

What's New From The Bureau of Child Care

A. Message from the Child Care Administrator Melanie Brizzi

CareFinderIndiana
www.childcarefinder.IN.gov



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Hello, I am Melanie Brizzi, the new administrator for the Bureau of Child Care. I have had the pleasure of working with many of you already as a consultant to the bureau over the past four years. As a consultant, I worked on a variety of issues, including child care regulations and legislation, the child care provider advisory groups, the Committee on Child Care, as well as on the development and implementation of Paths to QUALITY.

I am looking forward to working with you in my new role. As the Child Care Administrator, my goals for the first year include ensuring excellent customer service during all aspects of the licensing and registration process, offering child care providers high quality professional development opportunities and maintaining a high level of communication among all early childhood stakeholders, including families, providers and early childhood advocates. Additionally, I will strive to provide high quality services to families in order to assist in the difficult process of locating high quality child care. I believe that all of the varying aspects of my responsibilities as the Child Care Administrator work together to help ensure that Indiana's children are safe and healthy while in child care and to help our youngest children prepare to enter school successfully.

If you are not familiar with the child care provider advisory groups, you can locate more information on www.childcarefinder.in.gov. These groups meet with the bureau quarterly in Indianapolis to discuss issues and concerns surrounding operating a child care business. Additionally, these advisory groups report annually to the Indiana General Assembly regarding the state of child care within Indiana. We are still looking for several child care providers to join these advisory groups. If you would like more information about serving on one of these committees, contact me at melanie.brizzi@fssa.in.gov or 317-234-3313.

I am happy to announce that over the past year, we have distributed over \$190,000 in cash and non-cash awards, and have provided hundreds of hours of free mentoring services to providers enrolled in the Paths to QUALITY program. Additionally, over 17,000 children have been positively impacted by the increased quality of their child care facility. Remember, Paths to QUALITY is a voluntary and free program designed to assist you in meeting your professional goals for your child care program. You can find additional information about Paths to QUALITY in this newsletter on page two.

Thank you for your hard work and dedication to Indiana's children. I am looking forward to working with you.



B. Quality Development

Janet Deahl

Paths to QUALITY Now Available Statewide!

The Bureau of Child Care (BCC) is happy to announce that the last regional rollout for Paths to QUALITY was implemented on January 1, 2009, making the program available to child care providers statewide! The BCC is also very excited to report that since the first rollout on January 1, 2008:

- 1,034 child care providers have attended an Introduction Session to find out more about Paths to QUALITY;
- 864 providers have enrolled in the system;
- 229 providers have been rated; and
- \$201,150 dollars in awards and incentives have been made to providers for quality improvements.

If you're not familiar with Paths to QUALITY, it is a free and voluntary program designed to help child care providers learn new ways to improve the quality of their care and to validate programs and providers for ongoing efforts to achieve higher standards of quality. It provides the tools to help you build your business and better serve the families in your care. Interested in finding out more about Paths to QUALITY? Contact your local Child Care Resource and Referral Agency (1-800-299-1627) or go to www.childcarefinder.in.gov and click on the Paths to QUALITY link. Be sure to watch for exciting new enhancements to the Paths to QUALITY website in the future!

C. CCDF Policy

Linda Kolbus

Provider Holidays

Things to remember when selecting provider holidays to be paid through the CCDF voucher program:

- Reimbursement may be made to providers with an established written policy to charge all consumers for days they are closed due to a holiday.
- The provider may be reimbursed by the CCDF program for up to six (6) days per calendar year, per child, for children enrolled with a full-time weekly rate.
- The facility must be closed to be paid for the holiday.
- The provider must select the holidays, in advance, by completing the required documentation provided by the Central Reimbursement Office.

