



# CHILD CARE HEALTH CONSULTANT COMPETENCIES

August 2022

## INTRODUCTION

The National Center on Early Childhood Health and Wellness is pleased to present competencies for child care health consultants (CCHCs). This document defines competencies for CCHCs working with early care and education (ECE) programs\* serving infants, toddlers, preschoolers, and school-aged children and their families.

*Caring for Our Children (CFOC)* provides a widely accepted definition of a CCHC: “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” (*CFOC* [1.6.0.1](#)). Most CCHCs fit with this definition, but some states or early childhood systems have different qualifications for CCHCs. To be inclusive of all CCHCs, the competencies do not specify licensing or educational requirements. Optimally, a CCHC is a licensed health professional with education and experience in health and safety in ECE settings.

Child care health consultants support the health, safety, and wellness of children, families, and staff in ECE programs. Numerous



research studies indicate that CCHCs have been effective in increasing health and safety policies and practices, children’s immunization rates, and environmental health practices within ECE settings.<sup>[i-vii](#)</sup> They foster quality child care by observing for recommended practices and identifying and addressing hazards in a center or family child care home through collaborative consultation. CCHCs work in partnership with directors, teachers, and family child care providers to help them comply with state regulations and recommended national standards and promote best practices to ensure children’s safe and healthy growth and development. They can also play a unique role

\* In this document, ECE programs refers to all out-of-home settings, including family child care and center-based care. The term “programs” does not refer to the physical facilities, but to programs as a whole, starting with the program leaders but also including staff. The term “staff” refers to the teachers, caregivers, and others who work in the ECE program.

as facilitators and coordinators of care across systems, including ECE programs, health care providers and medical homes, and community health services, all in collaboration with families.<sup>viii</sup> CCHCs also play a valuable role in promoting inclusion of children with special health care needs within ECE settings.<sup>ix,x</sup>

Not all CCHCs provide this full spectrum of services, but no matter their specific scope of work, all CCHCs need knowledge, skill sets, and experience to deliver their services effectively. The competencies aim to guide CCHCs to this end.

## PURPOSE

The goal of the competencies is to contribute to the development of a well-prepared CCHC workforce by articulating the key areas of CCHC expertise. The competencies achieve this goal by:

- Communicating the breadth and depth of knowledge and skills of the CCHC
- Identifying the specific application of knowledge and skills needed to perform effectively as a CCHC
- Describing components of effective consultation
- Providing a framework for CCHC training and professional development

The competencies reflect best practices. They provide a detailed view of how CCHCs working in any ECE setting can apply their specialized knowledge and skills in the workplace to improve health, safety, and wellness outcomes.

## FRAMEWORK

There are 16 areas of expertise with 30 associated competencies that fall into two categories: 1) General Areas of Expertise that apply to the work of the CCHC across all topic areas, and 2) Subject Matter Areas of Expertise that are specific to the core content areas of health, safety, and wellness.

### General Areas of Expertise

1. [Consultation Skills](#)
2. [Quality Health, Safety, and Wellness Practices](#)
3. [Policy Development and Implementation](#)
4. [Health Education](#)
5. [Resource and Referral](#)

### Subject Matter Areas of Expertise

6. [Illness and Infectious Diseases](#)
7. [Children with Special Health Care Needs](#)
8. [Medication Administration](#)
9. [Safety and Injury Prevention](#)
10. [Emergency Preparedness, Response, and Recovery](#)
11. [Infant and Child Social and Emotional Wellbeing](#)
12. [Child Abuse and Neglect](#)
13. [Nutrition and Physical Activity](#)
14. [Oral Health](#)
15. [Environmental Health](#)
16. [Staff Health and Wellness](#)

Each area of expertise includes three sections:

- Competency identifies what a CCHC should be able to do to perform effectively within that area of expertise.
- Description describes the knowledge and skills related to each competency.
- Application includes a list of activities a CCHC may perform to demonstrate the competency. The application items are not sequential or hierarchical and may not be an exhaustive list of all the tasks related to each competency. The applications are not mandatory for all CCHCs—some CCHCs may not work within every area of expertise.

