

**Building Consultation Skills:
Child Care Health Consultation
NTI Facilitator Trainer's Guide**

version 1
(Last updated 7/24/12)

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NOTE TO TRAINER

There are six separate Toolkits associated with the Building Consultation Skills Training Module. Each Toolkit includes a Trainer's Guide and a Slide Presentation. There is one Toolkit for each of the following sub-topics:

- Child Care Health Consultation
- Cultural Competence and Communication Skills
- Policy Development
- Advocacy
- Health Education
- Resource & Referral and The Medical Home

The Toolkits are designed to assist NTI Trainers in delivering training sessions on each of the above subtopics. Trainers have the flexibility to design a training using any combination of subtopics. For example, a day-long training may be designed to cover all six subtopics, or a shorter training may cover fewer subtopics as needed. The toolkits have been developed to accommodate this flexibility.

Training on two of the sub-topics, Consultation and Policy Development, is presented at the on-site NTI training. The rest of the sub-topics are covered during the distance learning portion of the NTI training.

For more information about using the NTI materials, please read "Guidelines for Using the NTI Curriculum Materials," available in the "Curriculum" section of the NTI Resources Website (accessed by entering your NTI username and password at <http://blackboard.unc.edu>).

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PREPARATION CHECKLIST

Curriculum Materials:

Download the following from the "Curriculum" section of the NTI Resources Website:

- Building Consultation Skills* Training Module
- Building Consultation Skills: Child Care Health Consultation* NTI Facilitator Trainer's Guide
- Building Consultation Skills: Child Care Health Consultation* Slide Presentation
- Training Checklists*

Preparation:

- Read the "Introduction", "Caring for Our Children National Standards", and "Child Care Health Consultation" sections of the *Building Consultation Skills* Training Module.
- Read the *Building Consultation Skills: Child Care Health Consultation* NTI Facilitator Trainer's Guide.
- Review the *Building Consultation Skills: Child Care Health Consultation* Slide Presentation:
 - Customize slide #2 to include your name, agency, and the date of your training.
 - Print the slides as overheads or load the slide presentation onto your laptop, USB drive, or a CD. Save or print a back-up copy of the presentation as well.
- Create a participant's packet (one per participant) per copyright guidelines:
 - Copy activities, worksheets, and evaluation form provided in this Trainer's Guide under "Materials for Participant's Packet."
 - Copy the Slide Presentation as a handout.
- If you plan to use the Introduction/Icebreaker, on a flip chart sheet draw three columns, titled "Name", "Spare Time Activities", and "What You Want to Learn" for the Introductions/Icebreaker.
- On a flip chart sheet, write out the Overview of Training Session to display in the training room (you may prefer to leave off the estimated time and training technique).
- On a flip chart sheet, write out the Training Objectives to display in the training room.
- See "Training Implementation and Logistics Checklist" (located in the document titled *Training Checklists*) for set-up tasks to do the day of the training.
- Other: _____

Equipment and Supplies:

- See "Equipment and Supplies Checklist" (located in the document titled *Training Checklists*) for general supplies
- Laptop, slide presentation, and LCD projector or overhead projector
- Flip chart sheet and marker for Introductions/Icebreaker
- Flip chart sheet for posting Overview of Training Session
- Flip chart sheet for posting Training Objectives
- Other: _____

OVERVIEW OF TRAINING SESSION

Below is an overview of the topics covered in this session.

Estimated Time	Topic	Training Technique
10-15 minutes prior to session ¹	Registration	-----
Optional ²	Introductions/Icebreaker	small/large group
2 minutes	Overview of Training Session and Objectives	slides/overheads
10 minutes	Opening: The Role of the CCHC	large group
5 minutes	Presentation: Standards and Training	slides/overheads
10 minutes	Activity: Knowledge and Skills of the CCHC	small/large group
10 minutes	Presentation: The Consultation Process	slides/overheads
10 minutes	Activity: Using Consultation Stages	case scenario
5 minutes	Summary: Action Items for the CCHC	slides/overheads
30 minutes	Activity; Incorporating the Environmental Rating Scales into the Action Plan	small and large group discussion
3 minutes	Learning Assessment	individual/large group
5 minutes	Evaluation of Trainer	individual
Estimated Total Time: Approx. 1 hour and 30 minutes³		

¹ Not included in total time.

² Not included in total time. Develop activity based on participants' training needs.

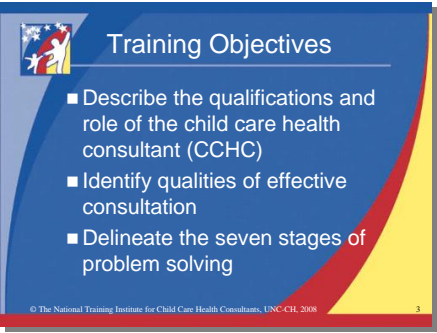
³ Add additional time if group guidelines and/or group facilitation methods need to be addressed at the beginning of the session, or if you decide to include any additional activities. For more information, see NTI's *Building Curriculum Development and Training Skills* Training Module.

TRAINER'S OUTLINE

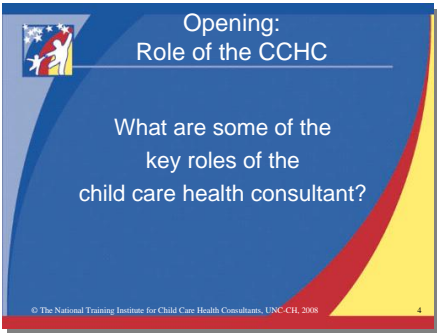
Introductions/Icebreaker

Time	Optional
Training Technique	Small/large group
Supplies	<ul style="list-style-type: none"> • Pre-written flip chart or large paper with columns • Marker
Instructions	<ul style="list-style-type: none"> • Ask participants to pair up with one another. • Instruct them to introduce themselves to one another by giving the following information: <ol style="list-style-type: none"> 1. Name 2. What he/she likes to do with spare time 3. One thing he/she would like to learn from this session • After this is complete, ask each pair to introduce their partner to the large group. • As each pair of participants completes introductions, write their information in the respective column on the flip chart or large paper. • After all pairs have introduced themselves, review the recorded information to the large group. For example, "Most of you like to do something outside in your spare time. The group wants to learn about x during this training session." • If you create your own activity, remember to base it on the participants' training needs and relate it to the training session's topic.
For More Information	See NTI's <i>Building Curriculum Development and Training Skills</i> Training Module for additional ideas about introductions and icebreaker activities.
Notes	


