

CCHC Quarterly Webinar Series: Creating Healthy and Safe Environments

Nydia Ntouda: Today's speaker is our very own Kimberly Clear-Sandor. And Kimberly, I'll let you go ahead and introduce yourself. Take it away.

Kimberly Clear-Sandor: Thank you very much, Nydia. You did a wonderful job, and I'm happy to have you start us off today. Hi, everybody. It's nice to be back. I love to see all these names popping in from all over the country. As Nydia said, my name is Kimberly Clear-Sandor, and I will be doing the webinar today. Just a little bit about me: I am with the National Center on Health, Behavioral Health, and Safety. I've been doing training and technical assistance for over eight years, almost nine, with the Head Start centers.

But I'm a nurse and I'm a family nurse practitioner, and that's really the lens I bring to my work in early childhood. Keeping with our theme of Child Care Health Consultation webinar series, I have been a health consultant for close to 20 years, doing consultation with programs in Connecticut and New York, and also working with nurses that work in child care programs, Head Start programs, and schools, to consider the unique needs of children and families. I love being here with all of you today to talk about the things that child care health consultants can do with programs and how they can support programs in meeting their health safety quality goals that they have.

Thank you all for being here. I know it's a challenging time and difficult to make time in your day, so I hope the next hour and a half brings you little pearls and thoughts. As Nydia noted, we can use the chat to share different ideas with each other and the Q&A. We'll stop maybe a couple of times along the way just to check in and make sure we're answering your questions.

The National Center on Health, Behavioral Health, and Safety puts all their information on the Early Childhood Learning and Knowledge Center. It's a website, and that's really where all our materials that we develop get housed. There's some materials there about health and safety, pregnancy, family health, mental health, the whole gamut. You could get lost in the website for days on end, but there is a very special spot on the website devoted to child care health consultation.

I'd just love to find out from all of you if you've explored any of the resources on what we call the ECLKC, which is the Early Childhood Learning and Knowledge Center website. I'm going to go ahead and ask Nydia, who is our pro in the background, to go ahead and launch the poll. We'd love to know which resources you've explored on the ECLKC. Go ahead and select that on the screen.

Maybe you've checked out the Health Consultant competencies or perhaps the webinar series, like our series today. We do have them all archived on the website. We also have some skill-building modules that we're going to talk about and some nice little tip sheets, like Partnering with a Health Consultant or Making Early Care and Education Programs Healthier and Safer by

Using a Health Consultant. We also have a MyPeers Health Consultant Community, and I fully realize that maybe folks with us that have never been on the ECLKC.

Nydia, if it looks like we've gotten a good response, you can go ahead and show those results. Oh, beautiful. It's popping up on my other screen. Sorry about that. Look at this. These are the things that warm my heart and get me through the day. We get very excited to put all these products out there for folks to check out, and it's so wonderful to see the response of things people have seen. I love that folks have gone back and checked out some of the webinars, looked at the competencies, been to MyPeers ... That's a wonderful place where we can share.

That's just wonderful. Those of you who haven't ventured there yet, the links are on the screen, they're also going to be in the handout that's being put into the chat. They're also going to be shown again a couple times throughout today's session. Don't fret if you haven't been there. There's always more to come. We can go ahead and close that. That would be great.

All right. I know many of you said you've been to the webinar series page, but I always do like to remind folks. Sometimes you missed it, you wanted to get in, and your day got a little crazy and you said, I just can't break away. We do get them up on the website in a pretty timely manner. Usually, if you've registered for it, you also get a link to the recording that's available for a short period of time. But just so you know, that is the website that goes directly to where the webinars are. I just want to make a comment too. You're going to notice some pictures today and maybe on the website that were pre-pandemic, so they don't have masks on. I just want to let folks know that.

Today's presentation ... Today we're really going to focus on one of the Child Care Health Consultant competencies, which is No. 2. That talks about how health consultants can really support the quality health, safety, and wellness practices in a program. We're going to dig a little deeper into what that collaborative approach can look like with health consultants and directors and teachers, really thinking about how can you work together, leverage each other's experience and expertise with each other and the staff and families to really hit the mark on quality health and safety practices.

We're going to talk about how to use evidence-based tools, how to think about assessing quality, and we'll point to a couple of different resources that you can – I guess we call them tools on the screen, strategies and tools – we'll point to them as we go along in the presentation. That might be things that after ... We're here in the short little bubble, but really, these are things that you can do afterwards to check it out and look at this topic through your specific lens to meet your specific needs.

With that in mind, let's do the next poll. We know that our times are changing, and they've been changing, and some of us may be tired of all the changing, the ups and downs. It has been a hard time, and that has really taken its impact in many different places in the world. I'm just wondering, what are some of those challenges programs are facing now at this time? And if Livia can go ahead and launch that poll, which you might have done already.

