Each year, an average of 20,000 children younger than 5 years develops complications from the influenza (flu) virus and requires hospital care. If these complications are serious enough, the flu can even be deadly for these children. The hospitalizations alone that are caused by flu are greater than for any of the other vaccine-preventable diseases. According to the Centers for Disease Control and Prevention (CDC), the single best way to protect against the seasonal flu and its complications is to get the vaccine each year. The vaccine is recommended for all children aged 6 months and older.

The CDC also recommends a three-step approach to avoid coming down with the flu. Step one is to get vaccinated. Step two includes seeking prompt medical attention so that the recovery time is as short as possible. Step three provides everyday actions that you can take to reduce your chances of being exposed to the flu virus:

- Avoid close contact with sick people; if you are sick limit your contact with others.
- Stay home if you are sick or keep your children home if they are sick—24 hours fever free, without taking anti-fever medications.
- Cover your nose and mouth when you cough or sneeze (preferably direct your sneeze or cough into the crook of your elbow).
- Wash your hands frequently with soap and water, or use alcohol based hand sanitizer until a soap and water hand wash is available.

You can download a fact sheet with this information from the CDC at https://www.cdc.gov/flu/pdf/freeresources/updated/everyday_preventive.pdf.

Taking this approach to preparing for the cold and flu season is consistent with best practices cited in the 3rd Edition of the National Health and safety Performance Standards, Guidelines for early Care and education Programs, “Caring for Our Children.” Standard 1.3.2.3: Orientation Topics includes assuring that child care providers and their staff receive orientation to recognizing symptoms of illness,

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and procedures for exclusion/readmission, parent/public health officials’ notification, and cleaning/disinfecting/sanitizing procedures for preventing transmission of illness within the child care environment. This standard cites hand hygiene as one of the most important measures to control the spread of infectious disease. Standard 7.3.3.3 specifically provides guidance on Influenza (Flu) education and prevention. This standard encourages training for all staff and children to underscore the importance of getting flu vaccinations, practicing cough etiquette, and following respiratory and hand hygiene practices to reduce exposure of other children and staff. Providers should also stock necessary supplies (disposable tissues, hand sanitizer) to adequately support these practices.

The CDC is a wealth of information about the seasonal flu. Tips for caregivers of children less than 6 months old (who can’t receive the vaccine) can be downloaded at http://www.cdc.gov/flu/protect/infantcare.htm. Flu information for parents can be downloaded at http://www.cdc.gov/flu/parents/index.htm. If your child care facility is located in a county served by a local public health agency with a Child Care Health Consultant, training on seasonal flu may be available for clock hours, as well as consultation about the flu, and health promotions for children about good handwashing/cough etiquette. Contact your local public health agency to find out about flu resources.

By following these best practices and recommendations, you can do your part to protect those you care for, yourself, and your family and friends from the harsh effects of the flu this season.

One factor is at the core of every high-quality environment for young children. Whether in a child care center, a family child care, a Head Start, or other preschool, every child’s experience is improved by this one crucial factor: intention. When you interact with a young child from the intention to support his unique social, emotional, intellectual, and physical development, you are delivering the very essence of quality early care and education.

This truth holds, also, for your support of yourself. Are you intentional about how you respond to your own development needs? Are you intentional about the ways in which you grow yourself in your role?

Too often, staff at Child Care Aware® of Missouri hear caregivers from early learning environments talk about choosing their clock hour training based on factors like near access, a convenient date or time, or price (with free taking top priority!). We hear that some of you enroll in the same clock hour workshop topic over and over, sometimes even within the same year.

Clearly, there is intention in these kinds of choices, but not the intention to grow as a caregiver, educator, and builder of young brains. The state’s clock-hour requirements for licensed facilities become just a rule to follow, a legal demand to be met: resisted and resented; completed with a “check the box” mentality. There. 12 hours. Done.

