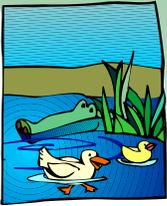




Healthy Kids West Virginia

West Virginia Child Care Nurse Health Consultants Newsletter

Volume 3, Issue 1



New AAP Sleep Recommendations By: Glenna Bailey, RN

Since the American Academy of Pediatrics began the Back To Sleep Campaign in 1992, deaths from Sudden Infant Death Syndrome have decreased dramatically. In the years since researchers have learned much more about keeping babies safe while sleeping. One aspect of this is a new emphasis on providing a safe sleeping environment.

In October 2011, the AAP issued an updated policy statement and safe sleep recommendations. This updated statement includes the following recommendations:

- Always place your baby on his or her back for every sleep time.
- Always use a firm sleep



surface. Car seats and other sitting devices are not recommended for routine sleep.

- The baby should sleep in the same room as the parents, but not in the same bed (room-sharing without bed-sharing).
- Keep soft objects or loose bedding out of the crib. This includes pillows, blankets, and bumper pads.
- Wedges and positioners should not be used.
- Pregnant women should receive regular prenatal care.
- No smoking during pregnancy or after birth.
- Breastfeeding is recommended.
- Offer a pacifier at nap-time and bedtime.

- Avoid covering the infant's head and over heating.
- Do not use home monitors or commercial devices marketed to reduce the risk of SIDS.
- Infants should receive all recommended vaccinations.
- Supervised, awake tummy time is recommended daily to facilitate development and minimize the occurrence of positional plagiocephaly (flat head),

Since the use of blankets is no longer recommended alternate sleepwear should be used. These would include sleep sacks and one piece sleepers. In using sleep sacks or one piece sleepers it's important to make sure they fit well. Anything that is too loose could cover the baby's head during sleep.



Sleep Sack



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Any topics you would like to see or ideas you would like to share in the Healthy Kids West Virginia newsletter? Let us know by emailing or calling Sarah or Glenna. Our contact information can be found on the back page.

Any topics that you feel would make a great training? Feel free to let us know. We are always looking for new ideas! Feel free to make copies of this newsletter to distribute to

other child care providers and parents.

Check out our website ~



www.wvearlychildhood.org



Broken Bones and Cast Care By: Sarah Hicks, RN

I am a professional in dealing with broken bones! My accident prone daughter Katie has already broken her ulna and femur in her 6 years on this planet. I understand that dealing with a child in a cast can be very trying and intimidating. "Is the child in pain?" "Can he/she play outside?" "What if the cast get's dirty?" "How long does this thing have to be on?" Many questions come to mind when you find that are going to be caring for a child in a cast.

The child has been placed in a cast because of an injury or possibly a surgery to help in healing of a bone or muscle. The length of time the cast will be in place depends on the type of injury/fracture, the location of the injury, and the age of the child. For example, my Katie was 3 when she fell at the playground and broke her leg. She was in a Hip Spica cast (cast from the chest to

the ankle) for only 3 weeks. When she was 5, she fell at gymnastics and broke her arm. She was casted for 5-6 weeks this time. Both were simple, small fractures. Cast times will vary. If there are complications in healing, the cast may need to remain in place longer than anticipated.

The child may be prescribed a mild pain reliever for the first days after the fracture, generally Tylenol or Motrin does the trick. Remember your rules from Medication Administration training! The child may also complain of itching within the cast. Using a blow dryer on the cool/cold setting can help.

Most casts will need to stay dry. Sponge baths are often given instead of tub baths or showers. If the child will be going into the rain, even if it is from the car to the door, make sure it is covered. It might

also be a good idea to cover the cast during eating and drinking, to keep it from getting wet or soiled. If the cast gets wet, notify the parents immediately, and dry the cast with a blow dryer on cool/cold setting. If the cast gets a little soiled, it can be gently cleaned with a very slightly damp cloth, but remember most casts will get somewhat dirty.

Activity levels with a cast will be based on the child's physician's recommendations. Some will be able to play and participate, while others may be restricted for a time. The affected part will be weaker after the cast comes off, and the child will need to be reassured that it takes time to resume doing things that they were able to do before their injury.