Go ahead and choose. Are you working with a lot of new staff? Have you lost senior staff, who may hold a lot of historical knowledge and may have lost some of those mentors and coaches that have always been in the program? How is the mental wellness of your staff, the adults, families in your programs? How is the implementation of those COVID-19 mitigation strategies going? Using masks and distancing and washing hands and all the temperature checks and all of that.

How about documentation? How about training? Do any of these resonate with you with some of the challenges that either you're facing or programs that you're working with are facing? All right, Nydia. If it looks like folks have done that poll I'll let you share the results.

Awesome. Well, not awesome, but thank you for doing that. Challenges are hard, and I'm seeing the new staff as being ... Sixty-two percent of you have identified that as a current big challenge. Implementing the mitigation strategies and all the training. With all that new staff comes hand in hand with a lot of training.

When you have that loss in senior staff, it can be a little hard because you might not have the support in the classroom or in walking in and out of the rooms, or whatever it may be to have some extra set of eyes in the room to really help with the implementation of policies, practices, protocols, etc. that keep children safe throughout the day. Thank you for sharing that. You can go ahead and take that down. Thank you.

Right here, if you look at that chat, you can see we represent all corners of the world on our session today. And when we talk about health consultants, there really are ... I like to think of it like Baskin-Robbins, the ice cream store. Instead of 32 flavors, there's 50 flavors of health consultants. Some states, health consultants are required to be there and to work with early childhood programs that are licensed by the state. Other states use health consultants as a way just to support them in promoting health and safety practices.

Regardless of how they are used in your state, they really are an important resource for early care and education programs. We're going to think specifically about, what does a health consultant bring to your program? They really combine the health expertise – like me ... I'm a nurse, so I always say my first lens is always health. But I've had extra training, and I've been working early childhood programs for a long time, which has really given me ... to round out my health lens to understand how health fits in the context of the early care and education setting. And really, what is the early care and education setting trying to achieve, and how does health fit into that? Because it's so foundational to all the practices, all the transitions, many of the activities that happen throughout the day.

Health consultants can help programs understand healthy growth and development, address children with special health needs. They can help staff do observations if the staff isn't sure about how a child is doing. Even if they're watching them walk, and they're just like, how is that child walking? Does it look different to you? You can just be an extra set of eyes.

A health consultant can observe health and safety practices, they can provide training and help connect families and staff to resources, and can really help with quality improvement different strategies. If you were to stop and think about you and your program, what do you think would be the most helpful support that you could have right now from your health consultant? Nydia, I think we have a poll for this one too. Getting all my polls in right up front.

Go ahead and launch that poll, and let's see what types of activities really would support your program. We'll let that go ahead and populate. Nydia gets to see the fun of all the numbers coming in. I have to sit here like Christmas morning, waiting to see what everyone is saying. In my house we celebrate Christmas, and the excitement of waiting to see if someone showed up at your house last night was a very ... was a good memory.

OK, how does it look, Nydia? We're seeing providing training for staff and families as a high need. Thank you. Observing health and safety practices, reviewing policies and procedures, facilitating referrals, and quality improvement strategies. This is a great list. Thank you all for clicking away on there. I do just want to mention our March Child Care Health Consultation webinar series is all about reviewing policies and procedures together so you might want to keep your eye out for that session coming around.

Today, we'll be focusing on those activities and strategies to do just that – to think about training, to think about how you can support implementation procedures. Not only that part of it, but also how do you work with a program to begin to think about your observations, what you saw, and help listen to where the program is and what do they want to work on so that you can work on those things together.

We go right directly to that Health Competency No. 2, and I like to just put it on the screen. I think competencies are such a nice way to kind of ground us in the breadth and depth of the work. Remember, these competencies are written universally. They're really written for a general audience with full knowledge that your state may have different Nurse Practice Acts and different regulations with their child care programs about what health consultants may or may not do. These are really written from a best practice point of view. Health Competency No. 2 is all about those quality health, safety, and wellness practices.

You can see 2B specifically calls out how the health consultant works with the ECE program around this. It's about using that mutual understanding, that lens of health and that lens of education, to then identify things moving forward. The Competency kind of digs in a little bit more, and this is one of the things ... I'm a little biased because we helped with informing the development of these competencies. One of the things I find is really helpful with the competencies is if you're a program director and using a health consultant is new to you, reading some of these competencies or reading what a health consultant might be able to do for you, it might not really speak to you. It might not really paint a picture.

We tried really hard when we wrote these competencies to talk about what does it look like. You can see that we have here the first one: The health consultant can help programs align health, safety, and wellness practices with licensing regulations, state quality QRIS programs if

available, developmentally appropriate practices, best practice standards such as a CFOC accreditation.