Overview of Training Session and Objectives

Time	2 minutes
Training Technique	Slides/overheads
Supplies	<ul style="list-style-type: none"> • Flip chart sheet with Overview of Training Session written on it • Flip chart sheet with Training Objectives written on it
Instructions	<ul style="list-style-type: none"> • Direct participants' attention to the posted Overview of Training Session. • Show slides 1-3. (Slides 1-2, the title slide and customizable slide, are not printed below.)
Talking Points	<p>Training Objectives</p> <ul style="list-style-type: none"> • As we begin, let's look at the Overview of Training Session to see what we'll be talking about today. • Let's also look at the Training Objectives. • (If you used the Introduction/icebreaker activity, review the participants' objectives. Explain how they will be interwoven and/or added to the existing training objectives.) 
For More Information	See NTI's <i>Building Curriculum Development and Training Skills Training</i> Module to learn more about training objectives.
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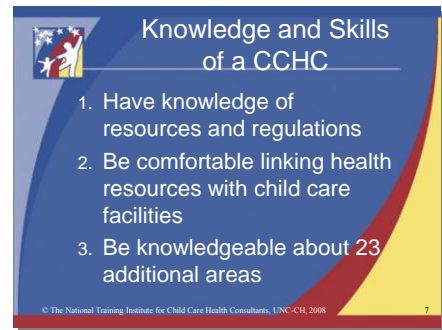
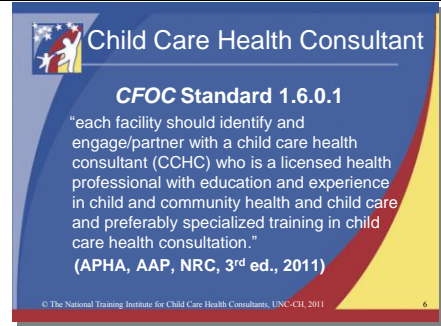
Opening: The Role of the CCHC

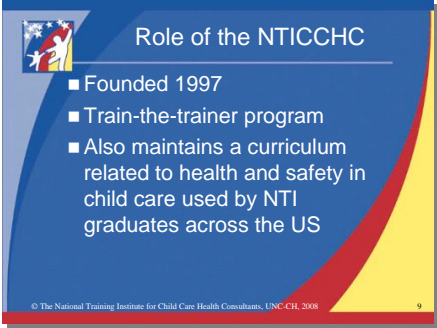
Time	10 minutes
Training Technique	Large group
Instructions	<ul style="list-style-type: none"> • Show slide 4. • Invite participants to discuss the question “What are some of the key roles of the child care health consultant?” • Encourage the participants to share their experiences, thoughts, etc. • Facilitate a discussion. • Summarize the discussion using the talking points below.
Talking Points	<p>Opening: The Role of the CCHC</p> <ul style="list-style-type: none"> • What do you see as some of the key roles of the child care health consultant? • The primary goal of the child care health consultant is to work with child care providers and parents/guardians to improve child health and safety in the child care environment. • Five key roles of a child care health consultant are: <ol style="list-style-type: none"> 1. Collaborative consultant 2. Policy developer 3. Advocate 4. Health educator 5. Referral and resource provider 
For More Information	Refer to Module section, “Introduction.”
Notes	

Presentation: Standards and Training

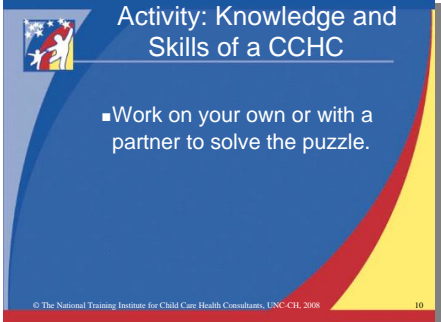
Time	5 minutes
Training Technique	Slides/overheads
Instructions	<ul style="list-style-type: none"> • Show slides 5-9.
Talking Points	<p>Health and Safety Standards in Child Care</p> <ul style="list-style-type: none"> • All states impose varying degrees of regulation on child care facilities through licensing procedures. These regulations stipulate the <i>bare</i> minimum health and safety requirements for compliance. • In 1990, the National Research Council Report of the National Academy of Sciences recommended that the U.S. push for higher than the bare minimum standards for health and safety in out-of-home child care facilities. • As a result, <i>Caring for Our Children: National Health and Safety Performance Standards: Guidelines for Out-of-Home Child Care Programs</i> was developed. These child care standards represent “the most widely agreed upon, state of the art, high quality level of practice” for child care facilities. • In other words, they represent the level of practice child care programs voluntarily seek to attain. 
For More Information	Refer to Module section, “What the CCHC Should Know: Standards and Training.”
Notes	

<p>Talking Points</p>	<p>Child Care Health Consultants</p> <ul style="list-style-type: none"> • Toward the goal of safer and healthier child care, CFOC standard 1.6.0.1 proposes that “each facility should identify and engage/partner with a child care health consultant (CCHC) who is a licensed health professional with education and experience in child and community health and child care and preferably specialized training in child care health consultation.” <p>Knowledge and Skills of a CCHC</p> <ul style="list-style-type: none"> • This consultant should have knowledge of resources and regulations and be comfortable linking health resources with child care facilities. In addition, CFOC lists 23 additional specific areas in which a CCHC should be knowledgeable. • Notably, the standard does not specify which health professions are included. • State or local health and child care agencies are responsible for recruiting health professionals who meet these qualifications. • Some state and local agencies provide child care health consultation by recruiting teams of professionals representing a mix of areas or expertise, which together qualifies the team to perform the duties of a CCHC. For example, a team might include a nurse, a nutritionist, a mental health professional, and an oral health professional.
<p>For More Information</p>	<p>Refer to Module sections, “Caring for Our Children National Standards” and “What the CCHC Should Know: Standards and Training.”</p>
<p>Notes</p>	