What this check-it-off approach misses is the intention to develop you. It is missing the intention to grow and strengthen your intentional support of children.

So what does intentional training look like? Well, it’s not just 12 clock hours per year of training. When you intentionally and systematically grow your skills and knowledge for the purpose of being better at your role, we call it professional development, or PD.

PD begins with an honest assessment of your current skills and knowledge – both strengths and areas for improvement. Maybe the assessment comes from a supervisor or mentor, a coach, CDA advisor, or accreditation validator. In the absence of these options, maybe you use a self-assessment.

Or maybe one day you simply realize that having a Circle Time in which children are inattentive and disruptive doesn’t mean you have bad kids, but that you could do Circle Time differently, better…. Maybe you see someone else do Circle Time in a way that supports children’s development so well that they are completely engaged and joyful in the activity. So you don’t take that free, nearby class on managing head lice yet again, but you sign up for a session called “Engaging Circle Times.” You drive a little farther, you pay a little fee, because you’re intentionally choosing to be better for kids.

The idea of having a “Professional Development Plan” might sound a little scary and daunting. But all it really requires is three steps: 1) discover what it is that you need to learn, 2) pursue that learning with intention, and 3) then interact with children from the intention to apply your new skills and knowledge.

There. Planned PD. Developed professional. Done!
St. Martin’s Child Center
Berkley

St. Martin’s Child Center in Berkeley, MO was recognized as an Intermediate Missouri Eat Smart Child Care in August 2016. St. Martin’s Child Center is the 149th child care facility in Missouri to be recognized as Missouri Eat Smart. On August 12, 2016, Lisa Schlientz, Nutrition Consultant, Missouri Department of Health and Senior Services Bureau of Community Food and Nutrition Assistance recognized Ms. Littlejohn, Mrs. Nabors and St. Martin’s Child Center for achieving the intermediate level of the Missouri Eat Smart Guidelines. The staff at St. Martin’s worked hard to fill their menu with healthier foods and to make meal times enjoyable for the children!

Kindertree Enrichment Center
Perryville

Kindertree Enrichment Center in Perryville, MO was recognized as an Intermediate Missouri Eat Smart Child Care in September 2016. Kindertree Enrichment Center is the 150th child care facility in Missouri to be recognized as Missouri Eat Smart. On September 19th, 2016, Lisa Schlientz, Nutrition Consultant, Missouri Department of Health and Senior Services Bureau of Community Food and Nutrition Assistance recognized Danielle Lands, April Amberger and Kindertree Enrichment Center for achieving the intermediate level of the Missouri Eat Smart Guidelines. Kindertree is also a Missouri MOve Smart center and a Breastfeeding Friendly Child Care! Thank you for your dedication to Missouri children!
Why should I join the MOPD Registry?

1. **I benefit:**
   Each individual is ultimately responsible for their professional growth and development. By joining the MOPD Registry, an individual is able to utilize the various tools in the Toolbox, such as professional self-assessment and professional development planning.

2. **My program benefits:**
   Administrators have access to program level information that allows them to keep track of important staff information for monitoring and quality assurance.

3. **My profession benefits:**
   Policymakers use data as a way of determining what is best for Missouri’s children and the workforce. When data is rich and plentiful, a greater impact can be made using the data that is collected through the MOPD Registry.

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**Immunization News**

By Lynelle Paro, Bureau of Immunizations, Missouri Department of Health and Senior Services

The annual Child Care/Preschool Immunization Status Report was mailed in November. Please complete it and return it to Bureau of Immunizations by January 15. This is a requirement, as outlined in the Day Care Immunization Rule, 10 CSR 20-28.040. Below are some frequently asked questions about the status report, and how to complete the form.

Q. Who can I contact for assistance if I have questions when completing my day care report?
   A. The Immunization Quality Improvement Manager in your area is available for assistance. You may also contact the Child Care Health Consultant at your local public health agency to assist you with both the preparation of the report and with developing a system for keeping immunization records up to date.