They can bring that lens to your work. They can work with you to look at your record keeping system to support health, safety, and wellness. How are your physicals? Are we getting them? Are we behind? How about those immunization status? Let's set up a system. Do we have letters? How do we communicate this information with families? How can we use the program data? Health consultants can use program data to identify strengths and concerns and make improvements. This is something that you could talk to your health consultant about, all the data you collect, and say, what do you think about what we're seeing? How can we improve what we're doing based on this information?

I specifically think about absenteeism. Looking at, do our children with special health care needs have a higher rate of absenteeism? How can we help them be healthy so they can come in the program and feel supported? A health consultant can also help you prioritize those improvement actions. The health consultant might have some ideas that we can work on, the program probably has some ideas we can work on, and together you can really come up with that list.

Last but not least is the observation. I think this is where health consultants can really support programs at this time where there's been this turnover in staff to really go and be that second set of eyes in the classroom to observe practices and provide recommendations and coach a teacher, if needed, on new policies and practices that may be new to them. Especially with the implementation of the COVID mitigation strategies – taking off a mask, storing a mask, the spacing apart guidance – those are things that folks might need a little help implementing in the classroom that might not be so obvious. Health consulting can really provide that second set of eyes.

Let's go ahead and try and think about what does this look like if we were to think about, what could a health consultant observe during an interaction that might be helpful? Let's consider this scenario. We'll go ahead and pop everything into the chat. Oh, and thank you, Steve, for putting the information in the chat in case anyone missed the wonderful opening by Nydia. There will be an evaluation launched at the end.

Today is being recorded, and links to handouts will be put in the chat as well as sent out. Do check the chat because that great information is in there. OK, back to the show here. Let's share your thoughts with what health and safety activities can a health consultant observe during drop-off and pickup? If the health consultant was asked by the director, can you just come and watch our drop-off and pickup? It's the new procedure. We just trained everyone. It would really be helpful if you gave me a second set of eyes and let me know how it was going.

What do we got? "Wearing PPE. Using masks." Excellent. Oh, I love this. Bring that back over here. "Ensuring appropriate safety and supervision." "Daily health checks." "How the program is handling a difficult transition," which has definitely changed at this time. "They can observe three daily health check and COVID procedures." "Sanitizing constantly." [Laughter] Teresa, I

understand that. “The temperature checks.” “The steps the folks are taking.” Excellent. As I see this list coming in, and you can see the chat on your computers. You can see all the things that happen during a daily health check. If the health consultant was able to observe a drop-off and pickup, look at all the health and safety practices that are happening at that time: hand washing, distancing, masks, how to take a temperature, and how they’re supporting children and families to manage the drop-off and move.

I love the list. Thank you all for sharing so much. Someone's even putting in there about if a child is symptomatic. One of the hardest things, I think, that can be really hard for staff is when a child has symptoms, what do we do about it at that time? Knowing the proper protocols, procedures, not only for documenting it, but does a child stay? Do they go home? How does that happen? And how do you do that if you're ... Perhaps you've moved your check-in procedures outdoors, and you don't have someone close by.

These are all the challenges that can come up while folks are having drop-off and pickup. As a health consultant, you could be that extra set of eyes and see all those things going on, and then be able to talk to the leadership in a program about different things that you could do to address any challenges or concerns or things that you have. That's just one example.

Oops, that wasn't right. Sorry, everybody. Hopefully, you can still see my screen. Nydia, can you confirm you can still see the slide deck?

Nydia: Yep, we're seeing the screen.

Kim: OK, excellent. I hit the chat box, so it popped over it for me. But as long as you can still see it. Again, after this whole experience, a consultant and a director or manager can really have some good conversations about what was observed, what were the challenges, and some different ideas for improving it. I also think it's so important that as a health consultant – that I'm getting from my little nursing lens again – is that I continually hold in my heart that I'm working in health and safety, but there's a lot of other things going on in that environment.

Its really important health consultants are open to that discussion and that learning so they can really, fully support programs. How do we get there? How do we do this together? We have a great little handout that I love to share. It's called Partnering with a Health Consultant to Improve Health and Safety. If you have worked with one health consultant, you've worked with one health consultant. If you're one health consultant and you've worked with one director, you've only worked with one director. Everyone is bringing to this relationship their experiences and perspectives and things they've done in the past.

To truly leverage the education, expertise, training, and skills of your health consultant, it's such a good idea to go through this process of having really good conversations about these couple little things. We talk first about planning your partnership – really being clear about lines of communication, who to talk to, and who's going to carry different messages. There's communication that you have with the program, but there's also things about if you're in a

classroom and you're doing an observation, are you going to say something, or are you going to talk to your director about something?

