

Pennsylvania Chapter



HEALTH LINK ONLINE

Uniting Children, Parents, Caregivers and Health Professionals

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Sun Protection in Child Care



The skin of infants and toddlers is more sensitive to ultraviolet radiation. Their skin absorbs chemicals more easily than the skin of adults and older children.

Sun exposure can cause unhealthy changes in the skin, including the skin of infants and tod-dlers. The ultraviolet radiation that damages skin is UVA and UVB. Children should spend a lot of time outdoors. Protecting their skin from sun damage is very important.

No matter what type or tone of skin a person has, from infancy to old age, everyone should have protection from sun exposure. Sun screen products and sun protective clothing help prevent sunburn, skin cancer and early skin aging throughout life. The best protection is wearing light weight, tightly-woven sun-protective hats and clothing outside. Combine wearing sun protective clothing with wearing sun screen, except that children less than 6 months of age should not have sunscreen products on their skin.

In 2011, the federal Food and Drug Administration adopted new rules for sunscreen labels. When selecting sunscreen, make sure the label reads "Broad spectrum", "SPF 15" or higher up to "SPF 50", and "Water Resistant." All sun screen products need to be applied at least 15 minutes before exposure to the sun. This gives the product time to attach to the skin for protection. Sunscreen products should be reapplied if sun exposure occurs more than 2 hours after the product was last applied.

"Broad Spectrum" means that the product protects against both UVB and UVA rays. These rays can cause sunburn and skin cancer.

The **SPF** rating indicates how long the sunscreen is effective. No sunscreen blocks 100% of the rays of the sun. Products rated lower than 15 SPF do not provide enough protection. Products with ratings higher than 50 SPF do not offer significant additional protection.

"Water Resistant" means that the product resists removal by sweat or water. Water resistance decreases with time. The product should be water resistant for up to 40 minutes or 80 minutes. This means the sunscreen provides protection while swimming or sweating up to the time listed on the label.

The American Academy of Pediatrics and the American Academy of Dermatology recommend products with titanium dioxide or zinc oxide for babies older than 6 months. Apply this type of product to all areas of the body, being careful around the eyes. If babies rub sunscreen into their eyes, wipe the eyes and hands clean with a damp cloth. If the sunscreen irritates the skin, try a different brand. (continued on page 2)



Safe Shoes

Elizabeth Wakelee, director of a Bucks County child care center took the Child Care Health Advocate course at

Northampton Community College in the spring 2016 term. She shared with her classmates the reminder about safe shoes that her center posts where families check in their children. Elizabeth says it works. ECELS is sharing the text of Elizabeth's helpful reminder in this issue of Health Link Online. We left out brand names of unacceptable shoes. We're pretty sure that you know them. The reminder says:

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(continued from page 1: Sun Protection in Child Care)

Choose a sunscreen product without oxybenzone if possible. Oxybenzone is a hormone modifier when tested on animal skin. Select sunscreen without insect repellent. Sunscreen should be reapplied more frequently than the insect repellent. Follow manufacturer's directions.

The rays of the sun are strongest between 10 am and 4 pm. Since those are good hours for outdoor play, be sure to use skin protection and provide shade where children play during those hours.

The National Council on Skin Cancer Prevention recommends Slip! Slop! Slap! Wrap! every day.

- Slip on a shirt
- Slop on sunscreen of SPF 15 or higher
- Slap on a wide-brimmed hat.
- Wrap on sunglasses.

For more information:

American Academy of Pediatrics website for families: www.healthychildren.org

American Academy of Dermatology: http://www.aad.org.

https://www.aad.org/public/spot-skin-cancer/learn-about-skin-cancer/prevent/how-to-select-a-sunscreen

https://www.aad.org/public/spot-skin-cancer/learn-about-skin-cancer/prevent/sunscreen-labels/how-to-decode-sunscreen-lingo

Food and Drug Administration - new label sample: http://www.fda.gov/downloads/ForConsumers/ ConsumerUpdates/UCM258718.pdf

Caring for Our Children, 3rd edition for additional information about protecting against sun damage and insect bites: CFOC3:3.4.5 Sun Safety and Insect Repellenthttp://cfoc.nrckids.org/StandardView/3.4.5.1

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To Our Families: Safe Shoes = Safer Children

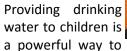
As you know, children

at our center engage in active outdoor play on a daily basis. To help them run, climb, jump and otherwise explore safely, we require safe, sturdy shoes or sneakers.

