the children will still be healthy and safe? So, that's giving you an example of what you hope to achieve as you move forward. All right. So, as you prepare for doing — so let's go back to doing an observation. How are we going to go about doing the observation? How do we begin to develop that health and safety lens?

So, when we talk about preparing for an observation, we really talk about from the start, from the very beginning is collaborating with the program. And this will ensure that you, the director, the staff, everyone's aware of what's going to be done and when and how the follow-up of the findings will proceed. It's also a really good time to remind folks that you're not there — that you are there to help. You're there to address any challenges, to identify strengths in the program, and really work together to create healthy and safe environments. You're not there to

look for problems or to get anyone in trouble. You're there to help. And usually just knowing that helps take some of the pressure off. It's never easy when people have someone coming in to watch them. That it really — it can make someone feel very anxious or nervous about it. So, having that opportunity to plan ahead of time is great. In planning for the observation, you really want to discuss what they get out of it. What is the goal of the observation? And just answering any basic questions.

Tobie: And, Kim, I think it's so important for health consultants when they're working with programs to remind programs that they're not there to serve as regulators. They're not there to identify problems. They're there to be a support. So, they're there to support problem solving, to maybe discuss with the program what challenges they're already facing, to talk with the program about how to keep all of those excellent learning pieces in place and also make sure that their kids are safe and healthy, so that they can really maximize those learning goals. So, that's why it's so important for the CCHC to understand those learning goals because then the CCHC can come into the program from a place of talking about how can I make your kids healthier? How can I ensure that these activities are safer, so that they're going to get as much out of that learning opportunity as possible?

Kimberly: Yeah, a teacher is just like a nurse. I might as a nurse walk into that classroom and not think about the learning that's going on in that water basin. That's not my first thought. Because that's not my education and training. Just so a teacher — their education and training is really about creating these wonderful learning experiences. And their very first flight might not be all the things that a nurse would think about. So, doing that together is so important. So, how do we go about preparing when we actually go in the room to do an observation? I'm having a little trouble forwarding this slide. So, if someone can forward it. Thank you. All right, there we go. Thank you. And when you all get the PDF — so just as a reminder at the end of — in a couple of days you're going to receive an email with a PDF off of these slides, and a recording, and evaluation, to figure out how to get your certificate.

You'll be getting that in a couple of days. So, when you do, you will see all of the websites listed on the bottom of the slide. So, you don't have to really fast write them down right now. I just thought I would let you know that they will be on your PDF that you get. So, Pennsylvania American Academy of Pediatrics chapter has a really nice set of guidelines on performing an observation. And I threw up a couple of the key points that I thought to highlight today. Because there are areas that you can really make a mistake. And it could make an observation go very, very hard for you if you're in there. Always remember that you're a guest. The teacher's inviting you into their space.

They may feel vulnerable or a little on edge with you being there. So, don't just go opening all the cabinets and tearing through things. But you're a guest. And just remind yourself of that as you are in there — to respect the classroom activities space and the teachers. The teachers are being responsive to all the children in their care. They are on a schedule. They are following lesson plans. They have a set bunch of goals that they are meeting during the time when you're in there. There's a lot of work going on when you're observing. So, as much as you can, respect that. Be a wallflower and really not engage with the children. Really try to avoid distracting and interacting with them as much as you can so that you can truly observe what's going on in the



classroom from that wallflower. I always wanted to be a fly on the wall, guess what you want to be when you're doing an observation? And this handout does capture some of these thoughts in a nice little reminder sheet.

Okay. So, now that you've talked with the program, you know why you're doing the observation, everyone knows when you're going to come, they know if you're going to use a tool or not and you're already how you're going to handle it yourself when you're in there, now you have to be ready to go in. So, how do you know what to observe? How do you begin to see all those layers of health and safety when you're in the classroom? So, we talk about this in terms of developing your own health and safety glasses. I always call them glasses. Because if you put on your glasses and what do you see? So, I'm just go through three different approaches that you can use to strengthen your ability to observe what's going on in the classroom and look at the multiple layers of health and safety that are there. You may have other ways that you've done it or other tools that you've used. So, feel free to share that in the chat. It's nice. Everyone can see the chat as we go along. So, if you have something favorite that you want to share, please go ahead and do that as well.