How is that conversation ... How is it going to happen in a way that supports everyone? Because health consultants are not regulators. They're there to support best practices, and they're there to help problem solve. It's not like a compliance kind of a lens. It's a learning kind of a lens, and it's really important that teachers and all the staff really understand that and mutually agree on that work together. As you're developing this relationship, really thinking about the areas of expertise that you might support program improvement.

The program can share what are their needs, and the health consultant can share the different things that they can do or find or resources that they can bring to support those different areas of expertise. Then, consider areas for staff professional development. A lot of you identified training that needs to happen, and you can really enlist your health consultants to support all sorts of different kinds of training. Of course, you have training that there's requirements to in your state.

Like maybe, perhaps, medication administration is tied to regulations, is tied to a specific training. But they can also help with training on basic handwashing, diapering, health and safety, daily health checks. Even if it's not a formal training, you can even do informal training or work as you're onboarding new staff, so it's more of like a coaching, modeling kind of relationship. All with the end result of supporting staff to feel confident in doing the work that they need to do so they can focus on the kids and helping those kids grow and learn.

You can also talk with your director, and your health consultant can talk about ways to help expand the program's health promotion and prevention activities. Health consultants can help develop activities around ... I know we're all still in the middle of the pandemic, but we still need to make good, healthy food choices. We still need to encourage physical activity and language and using lots of words. We need to talk about how is toothbrushing happening at home? How are people sleeping? Really talk about screen time.

They could really help to expand those things that keep children and staff healthy and strong and continue to grow, and think about ways you can implement some of those health promotion activities throughout your program. Health consultants can help with communication and information sharing with families. Nurses ... I always think of myself, as a nurse, kind of like a bridge between the health care provider and our patients. When I think in early childhood, we can bring that lens about talking to folks about real ways they can do things to support their health and safety of themselves and their children at home.

Maybe talk about well-child exams. Talk about the importance of immunizations. Talk about some of the mitigation strategies and how they can use them at home and in the program to keep children safe. These are all ways that the health consultant can carry your message a little farther and just be a different voice. Perhaps they can create an article for a newsletter or post something on your bulletin on your bulletin board. That's kind of a fun ... I know when I was

with one of my programs who I spent a lot of time with. I used to go to their ... They had potluck dinner nights, which I know that we're not doing right now.

That used to be one of my favorite things because everyone was really relaxed, and we got to have very great conversations in a nice environment. Trying to find those opportunities now, I know, are a little bit trickier. Definitely working with your programs to understand maybe the best way that you can connect and do that with them. There's a lot of things that health consultants can do with programs. There's a lot of things that programs might look to a health consultant to do for.

Health consultation is different, and to really have the best results, you want to have a really good relationship. We've developed these skill- building modules. They are online on that ECLKC clearinghouse web page. There's six of them, and they're not read an article kind of a thing. They're interactive modules where you actually walk through different scenarios. In my mind, it's kind of like having the opportunity to walk alongside a health consultant and observe what they're doing for the day. It gives you a sense of some ways that you can approach common things that you see and really think about how you are working with a program so you can be most supportive of them. They are developed for health consultants, and they're really intended to support that consultative relationship through some realistic sense. There are six of them.

These skills are super-critical when you're working with programs, really to ensure that you're effective. If you're going to have a health consultant, you want them to be helpful. You want it to be a good relationship. This is just one of those things that really can help kind of set the stage, especially if you have someone that's new to the early childhood world and hasn't worked with programs before. One of the first ones that I like to take some time, and I know some of you said that you had looked at these before, so these may be familiar to you as we begin to look at them.

Actually, you know what? Before we jump in here, Nydia, maybe we'll stop. This is a good spot to stop and just make sure there's any questions. Are there any questions that I've missed in the chat?

Nydia: Well, so far we've been getting just really good feedback throughout the chat. Then in the Q&A, there is a question on what tools are recommended for parents to assess safety at home. Thanks for that question, Gretel.

Kim: Thank you, Gretel. That's a great question. I wish I had my list right here because I would share it with you. A good tip is to go to the Early Childhood Learning and Knowledge Center, the ECLKC. Even if you click on any of these links that are on the slides here, it'll bring you to the web page, and it has a great search bar. Then, I would search that, specifically, and you'll come up with some good topics.

I know we have ... I'm here up front as the face, but I've got a team behind me lifting me up, and one of my colleagues back there might be able to find a good resource to pop in the chat

for you to share with families. With children spending more time at home, that home safety is definitely very critical right now, so I thank you for bringing that up.

Nydia: Oh, just another question really quickly, Kim, kind of a logistical one about if certificates of attendance are issued for completing the skill building modules.

Kim: No, not at this time. There aren't certificates there. Yeah. It's all just for you. Steve, if I'm wrong about that, pop it in the chat or interrupt me. There's quite a few things ... On the ECLKC, there is something called the IPD which does give certificates, and this is actually outside of that system. Thank you. It's a common question too. All right. If that's it, we'll keep going. Let's take a dive in.