If you choose alternative footwear for your children to wear for arrival in the morning, please provide a pair of sneakers or other safe shoes. Safe shoes have closed toes and heels, and attach firmly to the child's feet for safe large muscle play indoors and outdoors.

THANK YOU!

Drinking Water Power





promote healthy weight. Recent research done in New York City found that children consume less flavored sweetened milks when water is accessible to them where they eat. They are more likely to have a healthy weight than children in facilities that lack easy access to drinking water.

Water fountains may cause problems. Many have mechanisms that are hard for young children to use. Difficulty providing water fountain maintenance throughout the day results in poor water quality, bad taste, and lack of sanitation.

Make sanitary drinking water easily accessible where children are in care.

The research was reported in the March 2016 issue of *JAMA Pediatrics*. The image is from HealthCare.Utah.edu.

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CACFP New Nutrition Standards – Make Them Work For You

The USDA Food and Nutrition Service has updated the nutrition standards for the Child and Adult Care Food Program. Under the new standards, meals and snacks will include a greater variety of vegetables and fruit, more whole grains, less added sugar and less saturated fat. The standards encourage breastfeeding. In addition, they align better with the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) and with other Child Nutrition Programs.

CACFP centers and child care homes must comply with the new meal standards by October 1, 2017. The new standards are easy to meet and don't cost more. Use the free resources on the USDA webpages. They include fun and easy ways centers and family child care homes can meet the new standards. Many are available in English and Spanish.

- Look at <u>nutrition and wellness tips</u>, <u>feeding</u> <u>infants</u>, and <u>sourcing of locally produced</u> foods.
- Be sure to visit Let's Move! Child Care for more tips and ideas to support healthy eating in your program. These include <u>nur-</u> <u>turing healthy eaters</u>, <u>providing healthy bev-</u> <u>erages</u>, and <u>supporting breastfeeding</u>.
- Download easy menus and recipes for meals and snacks. Look for the <u>Healthy Meals Re-</u> sources System of Team Nutrition/USDA.
- Look at the USDA lists of seasonal produce for summer, fall, winter and spring. Plan to try items you have not tried before. Buying them in season is good nutrition. It's likely to be easy on budgets too. Lists of seasonal produce are at https://snaped.fns.usda.gov/nutrition-through-seasons/seasonal-produce.
- Print out the free book to read to young children, The Two Bite Club. The back of the book has a blank MyPlate certificate for members of the Two Bite Club, fun activity pages for children, and Tips for Growing Healthy Eaters. Share these materials and suggestions with families so they can offer healthy meals at home. The link to the Two Bite Club is http://www.fns.usda.gov/sites/default/files/TwoBiteClub.pdf.



Parties: How to Have Healthy Celebrations

Be a cheerleader for healthy habits. It's never too early for adults to set an example. Children follow what the adults around them do— in everyday routines and at parties. Make healthy habits part of your celebrations. Food and beverages may be part of an event, but they do not have to be the center of the occasion. Focus on activities to get everyone moving and enjoying being together.

Party menu options: Add a slice of fruit to water as the party beverage. Offer whole-grain crackers and veggies with a tray of small cups of yogurt dip. Make fruit kabobs, with eye-catching fruits of different colors. Layer yogurt and fruit to create a sweet parfait in clear cups.

Make moving part of every event. Being physically active makes everyone feel good. Plan for dancing, hopping, skipping, jumping, playing tag or relay races, tossing balls or bean bags in big boxes, pretending to be an active animal and playing other active games. Wiggling, and giggling are fun at any gathering. A field trip to the zoo, a museum or a park can make a celebration special.

Bring healthy snacks. Make the activities and experiences on the field trip the focus of the celebration.