D. Licensed Child Care Centers

Lisa Clifford

Question And Answers From The Field



- Q. Why do handwashing sinks and kitchen cabinets have to be sealed to the wall?**
- A. Handwashing sinks** must be sealed to the wall to prevent a cleaning and maintenance problem in the future. If the sinks are not sealed, water and soap could splash behind the sink causing damage to the wall and a cleaning problem. The sink should be sealed to the wall with caulking which has been smoothly applied. Caulking that is not smoothly applied is very hard to keep clean.
- Kitchen cabinets** must be sealed to the wall in kitchens for basically the same reason as handwashing sinks. The cabinets should be sealed with caulk that is smoothly applied to prevent food particles and other substances from getting behind the cabinets. If cabinets are not sealed it can cause a cleaning problem and a location for possible insect harborage.
- Q. When should children be excluded from child care?**
- A.** Any child exhibiting symptoms of illness such as fever of 101°F or higher; runny, crusty eyes; vomiting; diarrhea; undiagnosed rash; or one who is listless and unable to participate in normal activities should be excluded.
- Q. What is diarrhea?**
- A.** Diarrhea is defined as one or more abnormal stool(s) or frequent stools.
- Q. When may a child return to day care?**
- A.** When a child has been symptom free for 24 hours, he/she may return; a child diagnosed and placed on medication may return 24-48 hours after starting medication.
For additional guidance, refer to your communicable disease chart and check with your consulting physician.
Always practice good handwashing to prevent spread of illness!
- Q. May I store all medicine in the refrigerator?**
- A.** No. Only medicine labeled "**REFRIGERATE**" may be stored in the refrigerator! This is usually liquid antibiotics and these medicines must be placed in a clean, lidded, plastic container labeled "medication" and stored in the refrigerator.
- ALL OTHER** medicine must be stored in a **LOCKED** box, cabinet or drawer that is not in a kitchen or bathroom. Medicine that is not required to be refrigerated may be adversely affected by moisture and cold temperatures. For example, if a medication is a suspension, the cold temperature may thicken the solution and cause improper dosage. Most over-the-counter medicines such as Tylenol, Dimetapp and Robitussin, should be stored at room temperature.

E. Unlicensed Registered Ministries

Ken Hudson

Registered Child Care Ministry Voluntary Certification Program (VCP) Revision:

There has been some concern and/or confusion regarding the requirements for child care staff physicals and children's physicals as they apply to the VCP Health Certification checklist items one and three. Please note the checklist changes below:

- Checklist Item 1: The current standard reads; "All staff members have a physical examination within one (1) month of employment or six (6) months prior to employment".
The revised standard now reads; "Within thirty (30) days of employment, newly employed staff, volunteers, substitutes, student aides, and any other personnel having direct contact with the children or providing food service shall have written verification of a physical examination by a physician or nurse practitioner."
- Checklist Item 3: The current standard reads; "Each child has a physical exam within 30 days of admission or six months prior to admission".
The revised standard now reads; "Within thirty (30) days after enrollment or no earlier than twelve (12) months prior to enrollment, each child shall have written verification of a physical examination by a physician, or a nurse practitioner."

These revisions are now in line with licensed child care center requirement. Please contact your ministry inspector if you need additional clarification.

F. BCC Staff

SAFETY

Twice in the last 12 months, a television has fallen on a child causing serious injury. In the most recent case, the television was on top of a four foot cart that would typically be used for food service. The eight year old was playing with friends and became entangled in the cord and knocked the television off the stand and onto her head. She suffered a skull fracture and other facial fractures.

It is very important for the safety of children, as well as adults, that furniture such as carts or stands be used according to the manufacturer's guidelines and standards. Items such as televisions need to be secured so that they can not fall over and onto a child. Low items are just as dangerous because toddlers pull themselves up on anything that is available. If an item is not secured, it can tip over and onto the child. Items higher but still within children's reach present the same problems. If not secured, sudden movement or a child using the item to pull themselves up or to gain balance, can present a danger.

Some easy pointers to remember are:

- Only use furniture or equipment according to the manufacturer's guidelines
- Make sure that items sitting on top of other furniture or shelves are secure and cannot be pulled over or off. Test it yourself.
- Make sure cords are out of the reach of children or secured tightly so as not to dangle and have someone trip over them.
- Supervision - ensure that children are supervised properly and staffing is appropriate

G. Child Care Health Consultant Program



Paula McClain



Winter Safety For Children



Winter is upon us! It is now important to understand that the cold, ice, and snow initiate some extra safety needs for our children.

What to Wear.

- Older babies and young children should be dressed in one more layer of clothing than what an adult would wear and be comfortable.
- Blankets, quilts, pillows, sheepskins and other loose bedding may contribute to Sudden Death syndrome and should be kept out of infant's sleeping environment. Sleep clothing, like a one-piece sleeper, is preferred.

