CHILD CARE WY

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A Resource for Integrated Child Care Providers

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+ Playing It Safe

Children's well-being in inclusive child care settings encompasses more than just simple management of colds and flu. Safety policies, staff and child education, precautions against injury, and a basic knowledge of normal development are each part of good child care safety practices. And although it is generally agreed that child care providers should have a certain level of understand-

ing concerning basic safety and first aid, knowledge and actual application probably vary widely.

All children, regardless of ability or disability, have certain qualities in common: curiosity, impulsiveness, and playfulness. While these qualities are essential for growth and learning, they may combine with a child's age and lack of maturity to contribute to unsafe situations.

Children who have disabilities have the same basic need to explore and "learn by doing" as other children. However, they may have had limited experience or lack the physical strength, coordination, or ability to judge risky situations with

the same expertise as other children their same age.

Safe child care programs give children a chance to have the every-day-little-kid experiences they might otherwise miss. And for the parents of a child with a disability or chronic medical condition, a child care provider who pays particular attention to health and safety issues might well be the deciding factor for enrollment.

According to the National Bureau of Statistics, it is <u>injury</u>, not disease, which poses the most serious threat to children under the age of six years old in the United States. Injury rates have increased to the point where, sometime before the age of six, half of all children will be injured severely enough to require medical attention.

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Children who spend time each week with their peers benefit greatly from being around other children. Group care does, however, introduce particular difficulties for the child care provider in the area of injury prevention and safety, especially for very young or inexperienced children. Child care settings offer children with and without disabilities the opportunity to make friends, play, explore . . . and

also, the possibility of being injured inadvertently while doing so. An uncovered electrical outlet begs a two-year-old to "explore me," cleaners and solvents in colorful bottles may suggest good things to drink, and stairs without latched gates may prove to be an enticing challenge for novice walkers of any age.

Some sources claim that injuries in child care are a result of the environment, a bad "fit" between a child's abilities and the demands of activities, and/or a lack of supervision by adults. They report that a bad "fit" occurs when the demands of child care activities far underestimate or overestimate the

demands of underestima abilities of the children involved.

A safe child care environment provides <u>all</u> of the children with the opportunity to develop to the fullest extent of their abilities without the risk of harming themselves or others. On the other hand, this type of environment also encourages children to learn by taking small risks and challenging themselves, and, at the same time, protects them from serious injury.

Ensuring the maximum amount of safety for the children in your care can be an awesome responsibility. The challenge can be met by:

- * prioritizing the needs of children and staff.
- ★ learning about the developmental abilities of the children in the program.
- ★ developing strong policies.
- ★ providing education for children, parents, and staff to ensure safe play and practices.
- ★ following consistent preventive measures.
- ★ being firm in the commitment to provide nothing less than excellent care for young children.+



+ FROM THE SOURCE: Where is my safety net?

Early childhood professionals who care for young children with disabilities are usually very well informed about the child's "team"--people with titles like "pediatric motor therapist," "speech & language therapist," or "psychologist" who are closely associated with the child and their family and can offer invaluable information about the child's care. However, they are not the only "specialists" that can help you provide quality care for children in your program.

When safety is the issue, child care providers can find



specialists in their own communities and states—individuals who can answer questions about high quality and safe environments for young children. In your search for "expert" opinions on effective safety policies and prac-tices, some of the experts are only a

phone call away. This "safety net"-work includes the local fire department; police department; county extension agent or horticulturist; local, state and national phone numbers for product safety, poison control, and emergency services; and national information centers.

How can they help? Information about smoke detectors, fire safety, and emergency exit plans are the expertise of the local fire department. Details about poisonous plants can be gotten from the county extension agent, a local high school or university botany department, or even the local garden nursery. And every community has information services and emergency numbers listed inside the telephone book.

This safety network can help in the day-to-day operation of a safe program and may make a huge difference in the outcome when an emergency situation occurs.+

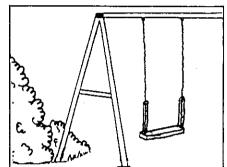
+ MAKING IT WORK: Swinging Safely

The average swing set with chain links holding the swings almost always creates a hazard for young children's tiny fingers! Here is a quick idea to eliminate the problem without limiting access to these swings or the necessity of an adult's hovering over each swinging child.