Ask for parent volunteers to help with set-up, leading games and cleaning up. Be sure they get a chance to participate, see, remember and, hopefully, provide healthy celebrations. Take and display photos at these parties. Planning and remembering good parties doubles the fun for staff, children and parents.

Text adapted from www.ChooseMYPlate.gov

Image source: http://www.mycutegraphics.com/

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Food Safety: Clean-Separate-Cook-Chill

(For details, go to http://www.fightbac.org/food-safety-basics/the-core-four-practices/cook/127-cook-heat-it-up-chart/)

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Clean Hands and Surfaces

- Wash hands with warm water and soap for at least 20 seconds
 - ♦ before and after handling food, after using the bathroom, or changing diapers or soiled clothing with feces or urine on them.
 - ♦ after playing with pets or touching any surface at petting zoos.
- Wash cutting boards, dishes, utensils, and counter tops with hot soapy water after each food item.
- Use paper towels to clean up surfaces before and after surfaces are involved with food activities.
- · Rinse fresh fruits and vegetables under running tap water before cutting into them.
- Rub firm-skinned fruits and vegetables under running tap water with a vegetable brush.
- Keep tables or counters where food is prepared or served free of objects not involved with food.

Separate: Don't Cross Contaminate

When handling raw meat, poultry, seafood, and eggs, keep these foods and their juices away from all other foods, especially ready-to-eat foods. Keep them separate from other foods when shopping, when packing grocery bags, when storing them in the refrigerator and when using surfaces to prepare them.

Cook: Cook to Proper Temperatures

Use a food thermometer to check the internal temperature of food that's being cooked. Follow the <u>cook-heat it up chart</u> on the http://www.fightbac.org website for safe temperature for each type of food.

Chill: Refrigerate Promptly

Refrigerate foods quickly because cold temperatures slow the growth of harmful bacteria. Do not over -stuff the refrigerator. Cold air must circulate to help keep food safe. Keeping a constant refrigerator temperature of 40°F or below is one of the most effective ways to reduce the risk of foodborne illness. Use an appliance thermometer to be sure the temperature is consistently 40°F or below. The freezer temperature should be 0°F or below. Use a clean food thermometer to check foods that should be kept cold when they arrive at the facility to see if they are at a safe temperature. Refrigerate or freeze meat, poultry, eggs, and other perishables as soon as you get them. Divide large amounts of leftovers into shallow containers for quicker cooling in the refrigerator.

Keep Cold Lunches Cold

Ask families to prepare cooked food, such as turkey, ham, chicken, and vegetable or pasta salads ahead of time and thoroughly chill them in the refrigerator. They should keep prepared foods in the refrigerator until time to leave home. To keep lunches cold while traveling from home, include a small frozen gel pack. Store perishable items in a refrigerator upon arrival. Insulated, soft-sided lunch boxes or bags are best for keeping food cold. Do not put the containers used to transport food on eating surfaces. Take the food out of the container and put the container elsewhere. Some food is safe without a cold source. Items that don't require refrigeration include whole fruits and vegetables, hard cheese, unopened canned meat and fish, breads, crackers, peanut butter, jelly, mustard, and pickles.

Keep Hot Lunches Hot

Keep the food at 140°F or above in an insulated container or in a pot.

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First Aid and Infant/Child CPR - 2016 Updates from the American Academy of Pediatrics

Changes from previous recommendations:

• Care of a knocked out permanent tooth: Handle the tooth by the top and not by the root. If dirty,

rinse gently in cold running water or milk without scrubbing or touching the root. Put the tooth in coconut milk or egg white. If coconut milk or egg white are not available, use milk or salt water (1 teaspoon of table salt to 8 ounces of water. Take the tooth, including any broken pieces, with the child for emergency care. Stop bleeding by having the child bite down on gauze or a cotton ball.