Creating the collaborative relationships with programs. This might sound like – of course you have a collaborative relationship – but it's actually really interesting ... well, I found it very interesting, coming from the nursing field – to talk to programs about their program because ... Well, I kind of felt like, “Here I am to help you!” They're kind of like, “Here you are! What am I going to do with you?” That was our first encounter was kind of trying to figure that out.

It became clear really fast that a health consultant's job is to be supportive and thoughtful and share, and not tell, and not know everything, but to really understand the program's needs and then to try and help find resources and problem solve and do good thinking together to address those needs. This skill- building module actually looks at two different approaches to talking with program leadership, and it really focuses on developing collaborative relationships.

You have the opportunity to follow the two different approaches, and you go through these different scenarios. You have conversations about issues or things that come up, and you see how certain conversations can open up a conversation and lead to more discussion and how certain conversations can just shut the conversation down. This might bring you back to communication 101 that you took when you were in school at some point. It is so critical as we think about working with programs and thinking about how do you bring a problem-solving approach to these conversations to continue the conversation and really get to that quality improvement?

It does take time and effort on both parts. What I have found, even, is that I think you begin to better sense when things are might not be going the right way in the conversation, and you want to always keep that conversation open and flowing. There's another one that talks about your communication styles and how important your communication is in conveying respect for the staff of the program and an understanding of their priorities, and your openness to that collaboration. In the activity, you practice communicating with a program in a series of simulated conversations.

You get to kind of be a fly on the wall and say, hey, how does my colleague do that? When you're a health consultant, you're really out there by yourself. You don't necessarily have someone that you can shadow or learn from, and these modules give you a chance to do that. As someone goes through this to help themselves ... I use this as a demonstration of how to

have conversations with directors, and again, thinking about how you can provide feedback and really convey your openness to work well to address those problems and concerns with programs.

This is one that I think is, for myself, probably one of my favorite ones because I think it's such a tricky thing. When you're in a classroom, if you see issues, you identify an issue, and you have to make a decision, right there in that moment, about what am I going to do about this? You're a health consultant and you're working with your program, your partnership with a program can be really effective when you can acknowledge problems and support a good resolution that works for everyone.

This really gives you a frame to think about what am I supposed to do if I see something? Oh, I get to click here. There we go. It gives you different ways that you can handle the situation. In this picture, which is kind of small, but you can see it's a crib, and it's by a window that has the little hanging things by the window.

We know that cords are a choking hazard for young children, and the crib being by the window can be dangerous. You have to make a decision about what's the best thing to do here. Is this an immediate problem that if I don't do something about it, something really bad could happen? Or is this something we just need to talk about and problem solve as we go? You have a choice to observe, you can address the crisis, you can dig deeper, ask questions, try to understand what's happening, why is the situation the way it is ... You can problem solve with the director, and then you can always support the solution.

It really walks around different things that you might see in a program that are worrisome right in that moment, or maybe it's something you can ask the director, hey, how come we're doing things like this? I'm just concerned about – oh, about that issue. Thank you for all the wonderful safety resources getting popped in the chat. If you haven't checked the chat, check that out. My heavy duty team behind me makes me look really good there, so thank you.

This is one that really gives you the chance to kind of think through and anticipate what you might see during the program and then think about different ways that you can have a good conversation to support any health and safety things that you have.

Those modules are really great for helping you build some of those skills so that you can really be the resource that you want to be with program staff, leaders, families, and really help them be as successful as they can. Whether it's writing a policy for safe water play, or observing different procedures, doing a training, you should be able to work with your health consultant to be that extra set of eyes and really be a resource to your program.

I want to just take a moment to talk about observations. I think it's a place that health consultants can really spend some time, if they're allowed to do observations – whether it's on the playground, in a classroom, about how are things going in the classroom. Of course, at this time there's a lot of rules that need to be followed – whether or not other people are allowed

into your classrooms – so again, take this within the context of your own state and your own programs and what's allowed or not.

But really thinking about observations are a way that can inform the program's policy and procedure development, allows you to watch the implementation of those health and safety practices, just like we talked about during the daily health check. It provides an opportunity to support staff. Sometimes you've been in a training, and you're hearing information and it sounds crystal clear, but then you go back and you're trying to do it and use it, and you're like, hmm, hmm, I'm not so sure.

This kind of makes sense. Is this what they meant? And having a health consultant or someone there, especially with so many new staff, having that person there to be able to support the staff and leadership and then be able to follow up on things. Perhaps the leadership of a program is really stretched thin, and the health consultant can really play that role. Doing observations really takes careful planning. As I said, of course, whatever is going on in your state, your county, even your local area is playing a role at this time. Everything I'm saying is really in that context.