Measure the size of the chains that attach the swing to the overhead support. Then take a trip to the hardware store and purchase four or five feet of flexible vinyl tubing. Select the size of tubing that will easily encase the chain (if possible bring a little of the chain with you to get the right size). The tubing should slide over the chain yet fit snugly.

Cut the tubing in half so that you have two pieces of equal length. Slip one tube over each of the chains on both sides of the swing. This flexible tubing protects

children's fingers from being pinched in the chain links and, at the same time, makes it easier for some children to grasp the lines and swing by themselves.



Vinyl tubing has many uses for

young children's play and development, so you may want to purchase extra yards in differing diameters. Very thin tubing (1/4") is great for lacing beads. Larger tubing may be used for lacing toilet paper rolls. A variety of sizes and lengths works well (combined with a few funnels) to make water play even more fun!+

+ NOTES FROM HOME:

When Oranges Aren't Oranges

Some kids just redefine your whole idea of something. When most kids do something, they all do it the same way, so "oranges are oranges," but when my kid needs to do the same thing, oranges become bananas. Sunni's mom smiles as she explains to the umpteenth person at her church's Harvest Dinner why Sunni, at five years old, still eats with her fingers. Sunni's motor control isn't like other five-year-old kids'. They get food into themselves with a fork; Sunni might never be able to do that. She uses a different approach, and doesn't worry about whether or not she uses a certain tool to do it.

Sunni's child care providers have learned right along with her parents when skills that are oranges for other kids are bananas for Sunni. Area rugs are taped down or removed to help Sunni (and a number of other children) practice walking skills without danger of falling. The three steps leading outdoors were a challenge, too, until Sunni suggested holding onto the railing and easing down backward. Now a number of the toddlers have tried backing down the stairs, and, <u>voilal</u>, they can do it without help also. Safety issues cannot be taken for granted with Sunni in the program. Certain foods present a danger of choking for Sunni. Medications need to be given precisely and on time, or Sunni's motor abilities suffer and she is more prone to injury. Safety issues even affect which games are being offered. Instead of baseball, kickball is popular. Providers don't have to worry about out-of-control bats, and more of the children enjoy playing kickball.

Caring for Sunni requires ingenuity, acceptance of her approach, and the ability to recognize when oranges are bananas. However, sometimes bananas are just right, too--whoever heard of an "orange split"?!+

+ SPOTLIGHT: Caring For Our Children

In 1943, Dr. Leona Baumgartner addressed the American Public Health Association's yearly meeting and said it was important that

... Health standards [in child care] be maintained and that these standards include a safe and clean environment [and] a medical and nutritional program that safeguards the health of the young child, and a staff of warm, friendly adults who will allow children to make the best of their innate possibilities and recognize the marked differences in the mental,

physical and emotional make-up and needs in individual children and in children of various ages.

Nearly 50 years later, in 1992, through a joint collaborative effort, the American Public Health Association (APHA) and the American Academy of Pediatrics (AAP) published CARING **FOR** OUR CHILDREN - National Health and Safety Performance Standards: Guidelines for Out-of-Home Child Care Programs. Before this publication, no successful effort had been made to develop a set of standards that can be applied to child care programs on a national level.

The intended audience of these standards is the general child care system in the United States: both privately and publicly funded programs, child care centers, large and small family child care homes, before and after

school care, public schools, Head Start, and organized part-time programs.

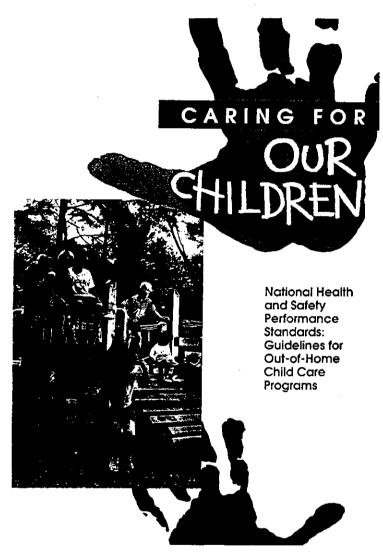
These standards are based on one of the basic safety considerations in child care programs: that the child must be safe and protected from hazards and potential injuries. This includes both unintentional injuries (e.g., falls from swings and slides) and intentional injuries (e.g., aggressive acts such as biting and hitting). The standards are also unique in that an entire chapter delineates special considerations for young children with disabilities, while recognizing that the information in the entire book applies to children regardless of disability.