Q. I operate an unlicensed church-owned day care center. Is it necessary for me to complete the immunization status report?
   A. Yes, statute states “As mandated by section 210.003, RSMo, the administrator of each public, private or parochial day care center, preschool or nursery school caring for ten (10) or more children shall have a record prepared showing the immunization status of every child enrolled in or attending a facility under the administrator’s jurisdiction.”

Q. Do children that are related to me count toward the 10 or more children?
   A. Yes, the Day Care Rule (for immunizations) does not differentiate between those children that are or are not related to the day care operator. All children are counted toward the total number of children enrolled.

Q. Do I have to count my “before and after” school children?
   A. No, school children fall under the School Statute and are reported by the school they attend.

Q. What is the best way to ensure that I have all necessary information from parents when they have their children immunized?
   A. Develop a system to periodically review the immunization records of children attending your facility and if the child is due for a shot, send a note to the parents. Request a copy of the updated immunization record from parent or physician when the immunizations are given.

Q. I have lost or misplaced my Child Care Immunization Status Report?
   A. Yes, if you are licensed for 10 or more children this report must be returned even if you are currently caring for less than 10 children. If the Department does not receive your report, you will be considered non-compliant. However, if you have less than 10 children enrolled, you will only need to check the area that indicates you have less than 10 children and not complete the whole report.

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Child Care and the Americans with Disabilities Act
Submitted by Lisa Eberle-Mayse, United 4 Children

It may be hard to believe, but there was a time in the not-so-distant past, that children with disabilities had virtually no rights. They were not entitled to an education or care outside their home, and families were often forced to institutionalize their children, or care for them at home as best they could. Thanks to the efforts of many bold, brave parents and others, this has changed dramatically in the past 30 years—children with disabilities are now required to receive a free, appropriate public education along with their typical peers, and they also have access to public accommodations just like any other citizen because of the ADA, enacted in July of 1990.

One of those “public accommodations” is child care. This means that child care providers may not automatically decline to enroll a child with a disability or special need. The law requires that we consider each child’s case individually—without making assumptions about a particular disability. Most of us probably don’t have much experience with disabilities, so how do we go about including these children?

• Start with the child and his/her family
  o What are the child’s strengths? What CAN the child do? What does s/he LIKE to do?
  o What challenges does the child have? How does the family address these challenges? What would that look like in your program?
  o Are there other professionals (therapists, etc.) working with the child? Will you have access to these professionals?
• Make “reasonable accommodations”
  o There are many minor changes you can make to your environment to make sure it is accessible-moving shelves or other pieces of furniture for example.
  o A child with a visual or hearing impairment might need preferential seating or assistance with moving from one area to another.
  o Children with autism or sensory problems may need a “quiet place” in the room to be able to get away to calm down
  o A program may need to get a licensing variance to be able to change the diaper of an older child with disabilities who is not potty-trained.
• Ask for help!
  o DHSS provides a network of Inclusion Specialists throughout the state that is prepared to answer your questions about including children with special needs, and can offer on-site observation, consultation and training to support you. Click here to here to go to a map with the Inclusion Specialist for your area.
  o The federal government has an ADA website (www.ada.gov) with lots of helpful information. For an overview of information visit https://www.ada.gov/chcinfo.pdf. For more detailed answers to some commonly asked questions about child care and the ADA visit https://www.ada.gov/childqanda.htm.
• Embrace the Journey!
Change is not always easy, but if we approach new endeavors with an open mind and heart, and with a focus on the child at the center, we truly can move from a place of “I have to” to “I CAN!”
Keeping Active in Winter

By Karla Voss, Bureau of Community Health and Wellness, Missouri Department of Health and Senior Services

Missouri can get some cold days and brisk winds. It is tough to keep kids indoors when they need to get that energy out and run or scream. Kids need to move and they behave better when they get enough exercise. Sometimes it is hard to do moderate to vigorous activity indoors with kids in the winter. Here are some good ways to keep those kids busy and tire them out.