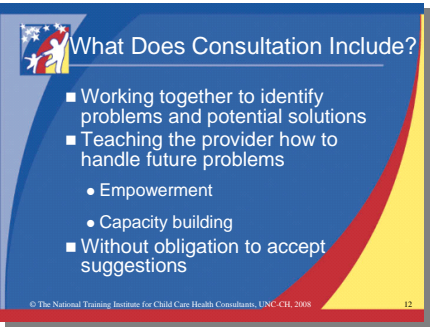


<p>Talking Points</p>	<p>Role of the National Training Institute for Child Care Health Consultants</p> <ul style="list-style-type: none"> • With the increased focus on health and safety in child care and with growing numbers of CCHCs, there was a need for consistent training. In 1997, the National Training Institute for Child Care Health Consultants was founded to serve as a national resource for training in the US. • NTI trains state and regional-level public health professionals to coordinate and train CCHCs in their community who will ultimately serve out-of-home child care programs. NTI utilizes a train-the-trainer model in that, instead of training CCHCs directly, it specifically targets child health, mental health, child care, and child development professionals with training and child care experience. These individuals come to NTI to gain the comprehensive skills and knowledge needed for child care health consultation and then take this back to their state or community to share with others. • In addition to providing on-site and distance education, NTI also develops and maintains a curriculum related to health and safety in child care that is used by NTI graduates across the US. 
<p>For More Information</p>	<p>Refer to Module sections, “Caring for Our Children National Standards” and “What the CCHC Should Know: Standards and Training.”</p>
<p>Notes</p>	


Activity: The Knowledge and Skills of a CCHC

Time	10 minutes	
Training Technique	Small/large group	
Supplies	One copy of the <i>Knowledge and Skills of a CCHC</i> crossword puzzle worksheet for each participant	
Instructions	<ul style="list-style-type: none"> • Show slide 10. • Direct trainees to the <i>Knowledge and Skills of a CCHC</i> crossword puzzle worksheet and to the <i>CFOC Standard 1.041: Knowledge and Skills of Child Care Health Consultants</i> handout in their participant's packet. • Ask them to work individually or in pairs to complete the worksheet. • After 8 minutes, bring the group back together to review the answers to the puzzle. 	
Talking Points	<p>Activity: <i>Knowledge and Skills of a CCHC</i></p> <ul style="list-style-type: none"> • Please find the <i>Knowledge and Skills of a CCHC</i> crossword puzzle worksheet and the <i>CFOC Standard 1.041: Knowledge and Skills of Child Care Health Consultants</i> handout in your participant's packet. Working by yourself or with a partner, use the handout to help you solve the puzzle. 	 <p>Activity: Knowledge and Skills of a CCHC</p> <ul style="list-style-type: none"> ■ Work on your own or with a partner to solve the puzzle. <p><small>© The National Training Institute for Child Care Health Consultants, UNC-CH, 2008 10</small></p>
Notes		

Presentation: The Consultation Process

Time	10 minutes
Training Technique	Slides/overheads
Instructions	<ul style="list-style-type: none"> • Show slides 11-18.
Talking Points	<p>What Does Consultation Include?</p> <ul style="list-style-type: none"> • The most effective consultant is someone who is able to create lasting changes in child care programs. • He/she functions not as an expert who comes in to tell staff what to do, but a facilitator or helper. • Consultation includes the following: <ul style="list-style-type: none"> ○ A structured series of interactions ○ A voluntary and equal relationship between a professional consultant and someone seeking help ○ A problem solving process ○ An agreed upon goal • The consultation relationship is most productive when there is openness, warmth, genuineness, and empathy.  <p>What Does Consultation Include? (continued)</p> <ul style="list-style-type: none"> • During the consultation process, the CCHC and the provider work together to identify problems and potential solutions. It is important that the CCHC ask questions and explore different perspectives to identify the true cause of a problem. We'll talk more about this later. • The CCHC should also work to teach the provider how to handle future problems. Ideally, the CCHC wants to empower the provider and build capacity within the organization so that they can solve problems on their own in the future. • Remember that the provider is free to reject the recommendations made by the CCHC. Because the relationship is not supervisory, the provider is under no obligation to accept suggestions made by the CCHC. 
For More Information	Refer to Module section, "What the CCHC Should Know: The Consultation Process."

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Talking Points	<p>Collaborative Consultation</p> <ul style="list-style-type: none"> • The CCHC should take care to ensure that everyone involved understands her role as a consultant. • If child care providers perceive that the CCHC functions as a supervisor, the CCHC will have a difficult time building a trusting relationship. The CCHC should clarify that the provider is not obligated to accept his/her advice. • Regulation and licensing are not the responsibility of the CCHC. <ul style="list-style-type: none"> - Every state should have a statute that identifies the regulatory agency responsible for licensing and regulation of all child care facilities. - Without assuming an enforcement role, the CCHC should coordinate activities among various agencies and government offices to ensure the health and safety in child care settings. - For example, in some cases, immediate expert assistance may be necessary (i.e. disease outbreak or diarrheal illness). In this case, the CCHC might bring a physician or health department official into the consultation relationship to assist. • The CCHC-provider relationship deals only with professional problems that are related to the health and safety of the children and staff in the child care program. The CCHC should not provide personal counseling. 
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For More Information	Refer to Module section, “What the CCHC Should Know: The Consultation Process.”
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Talking	Who is Included in the Consultation Process?
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<p>Points</p>	<ul style="list-style-type: none"> • Consultation is a triadic helping process, in that consultation between the consultant and consultee provides indirect service to the third party, or client. • The CCHC is a health professional with a broad and general understanding of many issues related to child health, safety, development, and care. • He or she should be able to respond to problems presented by the child care provider <i>and</i> recognize problems that might go undetected by the child care provider or families. • Who is the “consultee” in the consultation process? <ul style="list-style-type: none"> ○ It might be directors, teachers, or teacher assistants – anyone who provides direct services to children in the child care program. • Who are the “clients”? <ul style="list-style-type: none"> ○ The clients are the children and families served by the child care providers. <div data-bbox="987 170 1430 499" data-label="Diagram"> </div>
<p>For More Information</p>	<p>Refer to Module section, “What the CCHC Should Know: The Consultation Process.”</p>
<p>Notes</p>	