We talked about health consultants doing preparation for an observation. They really have to be prepared, and what does that really mean? We talked about the importance of really having a good conversation about what they hope to get, what kind of support are they specifically looking for, through whatever observation you're doing. And then how are you going to ... What's your feedback loop? Are you going to do an observation and then check in after the fact, or are you going to check in as it goes along?

How are you going to make this plan to work with staff, work with teachers, and work with the program? All that is part of your preparation. I also find it's really great time to look at the laws, regulations, standards that govern the program. As much as you're looking at the program policies, you want to know, what do you have to do in order to stay open? You always want your programs to be meeting the regulations that they have to be and then really striving for that high-quality best practice. You need to keep some of those things in mind.

Some programs may also have NAEYC accreditation, and with that comes a whole different set of standards and things that they are doing to support that accreditation. Caring for Our Children is a national resource for health and safety practice standards. They are voluntary standards, but they are really, truly best practices that are evidence-based, science-informed, and provide lots of good stuff. That's the image you see on the screen, and I do have the link up there for you as well.

If that is a new resource to you, I encourage you to just give yourself a little bit of time to go in there and look at everything in there. As a health consultant, it was my No. 1 thing that I carried with me everywhere. The online searchable database is really nice because you can just use it on your phone and always have it with you. What else can you do to prepare for observation? Sometimes you're doing an observation which is super-focused, like we talked about the drop-off and pickup time.

You might also look at something like diapering. We have new staff, there may be some toddlers, they've all been trained in diapering, but we just want to make sure the staff are – they got it. Do they have the garbage where they need it, and the paper where they need it, and the diapers and the wipes and all those things that come together in the moment of diapering. I'm talking to my early childhood people. Anyone that's done diapering understands: Diapering sounds like it should be easy, but boy, is it super complex.

To someone that's probably never thought twice about how they did diapering, and now they're given a whole color-coded three-page chart on how to do diapering, it can be a little bit overwhelming. Be able to go in there, look at the policy, look at the procedure they're being asked to do, and go in there and observe diapering and help folks problem solve. Teresa's saying you have to always be prepared and stock for the next day too. So true. So true. It's a constant pace that just keeps on going. Those of you that like this diapering poster, it does actually align with the Caring for Our Children standard, and you can find it at that link below.

Another kind of observation a health consultant might be doing is really just general observation. Hey, can you go into a couple classrooms and just give it a health and safety look? Go in there and see if you see any health and safety concerns. I call that a general observation. They just want to make sure that things are tip-top and in good shape.

I find that using some sort of a health and safety resource checklist tool is super helpful. This one out of California ... It's the University of California San Francisco California Child Health Program's tool, but it's all aligned with the Caring for Our Children best practice standards. If you find an item that is a challenge for a program, there's a direct link to a Caring for Our Children standard which helps you understand why that particular item on the checklist is so important. It helps provide you, as a health consultant, with some information. There's a section in the standard called rationale, which tells you why are we worried about this in an early childhood program. I find that it's a great way to share information with programs.

That's the general health and safety checklist. It has different headings like first aid, equipment and furnishings, medicine, nutrition, and things like that. These checklists are also great to use in programs, just giving them to teachers and asking teachers to switch classrooms and do them for each other.

It just provides that second set of eyes to get a nice, fresh look. Another thing that health consultants can really do is looking at data. The data, we know, provides objective information for program practices. A program might really find it useful to have someone else looking at some of their data to see what kind of patterns, trends, issues, and things that they can identify. Health consultants can generate data reports based on their observations.

Let's say you did a general health and safety checklist in five rooms, and then you could compile that data and maybe identify different areas that are needed for training or different types of equipment or materials that are needed in all the different rooms. That's one way that you can use data. You can also use injury data. That's the picture you see on the screen, is when a

health consultant can look at those injury reports, review them ... There's so much information in those injury reports.

A lot of times, incident or injury reports tell you what kind of first aid was administered at the scene. You could look at it and say, "How are they doing applying first aid? How are they doing notifying family members?" But you could also look at it to identify the who, what, where, when, and how of injuries. We call that hazard mapping. They really help you identify the patterns and locations of an area of where things happen. Those of you that are public health folks, you might see this in public health. It's adapted from the public health model, where they do different kinds of mapping.

You can say to yourself: Who was involved in each injury? Where did the injury occur? What happened? What was the severity? And where? If you had a stack of injury reports, you could take a picture of your playground and put Xs in all the places that there were injuries, and you can begin to identify if there were clusters of areas that had certain problems. You could use that data to inform some of your observations about what's going on here, what do we need to better understand, and what can we do to prevent these injuries moving forward, which is such a great thing to be able to do when your programs are working with onboarding and new staff and all those challenges.

To be able to provide some kind of big picture support is a great use of your health consultant. Just doing a quick time check there. We seem to be OK. Nydia, I should stop for some more questions? Are we doing all right?