- Have a “snowball” fight with cotton balls or white socks rolled in a ball.
- Play a game of “freeze” dance and then yell “melt” to keep dancing.
- Build an obstacle course. Practice descriptors such as “over, under or through”
- Act out a story.
- Practice skills by hanging a ball by a pair of pantyhose. Kids can kick, hit or catch the ball.
- Play games that incorporate music, imitation and simple directions such as animal movements, follow the leader or dancing with scarves.
- Offer ramps, steps, low climbers and obstacle courses to build skills, strength, coordination, and confidence.
- Develop movement stations so children can practice developing skills: throwing, balancing, changing direction, jumping, hopping, skipping, galloping, etc.
- Provide activities to encourage balance: standing on one foot or walking a balance beam line on the floor, or on different textured or uneven surfaces.
- Provide opportunities to jump and hop using mats, pillows or lines on the floor.
- Encourage children to work together to create their own games.
- Help children recognize their own faster heart rate and deeper breathing when they are physically active.

Remember, just because it’s cold outside doesn’t mean you can’t go out. Bundle them up and stay out for shorter periods than normal when the weather allows.


The Missouri MOve Smart Child Care program recognizes child cares who meet certain physical activity guidelines. Find out more at http://health.mo.gov/movesmart.
Toys and games are a lot of fun for kids; they are an important part of children’s learning in child care. It is important to keep in mind that safety should always come first, whether children are working on puzzles, playing with building blocks or even creating their own games. In 2011, 188,400 children under the age of 15 were seen in emergency departments for toy-related injuries. That’s 516 kids every day. More than a third of those injured were children 5 and under. Below are tips and suggestions that can help children stay safe while in child care.

Select Toys with Care

• Choose carefully. Look for good design and high-quality construction in the toys.
• Watch out for toys that have sharp edges, small parts, or sharp points.
• Include toys that suit the children’s age, interest, and abilities. Avoid toys that are too complex for young children. Many toys have a suggested age range to help you choose toys that are both appealing and safe.
• Read the labels. Look for safety information such as "Not recommended for children under 3 years of age," or "non-toxic" on toys likely to end up in little mouths, or "washable/hygienic materials" on stuffed toys and dolls.

Teach Proper Use of Toys

• Check the instructions and explain to each child how to use the toy.
• Always try to supervise children while they play.
• Check toys periodically for broken parts and potential hazards. A broken toy should be repaired immediately or thrown away. Check outdoor toys for rust and weak or sharp parts that could become hazardous.
• Teach children to put their toys away so they do not get broken or create a tripping hazard.
• Use toy shelves for storage. Open shelves allow the children to see favorite toys and return them to the shelf after play. Be sure the shelf is sturdy and won’t tip over if a child climbs on it.

Use Extra Care with Toys for Infants and Toddlers

• Choose toys for very young children with extra care. Playthings that are safe for older children can be hazardous to little ones. Keep in mind that toddlers trip and fall easily, and that, with infants, everything goes into the mouth.
• When choosing a toy for a toddler or infant, make sure it:
  o Is too large to be swallowed.
  o Does not have detachable pieces that can lodge in the windpipe, ears, or nostrils.
  o Will not break easily, leaving jagged edges.
  o Has no sharp edges or points.
  o Has not been put together with easily exposed pins, wires, staples, or nails.
  o Is labeled "non-toxic."
  o Can’t pinch fingers or catch hair.