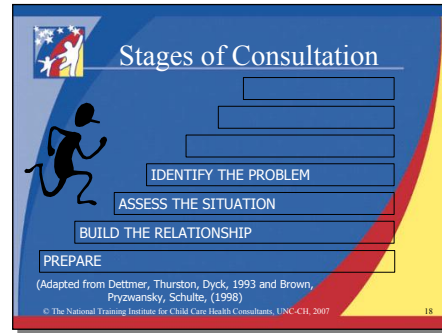
<p>Talking Points</p>	<p>Consultation: Keys to Success Several key elements contribute to successful consultation and apply to all stages of consultation. The CCHC should:</p> <ol style="list-style-type: none"> 1. Be prepared: <ul style="list-style-type: none"> - Have his/her thoughts and materials organized before consultations. - Develop a list of questions that will help her understand the real problem. - Arrive prepared for the meeting (i.e. come with a checklist and with some ideas about resources that might be helpful). - Have some strategies in mind beforehand, but should also encourage others to offer their own ideas. 2. Keep communication open: <ul style="list-style-type: none"> - Not be afraid to say they do not have the answer. - Use terms that everyone involved will understand. - Use feedback as a vehicle for providing positive information, not just negative comments. - Involve the provider in the problem and encourage ownership. When a provider asks for advice, first ask what the provider has already observed. - Use terms like “we” and “us”, not “I” and “you.” 3. Be respectful: <ul style="list-style-type: none"> - Make it a habit to offer positive comments. - Maintain contact and make herself available. - Be prompt and reliable. - Be flexible. - Follow through on all phases of the consultation process.
<p>For More Information</p>	<p>Refer to Module section, “What the CCHC Should Know: The Consultation Process.”</p>
<p>Notes</p>	



Talking Points

Stages of Consultation

(Trainer: Remember that this is an animation slide. Each of the first four stages can be revealed as they are explained. The last three stages will be presented later in the presentation.)



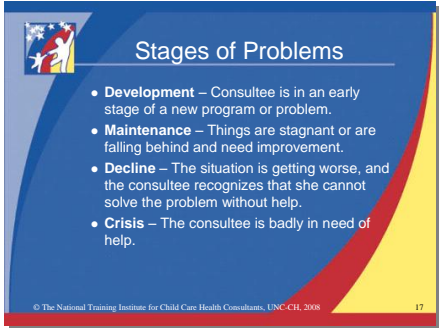
- To be effective, the CCHC must know both the needs and the strengths of the consultees and clients with whom and for whom she/he is consulting.
- There are 4 stages of collecting information and implementing effective strategies.

1. **Prepare:** The CCHC should make arrangements to meet the consultee at a convenient time and place. The CCHC should prepare for the first meeting by developing an introductory statement, assessing her own personal expertise and problem solving skills, and deciding which team members can best address the consultee's needs. Before the first meeting, the CCHC should prepare information to help the provider understand the CCHC's role and how the CCHC may be best utilized by the child care provider. The CCHC should also familiarize herself with the child care licensing requirements that apply to the facility.
2. **Build the Relationship:** After presenting an introductory statement, the CCHC should make efforts to build a good working relationship. This includes getting information about the program's philosophy, staff roles and responsibilities, the types of families served, and any current relationships the program has with other health and/or regulatory professionals. Once an atmosphere of mutual trust has been established and good rapport has been developed, the CCHC can begin to talk with the provider to make a plan for working together based on their needs.
3. **Assess the Situation:** Once a good relationship has begun, the CCHC can begin to focus on specific needs. The CCHC may be asked to respond to a particular concern raised by the provider, or the consultant may be asked to review the overall health and safety status of the child care facility. In either situation, the CCHC can assess the situation by collecting information through individual interviews, group discussions, observations, and record reviews. Once this data is gathered, the CCHC will record, assess, and summarize the data, noting both strengths and weaknesses in the program.
4. **Identify the Problem:** Problem-solving is the heart of the consultation process. When working to identify the problem, it is important to listen to the concerns and frustrations of all parties. Once everyone has had a chance to share, the problems identified must be prioritized. What are some questions a CCHC might ask to obtain information about a problem?

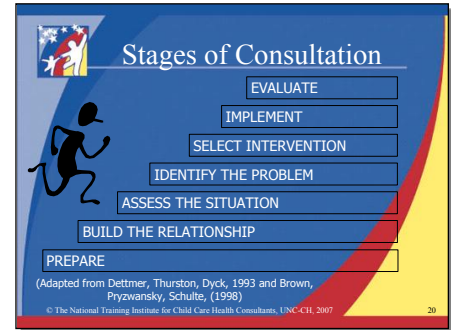
For More Information	Refer to Module section, "What the CCHC Should Know: Stages of Consultation."
Notes	<p>Questions a CCHC may want to ask to obtain information about a problem are:</p> <ul style="list-style-type: none"> • Can you tell me about your situation? • Who is affected by this problem? • How long has it been going on? • When did it happen last? • Who else is involved? • What have you already tried? • For what reasons do you think previous interventions were unsuccessful? • How will things be different when the problem is solved? • What will happen if the problem is not solved? • How will you know when the problem is solved? <p>(Adapted from Kurpius, Fuqua, and Rozecki, 1993)</p>

Talking	Stages of Problems
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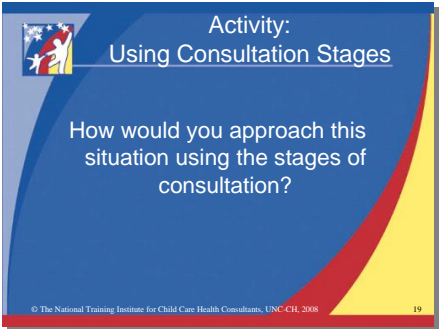
<p>Points</p>	<ul style="list-style-type: none"> • Knowing the stage of the problem may assist the CCHC to form better questions about the need for help. Listening to the provider as he/she describes the problem can help the CCHC determine the stage of a problem. • There are four stages for presenting problems, each of which is characterized by unique consultee needs and reactions. <ul style="list-style-type: none"> • Development – Consultee needs help at an early stage of a new program or problem. Seeking intervention at this stage may indicate signs of consultee insightfulness and openness. • Maintenance – Things have become stagnant or are falling behind and need improvement. Seeking help at this stage usually indicates the consultee’s desire and motivation to improve. • Decline – Things are getting worse, and the consultee recognizes that she cannot solve the problem without help. Seeking help at this stage may indicate that the consultee wants a quick fix and will have high expectations of the consultant’s ability to provide an immediate solution. • Crisis – The consultee is badly in need of help. Seeking help at this stage may indicate the consultee is desperate and wants immediate assistance. • It is really important that the CCHC involve the provider in gathering and examining information about a problem. The <i>single best predictor</i> of success in consultation is an accurate problem definition that is understood and accepted by consultee and client as well as the CCHC.
<p>For More Information</p>	<p>Refer to Module section, “What the CCHC Should Know: Stages of Consultation.”</p>
<p>Notes</p>	