## USE

CCHCs can use the competencies to assess their readiness to do the work and identify topics for professional development to build their knowledge and practice skills. Federal, state, tribal, territorial, and local systems can also use the competencies to learn about the expertise CCHCs can bring to ECE programs and to support continuing education opportunities for CCHCs.

States, territories, tribes, or other systems may choose to use and/or adapt the competencies in the following ways:

- Develop criteria for hiring and training CCHCs
- Design professional development and continuing education curricula to support CCHCs
- Establish a CCHC scope of practice and/or professional standards
- Provide opportunities for CCHCs to conduct self-assessments to identify strengths and priorities for improving their knowledge and skills

- Align the competencies with existing standards or regulations, such as state child care licensing regulations, QRIS, or professional accreditation standards
- Guide ECE program directors and family child care providers in selecting and using a qualified CCHC and understanding the benefits of collaborating with a qualified CCHC
- Incorporate CCHCs into quality improvement initiatives
- Develop levels of proficiency to differentiate between basic aptitude and higher levels of expertise among CCHCs
- Identify areas of collaboration and avoid duplicate services by other consultants who work in specialized areas within the ECE system, such as infant and early childhood mental health or nutrition consultants [xii](#), [xiii](#)

The competencies are not a replacement for local, state, territorial, or tribal CCHC competencies, guidelines, performance measures, or regulations. They can supplement existing efforts to build a qualified CCHC workforce, or they may guide new efforts to support the CCHC workforce.



## ACKNOWLEDGMENTS

The National Center on Early Childhood Health and Wellness developed the competencies collaboratively. The Center is a collaboration between the American Academy of Pediatrics; Georgetown University's Center for Child and Human Development and National Maternal and Child Oral Health Resource Center; Education Development Center, Inc.; the Health Care Institute at the University of California Los Angeles' Anderson School of Management; Child Care Aware of America; the National Resource Center for Health and Safety in Child Care and Early Education; and Zero to Three.

The Center is jointly administered by the Administration for Children and Families, Office of Head Start in partnership with the Office of Child Care, and the Health Resource Services Administration, Maternal and Child Health Bureau, Division of Home Visiting and Early Childhood Systems.

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The competencies align with the evidence-based best practice standards in the [\*Caring for Our Children \(CFOC\) Standards Database\*](#). Throughout this document, *CFOC* refers to the *CFOC Standards Database*, which includes the most up-to-date version of each *CFOC* standard. The national CCHC training curricula developed by the National Training Institute for Child Care Health Consultants served as important source material for the competencies.

This resource was prepared under Grant No. 90HC0013-02-00, a cooperative agreement of the Office of Head Start, Office of Child Care, and the Maternal and Child Health Bureau.

## 1. CONSULTATION SKILLS

### COMPETENCY 1A. Understands the role of the CCHC

The CCHC understands the need for and qualifications of a CCHC, including how to comply with state, local, tribal, and agency-specific regulations (*CFOC* [1.6.0.1](#)).

#### APPLICATION

- Describes the best practices of the CCHC role consistent with state, local, territory, and/or tribal laws and regulations
- Demonstrates an understanding of health, safety, and wellness in the context of ECE settings
- Follows all applicable professional and ethical standards for CCHCs and those relevant to the CCHC's professional licensure
- Seeks ongoing professional development to enhance knowledge and skills related to the role of the CCHC
- Participates as a member of an interdisciplinary team of consultants, including education, mental health, and nutrition

### COMPETENCY 1B. Develops and executes a collaborative process for effective consultation

The CCHC works collaboratively with programs as equal partners to build their capacity to identify and resolve health and safety concerns and promote wellness.

#### APPLICATION

- Establishes a collaborative approach to consultation that recognizes the autonomy, strengths, and expertise of programs
- Works with programs to assess the current status of health, safety, and wellness practices and to establish goals for the consultation
- Promotes an approach to addressing health and safety concerns that reflects the strengths and needs of the program, staff, children, and families served

## 1. CONSULTATION SKILLS

### COMPETENCY 1C. Uses communication approaches that strengthen relationships

The CCHC uses culturally responsive and strength-based communication approaches that build the skills and expertise of others.