Did You Know.... Benzocaines.... The U.S. Food and Drug Administration recently issued a warning about benzocaine a local anesthetic and the active ingredient in many over-the-counter teething pain gels and liquid medications, like Anbesol and Baby Orajel. Benzocaine has been associated with a rare but serious condition called methemoglobinemia, which reduces the amount of oxygen carried in the bloodstream and can result in death in the most severe cases. The FDA advises parents and caregivers not to use products with benzocaine on kids under 2, except under the advice and supervision of a healthcare professional

Let's Move! Child Care State Challenge

The Let's Move! Child Care initiative was launched by the First Lady and is an effort to promote children's health by encouraging and supporting healthier physical activity and nutrition practices for children in child care. Now Let's Move! Child Care, is issuing a Lets Move! Child Care State Challenge, a nationwide challenge recognizing states with the highest participation rates in LMCC. States will be recognized in two categories:

- Highest percentage of licensed or legally operating child care programs that sign up as *Let's Move! Child Care* participants
- Largest percentage of Let's Move! programs that successfully complete the initiative's checklist quiz and action plans

Winning states will receive national recognition including an award presentation during the 2012 Weight of the Nation conference. Let's get West Virginia recognized for our efforts. Sign up at:

www.HealthyKidsHealthyFuture.org

Ticks! By: Sarah Hicks, RN

Ticks are external parasites that live on the blood of mammals and birds. Deer ticks are common in our part of the country. Deer ticks are often between the size of a poppy seed and an apple seed, and have 8 legs.

It is important to put some things in place to deal with them. Don't avoid going outside, it's essential for development. Just avoid areas that ticks flourish, such as bushy areas of high grass or leaf litter. Instead, stick to the center of walking trails or open groomed yard areas. When going outside, use a child-safe insect repellent to try to keep those ticks away. Upon returning inside, do a visual check of the child's clothing, and exposed skin, (including in and around the ears, behind the knees, nape of the neck and in the hair). If you find a tick biting a child, notify the parents. I would suggest letting the parent deal with tick removal.

Ticks bites are often harmless. They rarely result in infection or disease. The most common disease spread by ticks is Lyme disease, and is caused by the bacteria called *Borrelia burgdorferi*. In most cases, the tick must be attached to the body for 24-36 hours to spread the bacteria to the blood of the host. A sign of Lyme disease is the bull's eye rash see in the picture, along with symptoms similar to the flu. Treatment with antibiotics soon after a bite can prevent complications.



Top : Deer Tick

Bottom : Classic bull's eye shape that may be seen with Lyme disease.

Healthy Recipe & Activity~ Grow your own Pizza Garden ~ Sarah Hicks, RN

Directions



Find a bucket, pot, cups and soil to fill.

Plant a few of your favorite starter plants or seeds— basil, tomato, bell pepper, onion, oregano, etc. in your container.



Find a sunny location to place your bucket/pot so that your plants may grow!

Harvest your ingredients and make a pizza!

Many ingredients in pizza come from the garden. Tomatoes, basil, oregano, sweet bell peppers and onions are just a few of the vegetables that you might find on your slice of pizza. These are vegetables commonly used to make pizza and spaghetti sauce. Other vegetables such as spinach and hot peppers are sometimes added as toppings. It can be fun to grow your own ingredients to make a fresh, homemade pizza. You and your children will enjoy tasting the fresh ingredients that you were able to raise for yourself. You will not believe how good it tastes! Use a whole wheat crust and low-fat cheese for a really healthy meal!

Created by John Porter, WVU extension agent. For the entire activity sheet, please go to <http://kanawha.ext.wvu.edu/r/download/84810>

A special thanks to Megan Hoover, WIC for leading me to this idea!



WEST VIRGINIA EARLY CHILDHOOD
Training
CONNECTIONS
AND RESOURCES

WV Early Childhood Training Connections and Resources (WVECTCR) is a statewide program designed to provide professional development opportunities for the early care and education community. Through an extensive network of information, training and technical assistance, resources, and collaboration, WVECTCR strives to improve the quality of early education services for young children and their families.

Ask the Nurse... Nursemaid's Elbow By: Sarah Hicks, RN

One of the children in our care was diagnosed with Nurse's maid's elbow. What is that? What do we need to do?

Nursemaid's is a common injury seen most often in children between the ages of 1-3 years. Usually the child has had an incident in which the extended arm is pulled. Most commonly occurs when holding hands with the child, the child falls, and the other person doesn't let go pulling the elbow partially out of place. Can also occur by swinging the child by holding the arms or sometimes during a fall onto the extended arm. There is a high chance of recurrence, so it is important to be sure that staff know not to pull on the child's arm or pick the child up by the arm, but instead under the armpits. Source—University of Chicago



CAMP GIZMO By: Alyson Edwards, WVECTCR

WHAT IS CAMP GIZMO?