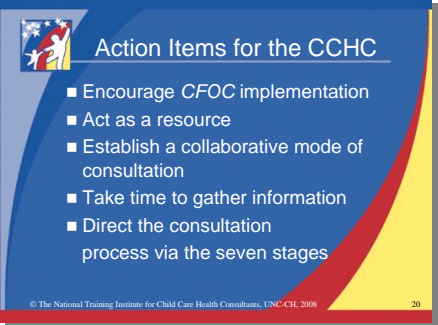
<p>Talking Points</p>	<p>Stages of Consultation (continued) <i>(Trainer: Remember that this is an animation slide. Each of the last three stages can be revealed as they are explained.)</i></p> <p>5. Select Intervention: Once the problem is defined and accepted by the CCHC and consultee, the CCHCs' task is to assist in the development of an intervention strategy. The <i>second best predictor</i> of success in consultation is the selection of an intervention strategy that all three participants (CCHC, consultee, client) agree on.</p> <ul style="list-style-type: none"> - There are common mistakes that happen during this stage, for example working alone, being ambiguous about the plans for intervention, and not involving others. Before the intervention begins, all parties need to understand what is involved. <p>6. Implement: Once the intervention has been agreed upon, the CCHC should assist in implementing the plan. This includes monitoring the process and progress of the plan for evaluation purposes and providing any technical assistance or links to resources that may be required. The CCHC must keep in mind that it may be necessary to change course if the proposed intervention does not seem to work. And, everyone involved should keep in mind that it may take some time to see results.</p> <p>7. Evaluate: Evaluation provides an opportunity to assess the achievement of goals and objectives, identify barriers, adjust the plan with barriers in mind, and recognize that often a problem can only be partially resolved. Evaluation should be ongoing, as opposed to occurring only at the end.</p> <p>So that the child care provider's problem solving skills improve and she is able to independently address similar problems in the future, the consultant should provide training in problem-solving, communication, and intervention techniques throughout this process.</p>
<p>For More Information</p>	<p>Refer to Module section, "What the CCHC Should Know: Stages of Consultation."</p>
<p>Notes</p>	



Activity: Using Consultation Stages

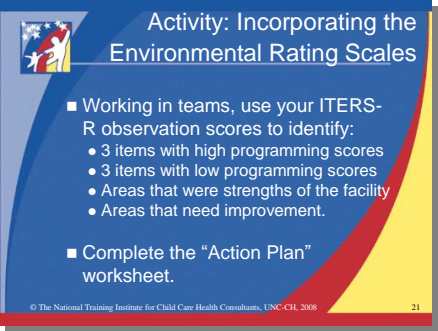
Time	10 minutes
Training Technique	Case scenario
Supplies	<ul style="list-style-type: none"> • One copy of the ‘Using Consultation Stages’ worksheet for each trainee.
Instructions	<ul style="list-style-type: none"> • Show slide 19. • Direct trainees to the “Using Consultation Stages” worksheet in their participant’s packets and allow the group to read the case scenario. You may want to invite a participant to read the case scenario aloud. • Facilitate a discussion about how the child care health consultant might approach this situation using the stages of consultation. • Begin the discussion with the example provided under the first consultation stage, Prepare.
Talking Points	<p>Activity: Using Consultation Stages Let’s talk about the ideas that you have for how to use the consultation stages to respond to this situation.</p> 
For More Information	Refer to Module section, “What the CCHC Should Know: Stages of Consultation.”
Notes	

Summary: Action Items for the CCHC

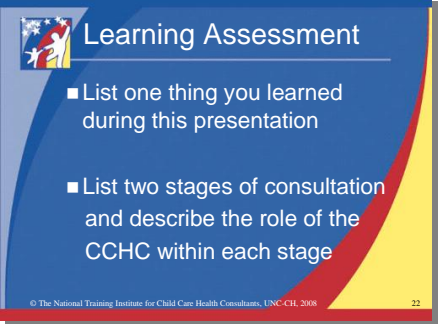
Time	5 minutes
Training Technique	Slides/overheads
Instructions	<ul style="list-style-type: none"> • Show slide 20. • Before discussing the action items for the CCHC, you may want to review the key points of the training session. Consider asking participants what they think are the key points of the training session. • You may want to have participants create their own list of action items or list a few steps to achieve each item on the slide.
Talking Points	<p>Action Items for the CCHC</p> <p>There are a number of things a CCHC might do in her role as a consultant to help child care facilities improve the health and safety of child care centers. She could:</p> <ul style="list-style-type: none"> • Encourage child care staff to implement the <i>CFOC</i> standards in order to promote and establish best practices of child care health and safety in their facilities. • Enhance the efforts of the child care program to provide high quality care by acting as a resource to arrange for health services and health education. • Develop and maintain a registry of other consultants or experts in the community and invite these experts to assist when appropriate. • Make an effort to establish a collaborative, cooperative mode of consultation. • Before and during the consultation process, gather as much information as possible regarding the specific needs and expertise of the consultee and clients participating in the consultation. • Direct the consultation process through the seven stages of consultation. 
For More Information	Refer to Module section, "Action Items for the CCHC."
Notes	

Activity: Incorporating the Environment Rating Scales Results into the Action Plan

Time	30 minutes
Training Technique	Small and large group discussion
Supplies	<ul style="list-style-type: none"> • One copy of the “Incorporating the Environment Rating Scales Results into the Action Plan” worksheet for each trainee • One copy of the accompanying document, “SAMPLE Child Care Observation Letter” for each trainee • One copy of the “Action Plan” worksheet for each trainee • ITERS-R with observation scores
Instructions	<ul style="list-style-type: none"> • Show slide 21. • Ask the participants to sit with their partner(s) from their ITERS-R debriefing session. If there is an odd number of trainees, the facilitator or moderator may need to partner with a trainee so that everyone can complete the activity. • Point participants to the “Incorporating the Environment Rating Scales Results into the Action Plan” and “Action Plan” worksheet in the participant’s packet. • Instruct participants to identify three items (or indicators if the items don’t meet the criteria) with high programming scores (scores of 5-7) and three items/indicators with low programming scores (scores of 1-3) from their ITERS-R observation. • Ask the participants to review the strengths of the child care facility, then the items/indicators that need improvements. • Using the “Action Plan” worksheet, ask participants to develop an Action Plan that would address the items/indicators that need improvements. Encourage the participants to consider how the child care facility can use their identified strengths when implementing the Action Plan. • Invite participants to return to the large group. • Ask participants to share with the group how they used the identified items with high programming scores to support the Director/Child Care Provider when discussing the Action Plan.