#### APPLICATION

- Seeks to understand the perspectives of others
- Communicates effectively with diverse audiences by using appropriate oral and written communication
- Gathers sufficient information about the participants' specific needs and expertise to support the consultation relationship
- Uses evidence-based communication strategies as appropriate, such as active listening and open-ended questions

### COMPETENCY 1D. Applies principles of health equity and cultural and linguistic competence to work with ECE programs, including staff, children, and families

The CCHC helps programs respond to the needs of staff, children, and families in a culturally and linguistically competent manner.

Review additional applications in competencies 4a – 5b.

#### APPLICATION

- Demonstrates an understanding of how one's own values, beliefs, assumptions, and experiences affect interactions with staff, children, and families
- Helps programs identify and adapt materials, curricula, and policies and procedures to reflect cultural variations in child-rearing and health and wellness practices (*CFOC* [2.1.1.7](#) and [2.1.1.8](#))
- Recognizes how power relationships and implicit bias<sup>1</sup> affect the consultation process
- Connects programs to community health resources (multilingual healthcare providers, medical interpreters, and translated materials) that can address families' health needs in their preferred language
- Works with programs to understand how health disparities affect health outcomes and identify opportunities to promote health equity<sup>2</sup>

<sup>1</sup> "Implicit bias" refers to attitudes or stereotypes about others that may unintentionally affect behavior toward certain groups of people.

<sup>2</sup> [Healthy People 2020](#) defines health equity as the "attainment of the highest level of health for all people."

## 2. QUALITY HEALTH, SAFETY, AND WELLNESS PRACTICES

### COMPETENCY 2A. Uses evidence-based instruments to assess the quality of health, safety, and wellness practices in ECE programs

The CCHC accesses a variety of objective, evidence-based instruments to use in ECE programs to identify areas of strength and areas that may need improvement.

Examples of assessment instruments include the [Health and Safety Checklist for Early Care and Education Programs](#), [NAPSACC Assessments](#), and the [ECELS Safety Checklist and Planning Tool for Active Play Areas](#).

#### APPLICATION

- Matches evidence-based assessment instruments to program priorities
- Trains staff to use instruments to assess the quality of their health, safety, and wellness policies and practices
- Demonstrates respect for programs when observing programs

### COMPETENCY 2B. Collaborates with ECE programs to improve the quality of their health, safety, and wellness practices

The CCHC and ECE staff use their mutual areas of expertise in developmentally appropriate health, safety, and wellness practices to identify and implement strategies to improve the quality of programs.

#### APPLICATION

- Helps programs align health, safety, and wellness practices with licensing regulations, the state quality rating and improvement system if available, developmentally appropriate practices, and best practice standards, such as CFOC and accreditation requirements
- Ensures programs have an effective record keeping system to support health, safety, and wellness (CFOC [9.4.1.2](#))
- Helps programs use data (such as injury and incident reports or absenteeism reports) to identify strengths and concerns and make improvements
- Works together with programs to prioritize quality improvement actions and set achievable goals to address concerns
- Observes intervention strategies and recommends changes when needed
- Helps programs ensure children have a primary care provider and are up-to-date on routine preventative health services
- Helps programs monitor children's health and development
- Assures that programs are able to support inclusion of children with special health care needs, disabilities, and chronic health conditions (also review competency 7a)

### 3. POLICY DEVELOPMENT AND IMPLEMENTATION

#### COMPETENCY 3A. Works with ECE programs to develop and review child care health policies<sup>3</sup>

The CCHC helps programs develop policies that describe what they will do to promote health, safety, and wellness.