Tobie: Kim, when you're talking about layers, I just want to make sure that — that we're really clear about that. You mean the different pieces of health and safety that you might be trying to observe all at one time? So, if you're watching — if you're there during mealtime, for example, you're not just looking at the nutritional content of the meal that's being served or whether the pieces of food are cut up into small bit-sized pieces. But you're looking at other things such as the infection control. So, is a table being sanitized appropriately? You're looking at a lot of the other pieces of the space. You're looking at how the staff are interacting with the children and whether they're modeling safe and healthy behavior. That's what you mean by layers, correct?

Kimberly: Yeah. Exactly. So, thank you for that clarification, Tobie. Yeah, exactly. So, you're able to look at an environment and see many different pieces. But when you first start observing, that's the place you get to where you can see many different layers. You really want to start off in a very concrete way to open your eyes and begin to look at health and safety. And then as you do it more or more, then all those layers start to come into focus. So, today we're going to talk about using a checklist, preparing your own kind of checklist to do observations you want. And then we're going to dive into the Virtual Early Childhood Center to look at how you can look at an environment and see all the health and safety.

So, I'm just going to flip back here for a second. They shouldn't have done it that way. I'm sorry, everybody. I'm probably giving you a headache. So, I'm just going to go right back and not do it. So, when we talk about the — when we talked about the water table, I was saying that I see infection control concerns. I see safety concerns. I see supervision concerns. So, I'm looking at the water table. But those are the layers that I happened to notice — I just happened to bring up as we were chatting. So, let's start off just talking about the concrete — the first concrete checklist. When you first walk into a classroom, there's so much to see. It's hard to know how to process and organize all of your thoughts. You know that you want to prevent injuries. You want to make sure children aren't injured or harmed. So, you might know that young children could get hurt from a fall. They might get hurt from a scald or burn. They might get hurt from poisons. You might know all of this.

But how do you put that into the context of how do you prevent those injuries in the early childhood classroom? So, I think it's easy to start with a checklist. And this is a checklist from California — their health and safety checklist. And it is very concrete. It covers lots of different areas in the early childhood environment. So, it talks about facilities. And within the facilities, it talks about emergency preparation, medication storage. It talks about all the equipment and furnishings you have inside and outside. It talks about supervision. It talks about nutrition as in the actual food and the eating environment. It talks about sanitation, personal hygiene, food and safety, environmental health. It even has a separate section for infants and toddlers. So, when you go through — and thank you, Tobie, for putting the link to the checklist in the chat box. So, as you look at this, I put up a screenshot of the equipment and furnishings section of this checklist. And you can see that it has in parentheses, the number 15 talks about windows and asks are they accessible to children. If they're accessible to children, do they open less than four inches or have a window guard so that children cannot climb out?

So, in an early care and education program, if there's windows we have to think about their risk of falls. And an appropriate way to minimize that is making sure they don't open more than four inches or having a screen in there. So, it's very nicely put together — you knowing that falls are a concern with how do we address that in the early childhood classroom that has a window. In parentheses, you can see that it has standard 5.1.3.2. And that refers to the Caring for Our Children Standards. So, the Caring for Our Children Standards are best practice standards. And, Tobie, could you pop the database website in the chat box for everybody? Yeah. That would be great. I should have put a slide in there. And I apologize for not doing that. But those of you that may not be familiar with caring for our — Caring for Our Children Standards, they're a book. I want to believe there's over 700 standards in there that are all related to health and safety in the early childhood education environment. And they give you best practices that have been vetted and research-based.

They give you a rationale. And they also give you additional resources. So, every item in this example checklist is tied back to those best practices. So, it's a great way for you as a new consultant to begin to look at the environment and then begin to dig a little bit deeper. Because you can go ahead and say, wow, you know what? They don't have anything on their windows. Let me go into the standard and learn a little bit more about that so I can be effective in having a conversation afterwards with the program. So, this is all broken up in a way that covers the safety topics. It doesn't necessarily cover areas of the room. So, this checklist walks you through all the different areas of safety in an early care and education program. If you're new to an early childhood program or you're new to observing, you might want to ask your director, would it be okay if I popped into a classroom when no one was in there — perhaps when they were at play or early in the day or later in the day when no one was there? And you can whip out one of these checklists and go through it and really take a deep look at all the different areas of health and safety that can be covered in a classroom.