Safe Kids is dedicated to providing a comprehensive list of monthly child-related recalls collected from the major federal agencies: the Consumer Product Safety Commission, the Food and Drug Administration and the National Highway Traffic Safety Administration. Safe Kids also brings you any news and consumer concerns about children’s products. Remember that safety recalls don’t expire, so check Safe Kids product recalls pages regularly, especially if you receive hand-me-downs or buy children’s products at a secondhand shop or yard sale. Sign up to receive recalls by e-mail at http://www.safekids.org/product-recalls.
Make **Health the Easy Choice**

Lisa Schlientz, MPH, Bureau of Community Food and Nutrition Assistance

Every year, we watch as the clock advances towards midnight and the ball drops, signifying a new year and a fresh start. Many of us make plans to do better and be healthier in the form of a New Year’s Resolution, but we often end up breaking them before February is past. Why? There are a number of reasons, but the simplest is that we live in environments where being healthy is not the easiest choice. It’s easier to use convenience foods than to cook from scratch, easier to drive than to walk, easier to watch TV than to be active. The great news is that, as child care providers, you have the unique ability to make health the easiest choice during your workday, for you and the children in your care! You can change what foods are offered in your center, how they are prepared, how much time is spent in physical activity, and even your physical environment. Look through these tips for opportunities to make health the easy choice in your facility!

- **Healthy Staff Challenges**—a little competition can motivate us all to do better! Plan staff challenges that appeal to your crew, such as drinking more water, eating more fruits and vegetables, or participating in more activities with the children. Get the children involved by having them vote for their favorite activities or count the number of glasses of water consumed by their teacher during the day.

- **Healthy Student Challenges**—plan challenges for the children, too! They can participate in dance-off competitions, as individuals or as rooms, or compete to see who will taste the most new foods over a month. Hand out awards for the craziest dance moves or the room that dances the longest!

- **Consider family style meals**—when children serve themselves, they are more likely to try new foods and less likely to waste food. Having teachers sit with children and eat the same foods provides great role modeling for healthy nutrition. In fact, teachers at Missouri Eat Smart centers have reported that they eat more fruits and vegetables than ever before, because they are eating the same foods as the children! When children eat family style meals while socializing with each other and their caregivers, they are more focused on eating and more likely to stop when they are full. Keep televisions turned off during meal times to help children focus!

- **Try new foods**—if you aren’t sure that your students will like a new fruit or vegetable, consider having them taste it as part of your nutrition curriculum. Offer each child a tiny portion of new foods, and then ask them to rate how well they like it. Involve children in the menu planning process by letting them pick one meal per month (from 3-5 preapproved options) or vote on new menu choices. The more involved children are, the more likely they are to eat the foods you offer!

- **Rethink your environment**—make health the easy choice by removing TVs, clearing space for large motor play, and having plenty of play equipment. Check out sites like Pinterest for inexpensive play ideas. Enjoy upbeat music during the day, and participate with children in games on the playground. Use tape or paint on hard surfaces to create stepping stones, straight lines to practice balance, or a hopscotch game. Try these fun Pirate ship games, indoors or out: [http://www.playworks.org/blog/game-week-shipwreck](http://www.playworks.org/blog/game-week-shipwreck). There are many versions online, or make up your own commands!

- **Work with parents**—explain to parents that you are working hard to make health the easy choice for their children. Ask them to bring non-food items for holidays and birthdays, and plan fun, active games as part of your holiday celebrations. Check out the resources at [www.health.mo.gov/eatsmart](http://www.health.mo.gov/eatsmart) for ideas on making holidays healthy.

Have a wonderful, healthy new year!
Unsafe Products, and How to Obtain Recall Information

The U.S. Consumer Product Safety Commission (CPSC) is an independent federal regulatory agency that works to reduce the risk of injuries and deaths from consumer products. The CPSC issues approximately 300 product recalls each year, including many products found in child care settings. Many consumers do not know about the recalls and continue to use potentially unsafe products. As a result, used products may be lent or given to a charity, relatives or neighbors or sold at garage sales or secondhand stores. You can help by not accepting, buying, lending or selling recalled products. You can contact the CPSC to find out whether products have been recalled and, if so, what you should do with them. If you have products that you wish to donate or sell and you have lost the original packaging, contact the CPSC for product information. It is the responsibility of child care providers to ensure that recalled products are not in use in their facilities.