Hypothermia (Extreme low body temperature)

- A child's temperature may fall below normal due to prolonged exposure to the cold. This may happen if the child is playing outdoors with improper clothing.
- As hypothermia sets in the child will shiver, become clumsy and sleepy. His/her speech may also begin to slur.
- If you suspect this may be happening call 911 at once. While waiting for response, take the child indoors, remove clothing, wrap in blankets and warm clothes.

Frostbite

- Frostbite happens when the skin becomes frozen. This usually happens on fingers, toes and cheeks. The skin becomes pale with blisters and the child may complain of numbness or burning.
- If frostbite occurs, place the affected areas in warm (104 degrees Fahrenheit) water. Warm washcloths may be used for such areas as the lips, ears or face.
- **DO NOT RUB THE AREA!** This may cause the skin to peel off.
- If the numbness continues for more than a few minutes, call your doctor.

Other Safety Hints

- If your child has winter nosebleeds, try using a cold air humidifier in the child's room at night. Saline nose sprays may also help with older children.
- Many doctors feel that bathing two or three times a week is enough for an infant's first year. Frequent bathing may dry out the skin.
- Cold weather does not cause colds or flu. The viruses that cause colds and flu tend to be more common in winter when children and adults are in close contact with one another. Frequent hand washing can help reduce this.
- Set common sense time limits on outdoor play. Have the children come in and warm up frequently.

Outdoor sports

- Allow children to ice skate only in approved areas. Consider having the child wear a bike helmet when skating.
- Make sure that sleds are free of sharp protrusions and splinters and that they are structurally sound.
- Sledding feet first or sitting up may prevent head injuries.
- Sled slopes should be free of obstructions like trees or fences. They should be covered with snow, not ice, and have a flat runoff at the bottom.

Winter can be a fun season but it is important, as always, to be aware of safety issues.

Reference: American Academy of Pediatrics "Winter Safety Tips"

H. Licensed Child Care Homes Debbie Sampson

Staff Change

We would like to introduce our new home consultant for the Southeast area, Kelly Schmelzle. Kelly will be job sharing with Julie Spaulding. Roxanne Snodgrass left the first of January to pursue other interests. We wish her the best of luck and will miss her knowledge and experience. Until April 1 you can send your calls or questions to the following people who will be assisting in the coverage and training of Kelly. After April1, you can send all calls to Kelly:

Clark County	Julie Spaulding	812-620-7370
Dearborn County	Sue Allen	317-519-0804
Jefferson County	Julie Spaulding	812-620-7370
Jennings County	Vicki Allen	317-519-0803
Ohio County	Ron Doyon	812-340-2423
Ripley County	Ron Doyon	812-340-2423
Scott County	Vicki Allen	317-519-0803
Switzerland County	Ron Doyon	812-340-2423
Kelly Schmelzle	812-621-1893	fax: 812-883-8478

Effective 4/1/09, Kelly will be the consultant for Washington County and Julie Spaulding will be the consultant for all of Clark County.

Thanks to those consultants who volunteered to assist the providers in those counties with questions and in completing their inspections.

Kelly comes to us with over 20 years of experience in child care. Kelly has been a licensed child care home provider, a CDA advisor, Special Needs Coordinator for child care resource and referral, a mentor, and an assistant manager of a child care center. She has a bachelor's degree from Purdue University in Early Childhood Education.

We are very excited to have Kelly as a part of our child care team.

The Child Care Home totals for 2008 finished up with 31 more homes than 2007. As of 12/31/2008 there were 3053 licensed child care homes throughout the state. That's a potential capacity of 37,670 children.

We would also like to congratulate the 62 accredited homes as of 12/31/08 and the many providers who have become involved with Paths to Quality.

Continue to do good things for Indiana's children and have a safe, healthy, and prosperous 2009.

I. Child Care Operations Randy Wagner

CCDF Discrepancy Payments Update

Total discrepancies received from October/December 2008: 9,507
Estimate time on processing/payment: 30 - 45 days

Top Three Rejections/Errors

1. Over 60 days old (clock starts after bi-weekly paid date)
2. Missing parent and provider signatures
3. Swipe hours less than 25 and only receive half of payment