<p>Talking Points</p>	<ul style="list-style-type: none"> • The last activity we'll do together today is designed to let you practice acting as a consultant using the ITERS-R. • Please move so that you are able to work with your partner from your ITERS-R observation. • Find the "Incorporating the Environment Rating Scales Results into the Action Plan" and "Action Plan" worksheet in the participant's packet. • Working with your partner, identify three items (or indicators if the items don't meet the criteria) with high programming scores (scores of 5-7) and three items/indicators with low programming scores (scores of 1-3) from your ITERS-R observation. Also, review the strengths of the child care facility, then the items/indicators that need improvements. • Using the "Action Plan" worksheet, develop an Action Plan that addresses the items/indicators that need improvements. Consider how the child care facility can use their identified strengths when implementing the Action Plan.  <ul style="list-style-type: none"> • Who would like to volunteer to share with the group how they used the identified items with high programming scores to support the Director/Child Care Provider when discussing the Action Plan? • There is a sample CCHC Introductory Statement that you might find helpful in your participant's packet. This is something that a CCHC might use to describe her role to a child care provider. Developing a statement such as this can help a new CCHC think about her strengths, the experience that she brings to her new role, and how she might serve as a resource for the child care provider. Even more forms for consultation are available in the Consultation Toolkit on the resources website. You'll be able to access this once you complete your NTI training.
<p>Notes</p>	

Learning Assessment

Time	3 minutes
Training Technique	Individual/large group
Instructions	<ul style="list-style-type: none"> • Show slide 22. • Ask participants to write down their responses to these two instructions. • If there is enough time, participants could be asked to share their responses with the large group. Record their suggestions on a flip chart sheet. • Use this as an opportunity to provide resources for further learning.
Talking Points	<p>Learning Assessment</p> <p>As a review, let's reflect on what we learned today. Please write down your answers to these two questions. I'll ask you to share your answers with the group in a couple of minutes.</p> 
Notes	

Evaluation of Trainer

Time	5 minutes
Training Technique	Individual
Instructions	<ul style="list-style-type: none"> • Show slide 23. (Placeholder slide not printed here.) • Ask participants to complete the "Evaluation of Trainer Form" at this time. • Inform participants that the evaluations are anonymous. • Explain that the evaluation results provide you with information about the effectiveness of the training and that information collected from the evaluation will be used to improve the training. • Allow participants 5 minutes to complete the evaluation. • Collect forms.
Notes	

MATERIALS FOR PARTICIPANT'S PACKET

Activities

The following are activities related to child care health consultation. The first three activities, “Knowledge and Skills of a CCHC”, “Using Consultation Stages”, and “Incorporating the Environmental Rating Scales Results into the Action Plan” are part of the 90 minute presentation that has been designed on this topic. The “Action Plan” form can be used to map out short- and long-term plans to meet the needs of a consultee. This form can serve as a useful tool for both the consultant and the consultee in understanding the steps that will be taken during the consultation process. The remaining activity (“Child Care Health Consultation Introductory Statement”) is referenced at the end of the training and should be pointed out to trainees at that time.

Any of the following may be printed and included in a participant's packet or as handouts to be distributed to the group. You may wish to white out the existing page numbers and write in your own, or you may print each activity on different colors of paper for easy reference by your participants.

Evaluation of Trainer

The “Evaluation of Trainer Form” at the end of this material should be printed and distributed to each participant for feedback on various aspects of your training.