The CPSC’s toll-free hotline is available at 800.638.2772. The hearing impaired can call 800.638.8270. Information also is available on the CPSC website at: www.cpsc.gov.

This quarter we are highlighting a product that has recently been recalled and is commonly found in child care facilities.

RH Baby & Child Recalls Mobiles Due to Choking Hazard

Recall Summary

Name of product: Mobiles
Hazard: The wheels on the mobile’s hanging cars can detach and fall, posing a choking hazard to young children.
Remedy: Refund
Consumer Contact: RH toll-free at 888-728-8419 from 8 a.m. to 5 p.m. PT Monday through Friday or online at www.RH.com and click on Safety at the bottom of the page for more information.

Boosted Recalls Electric Skateboards

Recall Summary

Name of product: Electric-powered skateboards
Hazard: The lithium ion battery pack can overheat and smoke, posing a fire hazard.
Remedy: Replace
Consumer Contact: Boosted toll-free at 844-395-0070 from 9 a.m. to 5 p.m. PT Monday through Friday or online at https://boostedboards.com and click on Battery Pack Recall for more information.

Recalls continued on page 9
Aria Child Recalls Strollers Due to Laceration and Fall Hazards

Recall Summary

Name of product: Qbit strollers

Hazard: A gap in the stroller’s folding side hinge can pinch a caregiver’s hand during unfolding, posing a laceration hazard. In addition, the stroller can fold unexpectedly during use, posing an injury and fall hazard to the caregiver and child.

Remedy: Replace

Consumer Contact: Aria Child toll-free at 888-591-5540 from 8 a.m. to 5 p.m. ET Monday through Friday or online at www.ariachild.com and click on “Qbit Lightweight Stroller Voluntary Recall Information” for more information.

Cuisinart Food Processors Recalled by Conair Due to Laceration Hazard

Recall Summary

Name of product: Cuisinart® food processors

Hazard: The food processor’s riveted blade can crack over time and small metal pieces of the blade can break off into the processed food. This poses a laceration hazard to consumers.

Remedy: Replace

Consumer Contact: Cuisinart toll-free at 877-339-2534 from 7 a.m. to 11 p.m. ET Monday through Friday and from 9 a.m. to 5 p.m. ET Saturday and Sunday or online at www.cuisinart.com and click on Product Recalls at the bottom of the page for more information on the voluntary recall.
In 2012 the Section for Child Care Regulation adopted the practice of rotating caseloads every five years. 2017 marks the next rotation in this cycle. When this occurs you will receive notification of who your new Child Care Facility Specialist will be. The National Association for Regulatory Administration (NARA) recommends this practice to ensure “fresh eyes” and to provide you with access to the knowledge and skills of a wide array of SCCR staff.

SCCR believes in developing a partnership with child care providers so that we can provide the children of Missouri with the highest level of care. As you begin working with a new Child Care Facility Specialist you can expect the same kind of inspection, the same level of technical assistance and the same level of rule enforcement that you currently receive. It is possible that you have not had the same specialist for five years, but in order to keep all facilities on the same schedule all facilities will participate in the transfer.

The expectation of SCCR for all child care providers is for all rules to be followed at all times. You can view the rules at any time at http://health.mo.gov/safety/childcare/lawsregs.php. Reviewing the rules that apply to your type of facility on a regular basis will help ensure a safe and healthy environment for the children in your care.

Alternate forms of this publication for persons with disabilities may be obtained by contacting the Missouri Department of Health and Senior Services, Section for Child Care Regulation, P.O. Box 570, Jefferson City, MO, 65102, 573.751.2450. Hearing- and speech-impaired citizens can dial 711. EEO/AAP services provided on a nondiscriminatory basis.

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