Tobie: Yep. I did put the link in. Their website seems to be temporarily down. But hopefully it'll get back up later today. And someone did ask whether the CFOC standards were aligned with the Head Start Program Performance Standards. So, that may be a question to address quickly. And then another reminder that the CFOC book is being updated. So, a fourth edition is coming out soon. But the online database is always going to have the most up-to-date standards. And it

is searchable. So, if you're looking for a standard about something in particular, you can search their database really easily. It's a really great resource to have bookmarked on your computer.

Kimberly: Thank you. And I must have misspoke about a screen. I always think screens are important for integrated pest management. But they don't protect a child from falling out of a window. So, you only want those windows to open four inches or to have a window guard in there. So, thank you whoever said that in there for bringing that up. We don't want misinformation out there. And caring for our children in the Head Start Program Performance Standards. If you're a Head Start Program, you have to meet the Head Start Program Performance Standards. Caring for Our Children Standards are not mandated. But I'm going to say this the best that I can.

You do not have to follow caring for our children standards. Are they aligned — I can send out and put on MyPeers which we can show you that at the end, how you can access the child care database that aligns a lot of different standards, so that you can take a look at how those line up. So, I would I will put that on MYPEERS after. So, thank you. Okay. Another kind of observation you might do is I call it a focus observation. So, if somebody's recently done a training or maybe you just want to check in on their hand washing and diapering policy and procedure to see how well it's going, if teachers are having any hiccups in implementing them, you might want to do an observation that's just directly focused on watching a specific activity. And in that, you may or may not have a checklist that helps you guide you in doing that. Some folks may actually take out the program's procedures and create a checklist of your own to see if they are following the steps.

So, I threw up the diapering policy and procedure as an easy example. Because it's very clear steps to changing a diaper that the teachers will be following. So, if you're observing that, you're able to watch how they're doing implementing the actual procedure. And then you can use your health expertise to make any suggestions or changes to perhaps ensure that that is really being done in the best way to maximize or minimize the movement of infectious materials. You might do that with tooth brushing. You might do that with the hand washing. And when you do these kinds of focused observations, oftentimes a teacher's well aware of what a procedure is and how to do it. But perhaps they're not given all the tools they need to do it. So, for example, maybe the garbage in the bathroom doesn't have a foot pedal so that you can throw the diaper right into the trash.

So, they might be very aware that they need to do it that way. But the room isn't set up so that they are able to do it that way. So, it gives you that opportunity to see what some of those challenges might be and be able to problem solve together on how to resolve that. Okay. So, another tool to help you develop your health and safety glasses is a Virtual Early Care and Education Center or otherwise known as the VEEC. And this is an online tool. And it's designed to have the look and feel of an actual early care and education center. So, you can move from room to room to room in the VEEC to explore different information about health and safety. So, the first time you go there you do have to go in. There's a button on the top this has log in. You just create an account. It's just your email address. But you do have to do that the first time when you go in. After that it remembers you.

So, it's really just the first time. I'm going to click ahead. When you go into the virtual center, you can see that it has all these different areas that you can look at — playground, infant room, school age room, preschool room, toddler room. It even has bathrooms, utility rooms, transportation. It has all of the different areas that you can think of in an early care and education program. And health and safety is addressed everywhere in all these different little areas. So, if you as a consultant are coming in and you are doing an observation to observe transportation, you can dive into the transportation. If you're going to observe cooking, you can go into the kitchen. If you're going to observe kids on the playground, you can check in to the playground. So, for purposes of today, we're going to go ahead and we're going to go into the preschool room. So, once you've picked where you're going to be, in doing your observation for the day. You can go into that room.

So, you can see in this room you have the many different areas that the teacher creates in the classroom to do the different activities of the day from eating to toileting to playing to napping. Every classroom often has little areas to do all the things that have to be done through the day. It's really helpful in planning your observation upfront to know what might be going on. You may come to the program and it might be mealtime. You might be coming to the program, and it might be sleeping time. So, if a director is asking for an observation on meal prep mealtime, you'd want to arrange the timing so that you go to the center at the right time. So, in all of these areas, we're going to go through and show you where there are what we call hot spots and links to different pieces of information.