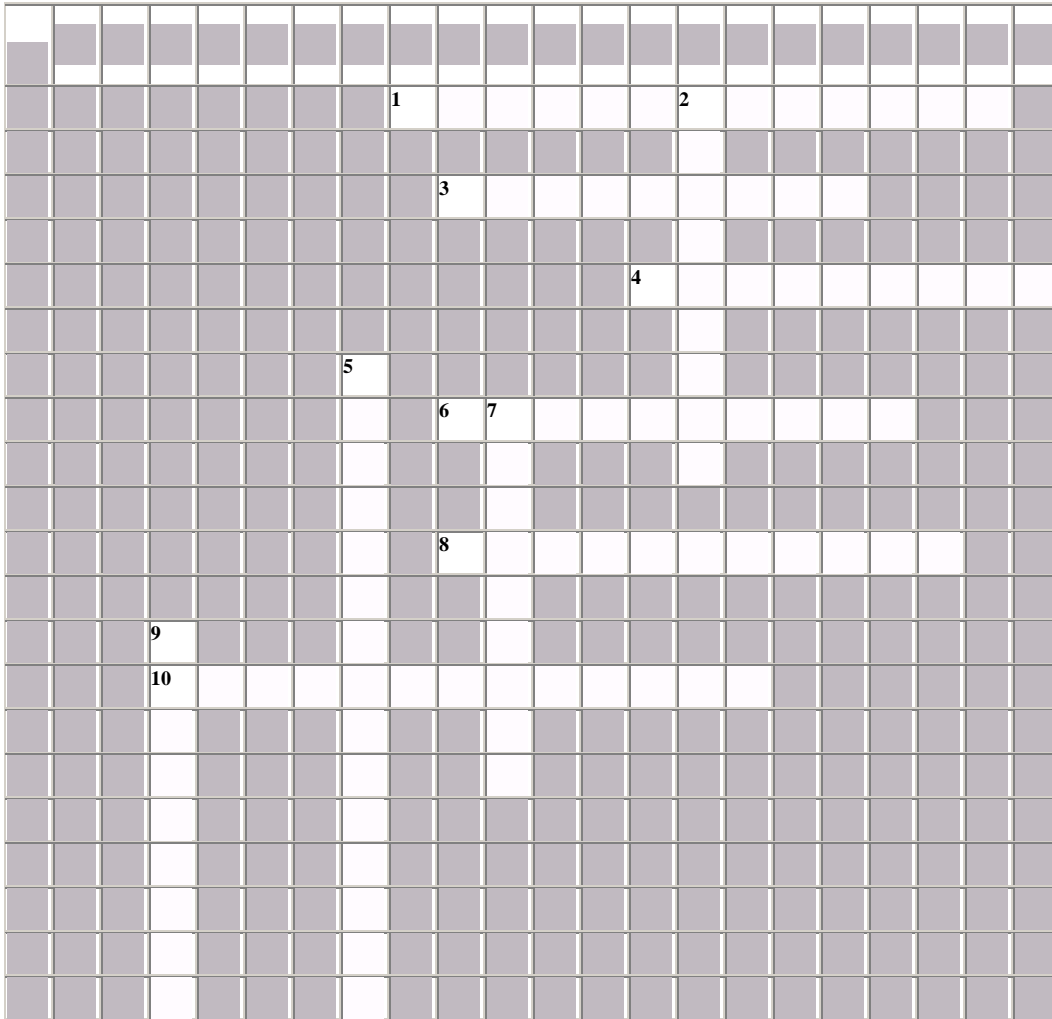
Cover Page

The cover page may be printed and used as a cover page for the activities, slide handout, evaluation form and any additional materials you wish to provide as part of a participant's packet. If your participant's packet contains several activities and handouts, you may want to create a table of contents to guide participants through the materials.

ACTIVITY: KNOWLEDGE AND SKILLS OF THE CCHC Crossword Puzzle

Instructions: Read the *Caring for Our Children* Standard 1.6.0.1 on the following page. Use the information in the standard to complete the crossword puzzle.

Knowledge and Skills of the CCHC



Down

2. CCHCs work to link providers with _____ in the community.
5. CCHCs are primarily charged with improving _____ in child care. (3 words)
7. CCHCs make these to link providers with community services.
9. CCHCs must be familiar with _____ requirements, even though they don't enforce them.

Across

1. CCHCs will review these for children and providers. (2 words)
3. CCHCs help providers involve children with special needs in the classroom. This is called _____.
4. CCHCs work with providers to ensure that meals and snacks provide good _____.
6. CCHCs educate providers and parents about toothbrushing and general _____. (2 words)
8. CCHCs might consult with a child's health care provider about these.
10. CCHCs make sure children are up to date on these.

CFOC Standard 1.6.0.1: Child Care Health Consultants

A facility should identify and engage/partner with a child care health consultant (CCHC) who is a licensed health professional with education and experience in child and community health and child care and preferably specialized training in child care health consultation.

CCHCs have knowledge of resources and regulations and are comfortable linking health resources with child care facilities.

The child care health consultant should be knowledgeable in the following areas:

- a. Consultation skills both as a child care health consultant as well as a member of an interdisciplinary team of consultants;
- b. National health and safety standards for out-of-home child care;
- c. Indicators of quality early care and education
- d. Day-to-day operations of child care facilities;
- e. State child care licensing and public health requirements;
- f. State health laws, Federal and State education laws (e.g., ADA, IDEA), and state professional practice acts for licensed professionals (e.g., State Nurse Practice Acts);
- g. Infancy and early childhood development, social and emotional health, and developmentally appropriate practice;
- h. Recognition and reporting requirements infectious disease;
- i. American Academy of Pediatrics (AAP) and Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) screening recommendations and immunization schedules for children;
- j. Importance of medical home and local and state resources to facilitate access to a medical home as well as child health insurance programs including Medicaid and State Children's Health Insurance Program (SCHIP)
- k. Injury prevention for children;
- l. Oral health for children;
- m. Nutrition and age-appropriate physical activity recommendations for children including feeding of infants and children, the importance of breastfeeding and the prevention of obesity;
- n. Inclusion of children with special health care needs and developmental disabilities in child care;
- o. Safe medication administration policies
- p. Health education of children
- q. Recognition and reporting requirements for child abuse and neglect/child maltreatment;
- r. Safe sleep practices and policies (including reducing the risk of SIDS);
- s. Development and implementation of health and safety policies and practices including poison awareness and poison prevention;
- t. Staff health, including adult health screening, occupational health risks, and immunizations;
- u. Disaster planning resources and collaborations within child care community;
- v. Community health and mental health resources for child, parent and staff health;
- w. Importance of serving as a healthy role model for children and staff.

The child care health consultant should be able to perform or arrange for performance of the following activities:

Teaching child care providers about health and safety issues;

- a. Assessing caregivers/teacher's knowledge of health, development, and safety knowledge, and offering training as indicated;
- b. Assessing parent's knowledge of health, development, and safety knowledge, and offering training as indicated;
- c. Assessing children's knowledge of health, development, and safety knowledge, and offering training as indicated;

- d. Conducting a comprehensive indoor and outdoor health and safety assessment and on-going observations of the child care facility;
- e. Consulting collaboratively on-site and/or by telephone or electronic media;
- f. Providing community resources and referral for health, mental health and social needs, including accessing medical homes, children's health insurance programs (e.g., CHIP), and services for special health care needs;
- g. Developing or updating policies and procedures for child care facilities;
- h. Reviewing health records of children;
- i. Reviewing health records of caregivers/teachers;
- j. Assisting caregivers/teachers and parents/guardians in the management of children with behavioral, social and emotional problems and those with special health care needs;
- k. Consulting with a child's primary care provider and the child's individualized health care plan and coordinating services in collaboration with parents/guardians, the primary care provider, and other health care professionals (the CCHC shows commitment to communicating with and helping coordinate the child's care with the child's medical home, and may assist with the coordination of skilled nursing care services at the child care facility);
- l. Consulting with a child's primary care provider about medications as needed, in collaboration with parents/guardians;
- m. Teaching staff safe medication administration practices;
- n. Monitoring safe medication administration practices;
- o. Observing children's behavior, development and health status and making recommendations if needed to staff and parents/guardians for further assessment by a child's primary care provider
- p. Interpreting standards, regulations and accreditation requirements related to health and safety, as well as providing technical advice, separate and apart from an enforcement role of a regulation inspector or determining the status of the facility for recognition;
- q. Understanding and observing confidentiality requirements;
- r. Assisting in the development of disaster/emergency medical plans (especially for those children with special health care needs) in collaboration with community resources;
- s. Developing an obesity prevention program in consultation with a nutritionist/registered dietitian (RD) and physical education specialist;
- t. Working with other consultants such as nutritionists/RDs, kinesiologists (physical activity specialists), oral health consultants, social services workers, early childhood mental health consultants, and education consultants.