Nydia: We've been doing great. There have been questions and just feedback, but between the resources, I think that it's been getting answered. We do have a question that came in about ... It says, "Our Head Start center is not doing oral or dental exams due to COVID-19, so I wanted to know if that applies to all Head Start centers." I do know that there was a resource in terms of COVID-19 policies in oral health that was placed in the Q&A link. If you wanted to add to that. But there is a link in there, and that's all the question and answer.

Steve: I'm writing an answer, Nydia –

Nydia: OK.

Kim: Perfect.

Steve: Kim doesn't need to worry about this one. But thanks, Nydia. Thanks, Kim.

Nydia: Sure. We're good to go, Kim.

Kim: Don't you love hearing everyone in the behind the scenes? Thank you all, I appreciate that. We hope you're getting the information you need out there because I have this great team. Keep asking, and we'll keep connecting you to things that are helpful. Another resource that you might find helpful is the Virtual Early Care and Education Center. We call it the VEEC. It's

really designed to have the look and feel of an actual center. You can kind of see in the picture, it's like if someone took off the roof and looked into a program.

You can pick what kind of spot you want, what room you want, is it toddler, school age, three-to five-year-olds, and then you can explore different hot spots in the room. It's really a unique tool that lets you go in the room, pick a hot spot, and then when you're in the hot spot. Like let's say you pick the kitchen. You could pick the high chairs where the children are eating. And you could click on the hot spot, and it would talk about health and safety considerations, infectious disease considerations, safe ways to cut food ... It would talk about different resources and standards that you could use to address any issues there.

I find this a great tool to support the layers of things. Oftentimes we think about, oh, what are our infectious disease practices? We talk about handwashing, and we talk about cleaning and sanitizing, and we talk about diapering, and we talk about making sure kids have physical exams. When you walk into a classroom, how do you put all of that together? Because you're seeing everything all at once.

The VEEC kind of helps you see everything all at once. When you're in the toy area, you can think about how do you clean and sanitize the toys, but you can also think about the safety of the toys, the safety of the materials, the safety of the equipment that is there. It's an interesting tool that kind of lets you see all the different things you might be looking for and looking at as a health consultant. All these activities really help to build your IQ of your lens, of your health and safety lens.

Every time you use a tool and look at a standard and you dig into these, you begin to see so much more health and safety with every single interaction. No matter what, it's always important to remember that an early childhood learning environment is set to nurture the growth and development of young children through good, nurturing relationships, creative activities, engaging materials, and positive relationships. I should have that as a banner across the top. Sometimes – I will speak for myself as a nurse – I geek out on nursing, and it might be over the top for some folks sometimes.

It's really important with me in my own personal work that I always remember that they weren't here to wash their hands 20 times a day. [Laughter] They're here to grow and learn, and it's our job to really think about when do we need to wash hands so that we minimize those germs, and really vary the two environments. When you keep that in mind, you might walk into a classroom and see one child playing in a water basin, and you might all of a sudden start thinking about all the health and safety things that go into that activity.

It's always important to remember that there is a learning lens that goes into that activity as well. Playing in those areas allows sensory exploration, they feel the water, the way it feels on their hands, and all the good science that's happening ... That's really an important thing to keep in mind in all we do when we're working with the program.

The last thing I wanted to touch base on were quality improvement plans. We've gone kind of around the whole gamut. What can health consultants do? How can you set up a good partnership so that you have the results that you want? That actually, it's really helpful, and it's a helpful relationship, and it's meeting what you need. We talked about some of the different ways that health consultants can be out there doing training, doing observations, doing checklists, looking at data. What does that all come down to? What do you do with those observations? What do you do with these conversations?

Part of that relationship with the director should involve some time carved out – I know it's not easy, and oftentimes you might have carved out and set a time that ends up not working because of the way the day goes. It's really good to kind of create a time where you can debrief together and really talk about your experiences, what you saw, and do some planning from that place. During that time, I always think everyone ... When folks receive feedback, you always like to start with all the strengths that you see.

There's so many good things going on in programs, and it's such an opportunity to reflect what you see back to your program leadership and directors because everyone likes to hear what's going well. You never know, you may have observed something that they have been working on for a long time, and just that you've noticed it and observed it can be great validation and wonderful information for the director. Then, always thinking about what are those areas that are needed for improvement ... It could be about what you noticed in your data collection in your review of a playground. Really thinking about what are those areas of improvement and how can we prioritize them? What places can we make those changes in? Some of the places that a health consultant might work with a program might be with those policies and procedures.