But these are all the different areas you can explore. So, regardless of — right now we're just going to talk about one. But you could go back in and click in any of these different areas to learn more. So, we're going to go ahead and zoom into that eating area. So, today we're going to pretend that I'm doing a general observation that will take place during mealtime. And if I was going to do that, I could explore in the VEEC and begin to think about what are the health and safety pieces I might need to look at. The VEEC is set up so that all of these layers are accessible in each and every area in each and every room. So, it begins to create the ability to look at multiple quote unquote, "layers" in one area. Does that make sense, Tobie?

Tobie: Yeah, absolutely. And, Kim, I just wanted to jump in and connect this back to your pieces of advice about planning for your observation and some of the rules that a CCHC should follow. And this, I think, is a good reminder that it's so important to communicate with the program before your observation. So, that if there is something specific you want to look at — so if you want to look at mealtime or transportation time when you're in the actual program, that you communicate and find out when is the best time to be there so that you can see the things you want to observe. Of course, when you're using the VEEC, it's just a virtual setting. So, you can look all over the place at any time. But in the real world, you need to ensure that you're communicating well and finding out the best time to be in the program so you can see what you need to be able to observe.

Kimberly: Yes. Thank you. So, as we go into observe the eating area the VEEC has the layers of safety practices, med admin, infectious disease, healthy and active living, and staff wellness. It's not the end-all be-all, every little thing you could imagine about health and safety. But it's a big chunk of what's going on in an eating area at any one time. So, to begin to explore this a little

bit there, I could choose any one of these different bullets. I could choose safety practices or medication administration or whatever and then be able to explore just that in this environment. So, in this example, I'm going to go ahead and click the managing infectious disease layer. And when I dive in down in that layer, you can see — well, it is hard to see — but at the top in the blue it says early Childhood Center Managing Infectious Diseases. And that's how I know I'm in this layer. In the grey bottom — on the bar on the bottom, there's multiple bullets. And these are what we call hot spots.

So, these are identifying all the different places in the room where there are infectious disease, things that you can look at to support infection control procedures. So, you can see down there there's an allergy list, a food preparation counter, medication cover, toothbrushes, hand washing sinks, et cetera. So, if I was to click on one of these, a box would pop up. So, I'm looking at the child's hand washing sink. And it tells me why I need to think about how that sink works in this setting for preschoolers. So, it tells me about the importance of hand washing to eliminate germs. But if I'm not really sure and I want to learn a little bit more about what's important to know about hand washing, what's important to know about the sink, I can go ahead and explore a little bit deeper into the standards — Caring for Our Children Standards, the Head Start Standards if you're a Head Start program, and additional resources. So, I'm going to go ahead and click that. And when I click the Caring for Our Children's Standards, look at all the different standards that pop up.

So, here we have one, two, three, four, five, six different standards that I could look at about hand washing, about when to hand wash, about how to train and monitor for hand washing, the importance of hand washing after you cough or sneeze, and even hand washing in separate — keeping hand washing sinks separate from food sinks. So, as a consultant, you want to know lots of stuff about that sink. How are they using the sink? Is there soap? Are there paper towels? So, how do I begin to develop that? How do I really understand everything that needs to be there? So, this allows you to go ahead and really dive in. All of the Caring for Our Children Standards are hyperlinked directly to the standard. So, when you open it, it tells you exactly what information you need to know. And my favorite part is it tells you the rationale. So, I get really excited about the rationale, because oftentimes people are happy to do things when they know why it needs to be done or why it's so important. And it's not just something else that you're asking someone to do. But when folks really understand what's so important about it, there's a lot easier to get buy in.

So, all of these standards contain rationale which really helps with those conversations. Also, you have the button on resources. So, I popped that out here for you as well. And you can see that there's additional resources on creating safe and appropriate diapering and hand washing, hand hygiene, how to cover your cough. There's just other tips and resources you might like or like to check out that may or may not be helpful in that area. So, really, we went from looking at an area of a classroom and then picking what layer we want. And the only thing that we looked at in this classroom was just the sink. And you saw all the resources and all the standards just with the sink.