The child care health consultant should have regular contact with the facility's administrative authority, the staff, and the parents/guardians in the facility. The administrative authority should review, and collaborate with the CCHC in implementing recommended changes in policies and practices. In the case of consulting about children with special health care needs, the CCHC should have contact with the child's medical home with permission from the child's parent/guardian.

ACTIVITY: USING CONSULTATION STAGES

Instructions: Read the case scenario below. Engage in a facilitated discussion about how the CCHC might approach this situation using the stages of consultation.

Background: Mary Jones, CCHC, receives a telephone call from Ada Storch, director of Sweet Peas Child Care Center. Ms. Storch reports that a state licensing consultant visited her center today and found several problems of major concern. The consultant recommended that Ms. Storch contact a CCHC to provide assistance with resolving some of the problems. The problems identified by the licensing consultant include: improper diaper changing and assisting with toileting, inadequate handwashing (staff and children), improper storage of cleaning agents, improper storage of medication, inadequate record keeping (children missing proof of immunizations and/or physical exams), incomplete accident/injury logs, lack of emergency contact information, and no documentation of monthly fire drills. Ms. Storch also states that the licensing consultant instructed her to correct all of these problems within 60 days. Ms. Storch doesn't know how she can do this since she has a limited budget and little free time.

Questions: How might the CCHC approach this situation using the stages of consultation? An example of the first stage, Prepare, is provided.

1. Prepare

Given the immediacy of this situation, the CCHC may not have enough time to provide a detailed introductory statement of his/her role as the child care health consultant to Ms. Storch. Nonetheless, it is important that the CCHC describe his/her role as it relates to this specific situation. Similarly, the CCHC might want to make a quick assessment of his/her own personal expertise and problem solving skills as they relate to Ms. Storch's needs. Last, the CCHC should identify team members and community resources that could be offered to Ms. Storch at this time.

2. Build the relationship

3. Assess the situation

4. Identify the problem

5. Select an intervention strategy

6. Implement intervention strategy

7. Evaluate intervention strategy

Notes:

ACTIVITY: Incorporating the Environment Rating Scales Results into the Action Plan

Instructions:

The purpose of this worksheet is to prepare for completing the Action Plan. In the appropriate space below, identify three items with high programming scores (scores of 5-7) and three items with low programming scores (scores of 1-3) from your ITERS-R observation. If you are unable to identify 3 **Items** that fit the criteria, then look for **Indicators** that meet the criteria.

- (Examples):
1. **Item 1:** Indoor Space
 Indicator 3.4: Space is reasonably clean and well-maintained

 2. **Item 28:** Discipline
 Indicator 5.2: Positive methods of discipline used effectively

Summary: Infant/Toddler Environmental Rating Scale-Revised

Consultee(s): _____ Program: _____
Consultant: _____ Classroom: _____
Date of Observation: _____

A. Items or Indicators with High (ITERS-R scores of 5-7) programming scores:

- 1.
- 2.
- 3.

B. Items or Indicators with Low (ITERS-R scores of 1-3) programming scores:

- 1.
- 2.
- 3.

Notes:

ACTIVITY: CHILD CARE HEALTH CONSULTANT INTRODUCTORY STATEMENT

Instructions: Read the sample CCHC Introductory Statement below. Construct an introductory statement that you would use to describe your role as the child care health consultant to a child care provider. Be prepared to share your statement with the large group if you choose.

SAMPLE CCHC INTRODUCTORY STATEMENT:

My name is Jane Dwyer and I have been a child care health consultant to both large and small child care centers for the past 12 years. I have been a Pediatric Nurse Practitioner for the past 20 years. My main role as a child care health consultant is to ensure the health and safety of the children and staff in your facility and assist you in meeting the needs of your parents/guardians. In this role, I have the capacity to support you in a variety of ways. I can work with you to ensure the diverse needs of your children and families are met in a culturally and linguistically appropriate manner. I can assist you in developing and/or revising your facility’s health and safety policies. I can be a resource for referring and arranging health services and meeting the health education needs of those in your care. I can act as a health advocate in the community to support your facility’s mission and goals. It is your choice to access my services, and you can end them at anytime. (A detailed list of services is available if interested.) Overall, I pledge to work with you to enhance the quality of your facility. Throughout our relationship, I will use my knowledge of national health and safety standards as a foundation for making recommendations. I look forward to being a resource and support to you, your staff, and your families. I am available Mondays – Thursdays from 8:00 am – 6:00 pm via phone at (303)555-5555 or email at JanePNP@childcare.net.

YOUR CCHC INTRODUCTORY STATEMENT:

Trainer's Name: _____

Date: _____

National Training Institute for Child Care Health Consultants Evaluation of Trainer Form

Using the rating scale below, please evaluate the Trainer's presentation skills.

1= unsatisfactory 2= below average 3=average 4=above average 5=outstanding NA=non-applicable

Training Content						
Please rate the Trainer on the quality of the following:	1	2	3	4	5	NA
• Introduction and opening						
• Accuracy of information						
• Usefulness of information						
• Clear presentation of training objectives						
• Fulfillment of training objectives						
• Organization of training content						
• Closing						

Training Techniques: Methods, Media, & Materials						
Please rate the effectiveness of the Trainer's use of the following:	1	2	3	4	5	NA
• Flip chart						
• Handouts						
• Overhead transparencies						
• PowerPoint slides						
• Video						
• Other (specify):						

Training Techniques: Activities						
Please rate the Trainer's use of training activities on the following characteristics:	1	2	3	4	5	NA
• Clear instructions						
• Usefulness						
• Opportunities for interaction among participants						

Delivery of Content						
Please rate the Trainer on the following training dynamics:	1	2	3	4	5	NA
• Enthusiasm						
• Voice projection						
• Clarity and professionalism of voice						
• Word choice						
• Pace of presentation						
• Eye contact						

Facilitation Skills						
Please rate the Trainer on the following skills:	1	2	3	4	5	NA
• Time management						
• Manner of answering questions						
• Manner of handling difficult behaviors of participants						
• Ability to engage all participants						

Please take a moment to answer the following questions:

What did you like most about this training?

What can the Trainer do to improve this training?

Was this the most effective way to present this material? Please explain.

Do you have any suggestions for other methods to present the material?

Thank you.



Child Care Health Consultation

Participant's Packet