A five-day, hands-on camp where parents, professionals, and students learn how assistive technology can help young children (birth - 8 years) with significant and multiple developmental needs.

WHEN IS CAMP GIZMO?

July 14-18, 2012 on the campus of the West Virginia Schools for the Deaf and the Blind in Romney, WV.

WHO SHOULD COME AND WHAT DO WE DO?

Families, professionals, college students, and others who want to learn more about assistive technology. A limited number of "focus" children will be accepted and assigned a team of professionals who help families identify and apply new strategies for solving their multiple assistive technology needs. (Preference will be given to children who have not previously attended camp.) Professionals and other caregivers involved with these children are encouraged to attend the camp. Labs and workshops will be available to Camp participants daily. Parents attend workshops on subjects that will help them better meet the needs of their child. Professionals and students attend workshops of interest that meet professional/educational needs or assist the "focus" family. Teams will meet daily to observe, discuss and implement strategies for the "focus" child.

DO CHILDREN ATTEND?

Kids Camp will be held in conjunction with Camp Gizmo. All children attending the camp with focus families or other participants will participate in Kids Camp educational and recreational activities. Kids Camp is safe, fun camp experience for children with or without disabilities.

CAN I RECEIVE CEU CREDIT?

Yes, graduate credit, WV Birth to Three contact hours, and WV STARS.

HOW MUCH DOES IT COST?

Camp Gizmo is an interagency funded learning week. Registration includes meals, sleeping accommodations, and Kids Camp. Participant costs:

Focus Families:	\$50 - child and two parents/\$25 - each additional family member
Other Camp Participants:	\$75 per person/\$25 each additional family member

FOR MORE INFORMATION:

Kathy Knighton or Ginger Huffman, WV Dept of Ed - 1-800-642-8541

Pam Roush, WV Birth to Three - 1-800-642-9704

Alyson Edwards, WVECTCR - 1-888-983-2827 or aedwards@rvcds.org

Camp Gizmo is funded by the WV Dept of Ed/Office of Special Programs, WVDHHR/Bureau for Public Health/Office of Maternal, Child and Family Health/WV Birth to Three, and WVDHHR/Bureau for Children and Families/Division of Early Care and Education and in-kind support is provided by WVATS, WVU Center of Excellence in Disabilities, National Seating and Mobility, Assistive Technology Works, Inc. and Appalachian Center for Independent Living. Support and coordination provided by WV Early Childhood Training Connections and Resources.

Movement Ideas To Share!

(Please copy and distribute to families and other Child Care providers)

Infants

Here's one from Rae Pica's website:

We all know that using toys to interest a baby during floor time is a way to get them to move. Instead of using just one toy, surround them with toys. This will encourage them to look and move in different directions. For added interest, vary the size, shapes, colors and textures of the toys.



Toddlers

A fun, easy way to develop gross motor skills and hand-eye coordination is to blow bubbles and let children chase them. Make it interesting by using different size wands or make your own wands using pipe cleaners and cookie cutters.



Let children take turns blowing bubbles and chasing bubbles. This is a perfect outdoor activity for warm spring days.



Preschoolers

Twins

- Partner up and pretend as if you are connected to someone else and the two of you have to move in exactly the same way! Each child gets a turn making up the movements.



School-Age

Kitchen Tong Relay

- Team up! Using kitchen tongs, pick up a wash cloth (or another tricky item) and carry it to the other side of the room/yard and drop in a container. Run back, and hand off your tongs to the next player, and repeat until all the items are gone.



Do you have any cheap or free movement ideas you'd like to share? Let us know, and we'll include it this section of the newsletter in the next issue.

Check out <http://www.aahperd.org/headstartbodystart/> for more movement ideas!

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How Can a Child Care Nurse Health Consultant (CCHC) Help Me?

- Help providers develop strategies for caring for children with special health needs
- Develop or update health and safety policies for child care providers
- Provide health education and wellness programs
- Provide up-to-date information on the latest guidelines, policies and information regarding child health and safety
- Offer support through telephone consultations or on-site visits
- Conduct child care staff training
- Provide Medication Administration training
- Provide communicable disease information
- Develop health care plans for children with special needs
- Provide health and safety education for parents and children



Get to know your CCHC ~ GOODBYE CHRISTY!!! We will miss you!



Glenna Bailey



Sarah Hicks



Christy Freed

Christy has resigned, and we are sad! So if you have any questions, please contact Sarah or Glenna. See the info above for which nurse will be covering Christy's territory. Goodbye Christy, We will miss you!