And we could do that with every single one of these bullets in that bottom gray area. We could look at the allergy list. We could look at the food preparation calendar, the toothbrushes, the

food preparation sink. We could look at any one of those and get that depth of information. So, it really provides you a way to look at an area in a classroom and begin to really dig deep into some of the things that you might see, practices you might see, and ways to set it up to really promote health and safety. You could get lost in there for hours. So, be prepared when you start to begin to explore.

Tobie: Well, that's one of the things that's so great about it, Kim, is that it helps you start to look at those layers that you were talking about. So, you can look at it through one lens. And then you can go back and start and look at it through another lens. And you do that a few times, and it really hones those skills of being able to walk into the space and see the staff wellness lens, and the infectious control lens, and the medication safety and all the different pieces that you need to be able to look at all at once when you're observing in the environment. So, it's such a great way to practice those skills.

Kimberly: And there's so much going on. I think the VEEC does such a great job of hitting some really high-level hot spots in there. And when you start to see that layer upon layer upon layer you can really see how that health and safety and learning balance has to happen to achieve that learning and healthy environment. So, there's a lot to dig in there and learn and look at. I say do it in digestible portions. Look at some things that you're interested in or that you might want to explore a little bit more. And as I say, you can really geek out on it and have a good time in there. We talked a lot about observation today and really observing and then coming to this place where you're able to have a discussion with your program and really set up — work with a program to meet both of those goals.

But it doesn't just happen. It's not just, oh, you found this. And then we're going — we're going — we found X and we're now let's do Y. If we really have to work with a relationship with our program so that we can come up with a plan for next step. So, what do you do if you see something as potentially dangerous? How can you use the observations to recommend changes while still supporting your relationship with your director and staff? You don't want to create an adversarial relationship by just critiquing something and not learning about how come things are set up a certain way, understanding what they're working with in a program. You really need to have that back and forth understanding to go over any observations you find. And Tobie's going to tell us a little bit about some online modules that are out there that we really think can support you in being a successful consultant, building relationship with your directors to be able to have meaningful conversations to turn these observations into positive experiences.

Tobie: Yes. So, early on in our conversation today, Bonnie Williams, one of our participants, posted something. And I actually copied and pasted it to the site because I didn't want to lose it. But, Bonnie, I see that you posted it again. So, you anticipated that I would want to return to that. So, she talked about how when you identify things in the environment that might be health and safety concerns and you want to discuss those with the program, you don't want to just go in and make assumptions that they're going to change something. You don't want to go in and say, here are all the problems I found. Here's what you need to do to fix it. What you really need to do to be effective as a health consultant is to establish a strong relationship with the program in order to strengthen their own problem-solving skills, in order to help them

prioritize changes that they might want to make and support that process of making changes in a way that is reflective of their needs, that is supportive, that is collaborative.

So, Bonnie, thank you so much for saying that. And that's really what these modules that are on your screen right now are aiming to help you do. These are six self-paced online learning activities that were developed by collaborative teams through the National Center of Early Childhood Health and Wellness that aim to prepare child care health consultants to be effective in their roles. So, there are modules that relate to creating collaborative relationships with programs. There's one on using cultural competence to help programs solve problems. There's one that relates to how do you apply consultation skills to a particular health issue. And in the case of the module, its focused specifically on oral health promotion. There's a module related to identifying and resolving health concerns, one on improving communication skills, and one — probably most importantly — on building trust with programs, which is the module that wraps up all of those other pieces into one.

And we are also in the process of developing three more modules — so one on how to do quality improvement and how to support quality improvement efforts in a program, one on how to support programs in developing policies and procedures. So, as Kim was talking about that water table, I was thinking about how a really important role for a child care health consultant who identified health and safety concerns is to help the program come up with specific procedures that the staff can follow every time they engage in that activity. So, that they know that the water basin is properly cleaned and sanitized. So, that they know that the staff have a procedure for getting the children to wash their hands.

So, that they have a system of inspecting to make sure that none of the toys have mold or that none of the hands have open sores. That might be a concern. So, those are the procedures. And we have a module coming up that will help you learn how to do that — and then a module on how to connect programs with community resources. So, in our last minute or two I just want to identify some of those online modules that you all can check out. And I put the link to them in our chat box. Because I do think they are so helpful in getting from that space where you walk into a program, you do an observation. Maybe you identify a few areas of concern. How do you move forward into really collaborating with the program to address those concerns in a way that is respectful and collaborative and not just walking in, as Bonnie said earlier, and making an assumption and/or telling them what to do?