CPR for an unconscious/unresponsive infant who is less than 1 year of age: compress the chest at least 100 times per minute. For a child
 1-8 years old compress the chest 100 – 120 times per minute. CPR for in

1-8 years old compress the chest 100 – 120 times per minute. CPR for infants or any age child starts with 30 chest compression, followed by opening the airway and giving 2 rescue breaths, each for 1 second, making the chest rise. Then give another 30 compressions, alternating with 2 rescue breaths. Be sure someone is calling 911. After 5 cycles of compressions and breaths (about 2 minutes), if no one has called 911, call 911 yourself.

Reminders:

- Wash <u>skin wounds</u> with <u>water only, no soap</u>. The exception is that when washing <u>animal or human bites</u>, wash well <u>with soap and water</u>. Call a pediatrician. The child may need a tetanus or rabies shot or antibiotics.
- Use direct pressure with a clean cloth for 1-2 minutes (no peeking) to stop bleeding. If the cut is not deep, apply an antibiotic ointment and cover the cut with a clean bandage. If bleeding doesn't stop, continue to apply pressure with a clean cloth until a health professional takes over.

Order the 2016 combined Choking/CPR First Aid 11 x 17 inch charts from www.aap.org/bookstore. Put "first aid" in the search box. ECELS has purchased a limited number of these charts. While supplies last, ECELS will give a chart to early education/child care staff who satisfactorily complete an ECELS self-learning module on any of the topics listed on the ECELS website at www.ecels-healthychildcarepa.org.

Stop contian Grumps

Mood Communication Tool

The Grump Meter consists of a colored ladder of five steps that children and adults can use to communicate about their emotions. Blue is calm. Green is grumpy. Yellow is caution. Orange is stop. Orange is the last point of self-control before moving to Red. Red is explode.

In settings where people use the Grump Meter, you might hear adults and children ask others: "What color are you on?" Users of the Grump Meter become self-aware and able to express their own feelings. They also become aware of the feelings of others. The Grump Meter gives young children, teens, and adults a tool for emotional awareness and constructive responses.

Using it may reduce challenging behaviors, physical outbursts, teasing and bullying.

Early education settings are among the many potential users. Children and adults learn to consider the move from one color to the next on the Grump Meter. It helps them to reflect, think about, and choose ways to avoid landing on Red. They become aware of their "outside triggers" and corresponding inside feelings. They may recognize body cues that alert them to think about feelings.

Learn how to make and use a Grump Meter. Go to www.GrumpMeter.com. That website also offers a video and suggestions for activities to learn how to regulate feelings.

Article contributed by Lynn Kaufman, Licensed Social Worker

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Diarrhea: Experience in Child Care is Protective

A recent study of the frequency of diarrheal illness among Dutch children confirmed findings from previous studies done in the US. This new study invited participation of all the children in Utrecht, the Netherlands from birth through 6 years of age. The researchers used the children's medical records to identify the episodes of illness.

They found that children in their first year of child care have more episodes of diarrhea than children who are not enrolled in child care. However, the total number of diarrhea illnesses for children for the whole period from infancy through 6 years of age was the same for children enrolled in child care as for children who were not enrolled.

The records showed that diarrheal illnesses in the Netherlands occurred seasonally as in the US. Building immunity in the first year of group care protects against diarrhea in subsequent years. This protection against subsequent episodes of diarrhea lasted at least until the children reached 6 years of age.

The researchers noted that 1344 of 2220 children (83%) who were enrolled in the study were in child care before they were 1 year of age. This is a higher percentage of infants in child care than in the United States.

From an article in the May 2016 issue of Pediatrics

Image from Creative Commons

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ChooseMyPlate Tip Sheets in 20 Languages

The first in the Ten Tips Nutrition Education Series is *Choose MyPlate: 10 Tips to a Great Plate. This tip sheet* is available in 20 languages. These 20 languages are: English, Arabic, Chinese (simplified and traditional), Filipino-Tagalog, French, German, Hindi, Indonesian, Italian, Japanese, Korean, Malay, Pashto, Portuguese, Russian, Spanish, Thai, Urdu, and Vietnamese.

The ChooseMyPlate icon is available in these 20 languages too. Use this link to access them.

http://www.choosemyplate.gov/audience#sthash.igOHIdDT.dpuf.

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