The standards acknowledge clearly that prevention, however important, must occur in a setting of nurturing and affection. Providers should not only protect the child, but should also promote the achievement of his or her fullest potential in both physical and psychological health.

Child care licensing and registration practices vary from state to state, and enforcement and education can vary from community to community. How do we, as early childhood professionals, find a "common ground" when

we are looking for quality information and guidelines for our programs? Providers across the country have turned to these standards to help them formulate health and safety plans for their programs. The standards can serve as a guide that can answer questions and provide additional information about what is high quality health and safety in child care.

Child саге providers aren't the only ones to benefit from these stan-Child care redards. source and referral programs have used the standards as the backbone for training and to help answer questions from parents and providers. Licensing agencies look to the standards for current information about best practices. The standards serve as a reference for public health professionals, pediatricians, and others who provide consultation to early childhood profes-



sionals.+

For more information regarding Caring for Our Children: National Health & Safety Performance Standards, you could first call your local child care resource and referral program to inquire about borrowing a copy. Or you can contact:

AAP Publications Department P.O. Box 927 Elk Grove Village, IL 60009-0927 1-800-443-9016

+ WHAT DO I DO WHEN

QUESTION: Help! I've had two children injured falling from my outdoor climber so far this year. I'm just thinking I should take all of the climbing equipment out!

ANSWER: Assuming your climbing equipment is safe and supervision is adequate, these injuries may actually be a result of the children's falling to an inappropriate surface. Many providers do not realize that falls to the ground surface from playground equipment account for nearly 50,000 injuries each year to children under the age of five. A one-foot fall, directly on the head, onto concrete or asphalt can be fatal. A two to four-foot fall onto packed earth can also be fatal.

One solution is to place rubber tile beneath the play equipment. A number of large corporate child care programs have opted for standard or double rubber tile as a safe choice of playground surface. Double rubber tile increases the safety factor tremendously. On this surface, a child would have to fall eight feet before sustaining a life-threatening injury. Tile is a good choice, unless paying several thousand dollars to resurface your outside play area is not in your budget.

However, there are inexpensive and equally safe solutions. Did you know that a child would have to fall from a height of at least ten feet to sustain life-threatening injuries if the playground surface is six inches of wood chips? And a child would have to fall from a height of 12 feet to sustain similar injuries on twelve inches of loose sand! Few programs even have play equipment that allows children to climb to 10 or 12 feet! Equally impressive is the general ease and low expense of both wood chips and sand. Local lumber mills, and many sand and gravel companies are willing to donate to early childhood programs.

Before you take out your climbers, remember that young children, even young children with motor impairments, can benefit greatly from climbing and pulling challenges. It is important that they have many opportunities to take advantage of this developmental experience, and you can help them by making it safe for them to try.+

(If you have a question about children with disabilities in child care settings, please send your question to CHILD CARE plus+.)

+ RESOURCE REVIEW

- ** The Maternal and Child Health Bureau's (MCHB) National Resource Center for Health and Safety in Child Care seeks to enhance the quality of child care by supporting state and local health departments, child care regulatory agencies, child care providers, and parents in their efforts to promote health and safety in child care. Call (703) 524-7802 or write National Center for Education (MCHB), Georgetown University, 2000 15th Street North, Suite 701, Arlington, VA 22201-2617.
- ** For early childhood professionals who want to know now how their program measures up, there is Little Bears and Boo-boos: A Health and Safety Checklist for Child Care Providers. To order call 1-800-235-4122 or send \$2.00 to CC+, MUARID, University of Montana, Missoula MT 59812.+

CHILD CARE plus+ is designed to enhance the integration of children with disabilities in child care settings by supporting child care providers, parents, and community service providers including social workers, therapists, physicians, teachers, and administrators.

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For subscription information, call 1-800-235-4122 or write:

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