So, one of the modules online is Creating Collaborative Relationships with Programs. And it just walks you through how to build those collaborative relationships. And it gives you an idea to assess what a CCHC looks like who doesn't collaborate with a program — so a CCHC who just walks in and says, here's what you need to fix and here's how to do it versus a CCHC who guides the program into coming up with their own problem-solving techniques. And you can probably guess which approach is more effective.

We also have a module on improving communication skills. And it goes through three different conversations. So, it kind of gives you a little case scenario of what it looks like to start a visit with a program. What it looks like to provide feedback to a director or program after you've identified some concerns that you want to talk about. And then how to answer questions and address concerns in respectful ways. It models asking open-ended questions. It models how to

have a conversation that empowers programs to manage issues while also allowing the CCHC to provide the health and safety support that is needed.

And then there is a really great module on identifying and resolving concerns which talks through the process of you do an observation. If you see something that's an immediate crisis, like perhaps you see a cord dangling next to a crib, it gives you the skills to address that crisis immediately. So, talk about, okay, let's tie this up. Let's come up with a solution to fix this and replace this with a curtain system. Let's move the crib out of the way so that it's not going to be a hazard. But then it talks about how to dig deeper into addressing maybe why health and safety concerns happened in the first place, to talk about maybe what the program has already done or what resources they're already relying on to solve problems. It talks about how to problem-solve with a director in a program.

And then once you and the director collaboratively have come up with solutions to a health and safety concern, the module talks about how a CCHC can support that solution through long-term training, policy and procedure development, support of the program's ongoing quality improvement efforts.

Kimberly: And I think that last module tied so nicely with the immediate activity of doing the observation. Building the relationship and talking about it is sandwiched in between. But there may be times where you end up in the middle of that observation, you see those dangling cords. And how do you address that in a way that's respectful but still make sure that those cords are being addressed and nobody's going to get hurt? And this module does that so nicely.

Tobie: Yeah. So, I really do encourage folks to take a look at those modules. They're online. As I said, the link is in the chat. And they're pretty short they're only about 10 or 15 minutes each. And it gives you some really good practice in building those skills and how to have collaborative relationships and strong conversations with programs.

Kimberly: And I thank you so much, Tobie. And you did it so quickly. I appreciate that. And so many of the links have been popping up in the chat box. But please do know that you'll be getting an email in a couple of days that will include a PDF of the slide show which does have links as well. It will also include a survey and instructions on how to receive your certificate. She will also include instructions on how to get on the Mango App, MyPeers online community that's there just for health consultants. At Head Start — anyone can really join it. But it is there where we post the webinars. We post additional questions. So, if there are any questions we didn't get to today, we will answer them in the community. And it's a great place for health consultants to connect to each other for some peer-to-peer learning, to ask questions, share policies and procedures, best practices, strategies that work. Often, your colleagues are the best folks to help you solve a problem.

Because they've probably been down that road. There's someone out there that's been down a similar road before. So, please check out the link and join MYPEERS Online Community if you can by filling out the form that comes up. You will — I just want to make a highlight of this — you will receive an email in your inbox from Mango Apps. You can see that at the top of the slide. Mango Apps is the sender of the email. And when you get that, that will prompt you to log in and create your own password. So, that is how you ultimately get into the community is



after you register, you receive an email. And you click on that email and follow those directions. So, we do hope to continue the conversation online.

And we look forward to seeing you there. So, thank you so, so much for joining all of us today to talk about observing and sharing all your great thoughts on balancing health and safety and education. The National Center on Early Childhood Health and Wellness is always available to you. You can call our toll-free number or email as noted on the slide. And we do have our website posted there as well. So, thank you so much, Tobie, for all of your help. And I'm going to turn it back over to Robin for her closing out.

Robin: Thanks, Kim. I would like to thank Kim and Tobie for this very engaging presentation. If you want to ask more questions, feel free to contact the National Center Early Childhood Health and Wellness. Our contact is on the slide. Again, like Kim said, we will be sending an email with a lot of information in the next couple of days. So, just watch out for that. Check your spam mail, as well.

And this concludes this webinar. Thank you for your participation.