We're going to talk about that this March, 2022 ... talk about how do we create policies, procedures, protocols that really work, that really reflect what needs to happen in the program? Also, think about is some of the issues we're having with implementing something, and if it is, what do we need? Maybe we just haven't ordered enough paper towels to keep the paper towel supply coming to meet the demand of all the handwashing, and it's a simple solution. Maybe it's something that needs to be addressed through training. Maybe it just is something that – maybe one person needs support, or maybe multiple people need support. Really trying to identify the responsible parties, create a timeline, and doing it as a shared responsibility, but really be clear about who's doing what.

I find that if you go through those steps of review the findings, prioritize the findings, identify the things you want to work on, and then make that action plan to get it done, it really allows the relationship to come full circle so that the health consultant and a director can really be working together. Too much to do in an early childhood program to just try and do it alone, and it really takes everyone together.

As a health consultant, I know that when my director and my leadership understand some of the issues – or we talk about some of their concerns and then we reflect on them, and I share about some of my concerns and we decide how are things going to work in a program – the

director and the leadership there really sets the tone for the whole program. What's going to be moving forward and how things are going to be done and how that accountability is going to be maintained, and our job is just to ensure that they have what they need so they can make those decisions and do it to the best that they can. That quality planning time and discussion really is an opportunity for that to just come full circle.

That hour flew by really quickly. Thank you for being here today. We really talked about how health consultants can be a resource to the program and what are some of the different ways that, if you're a director or leader in a program, and you hadn't thought about using your consultant this way, I probably gave you some different ideas and different ways to work with your health consultant to support you. For those of you that are health consultants out there, I hope that this gave you some different ideas about resources and things you can use and ways that you can best support your program.

On this slide we have a list of a whole bunch of different resources that we shared today, and that list has also been popped in the chat as we've gone through. I'd just like to thank you all for being here with me today, but you do need to hang on for our closing slides that you'll receive important information about evaluation, certificates, handouts, and all that good stuff. With that, I'm going to turn it over to Nydia.

Nydia: All right. Thank you so much, Kim. Very helpful information. It looks like participants were very much engaged. We had great questions and comments. We were answering the questions all along. If you have more questions, you may go to MyPeers or write to health@ecetta.info. Please remember that the evaluation URL will appear when the webinar ends, so do not close the Zoom platform or you won't see the evaluation pop up. After submitting the evaluation you will see a new URL, and this link will allow you to access, download, save, and print your certificates. I want to thank everyone. Thanks again ...

Steve: Nydia, this is Steve. And before you do the thank you, Kim, can you come back? There are a couple of questions about CCHCs that I think need to get answered here. One is about finding a child care health consultant, and the other is from a Head Start health manager, she wants to know if she's automatically the consultant. She doesn't have someone with that title, should they be hiring an additional person? And I know this kind of question comes up in this series all the time, and Nydia, you weren't aware of that. And I just hoped that Kim could grab that.

Nydia: Sure, no worries.

Steve: Kim, you're on mute.

Nydia: You're still on mute.

Kim: Jumped right off there, everyone. Yeah, I think these are great questions. Whether you're a health manager and you're wondering if you need to bring on a health consultant, again, that

really is going to go to your state-level requirements and who licenses you, and what those requirements are.

Steve, I know I've got you in my ear. Head Start does not require there to be a health consultant, but states might have licensing laws that require a health consultant. And if you're a Head Start that is also licensed by the state, then you would need to have a health consultant. Whether or not you could play both roles would be something I would talk to your state licensing about. Anything else?

Steve: Or QRIS, yes. A child care health consultant is not usually the same as a health manager. We do have people that play both roles across the country. But as Kim said, it really is a Baskin and Robbins setup.

Kim: I shouldn't have ice cream ...

Steve: I love ice cream.

Kim: It's 61 degrees in Connecticut, so ice cream is on my mind.

Steve: Back to you and Nydia.

Kim: Thank you. The question about how do I find my health consultant ... Again, that's a really tricky one. I would check with your licensing agency in your state or with your local Child Care Resource and Referral agency. They're either through your state or through a local CCR&R. In some states they are out of your Public Health Department; the other states, out of your Visiting Nurses Association. It can really run the gamut. I would also recommend that working with some of your peers in the state who might be able to help direct you to that resource, so thank you. Nydia?

Nydia: Yes, thank you, Kim. Thank you to Steve for chiming in. That is all the time that we have today. As I mentioned, if you do have more questions, you can go to MyPeers or write to health@ecetta.info. Again, the evaluation URL, it will appear when the webinar ends. Do not close the Zoom platform or you will not see the evaluation pop up. After submitting the evaluation, you will see a new URL.

This link will allow you to access, download, save, and print your certificate. Thank you, again, to everyone. Thank you to Kate and Livia backstage. Thank you to all the participants. You can subscribe to our monthly list of resources using this URL as the URL mentions, and you can find our resources in the health section of ECLKC or write us at the email address health@ecetta.info. Thank you so much.