#### APPLICATION

- Helps programs develop or revise policies to comply with regulations
- Encourages programs to develop policies that promote best practices such those listed in *CFOC 9.2.1, Model Child Care Health Policies, 5th edition (MHHCP)*, and the [CCHP Health and Safety Policies Checklist](#)
- Ensures policies address emerging health concerns and reflect the most current science-informed and evidence-based practices
- Reviews health policies after an incident has occurred, when programs change health policies, or at least annually (*CFOC 9.2.3.17*)
- Encourages programs to solicit broad input from all stakeholders when developing, adapting, or reviewing health policies
- Reviews policies to ensure they are culturally responsive and family-centered

#### COMPETENCY 3B. Works with ECE programs to develop procedures that outline the specific steps required to implement child care health policies

The CCHC and ECE staff use their mutual areas of expertise in developmentally appropriate health, safety, and wellness practices to identify and implement strategies to improve the quality of programs.

#### APPLICATION

- Helps programs determine procedures needed to effectively implement policies
- Collaborates with programs to identify the resources and support needed to fully implement each policy
- Supports programs' efforts to help families understand and adhere to program policies and procedures
- Observes procedures and helps programs make changes when needed

<sup>3</sup> According to Model Child Care Health Policies, a child care health policy is “a statement of what the program intends to do about any aspect of the program that affects the health (well-being) of children and adults who are involved with it. Minimally, it should address program compliance with applicable regulations.”



## 4. HEALTH EDUCATION

### COMPETENCY 4A. Identifies, designs, and implements health education

The CCHC provides and/or facilitates health education for staff, children, and families.  
The CCHC collaborates with staff to provide health education to children and families.

#### APPLICATION

- Assesses the need for timely health education within programs
- Helps programs identify or design up to date, science-informed health education materials
- Provides training on a wide range of health and safety issues relevant to staff, children, and families (CFOC 2.4.2)
- Helps programs provide developmentally appropriate health education to children
- Applies adult learning principles to the development and delivery of health education for staff and families
- Takes advantage of teachable moments to increase awareness and behaviors that support health, safety, and wellness
- Promotes staff modeling of healthy behaviors (CFOC 2.4.1)
- Follows up after implementing health education programs to assess learning and identify additional needs
- Connects staff to relevant continuing education opportunities that allow them to individualize their own learning

### COMPETENCY 4B. Works with ECE programs to build staff and family health literacy<sup>6</sup>

The CCHC works with programs to ensure that staff and families have health information they can understand and use to make informed decisions.

The [Health Literacy for Public Health Professionals](#) course from the Centers for Disease Control and Prevention explains the fundamentals of health literacy.

#### APPLICATION

- Strengthens the ability of programs to communicate accurate health information in ways staff and families can understand
- Ensures health policies and procedures are written in ways that staff can understand to promote effective implementation
- Helps programs identify strategies to engage staff, children, and families to promote healthy and safe behaviors (CFOC 2.4.3.2)

<sup>6</sup> [Health literacy](#) is “the degree to which individuals have the capacity to obtain, communicate, process, and understand basic health information and services to make appropriate health decisions” (Patient Protection and Affordable Care Act of 2010, Title V).

## 5. RESOURCE AND REFERRAL

**COMPETENCY 5A. Helps ECE programs make linkages to community resources that address the physical health, mental health, and social services needs of the program staff, children, and families**

The CCHC connects programs with community resources and expertise to enhance health, safety, and wellness services.

### APPLICATION

- Helps programs access appropriate resources to meet program and family needs
- Facilitates communication between programs and qualified specialists in fields such as mental health, early childhood education, disabilities, and nutrition (*CFOC* [1.6.0.3](#), [1.6.0.4](#), [1.6.0.5](#), [4.4.0.2](#))
- Helps programs maintain current records of contacts, agencies, and organizations in the community, state, or tribe that can support the health and wellness needs of the program and families served

**COMPETENCY 5B. Collaborates with ECE programs to ensure families are able to access services**

The CCHC plays a role in connecting families with community services, assistance programs, and resources to address their health, safety, and wellness needs.

### APPLICATION

- Identifies community service providers that can help families access health and social services
- Helps programs develop and maintain a current list of health care providers able to serve families
- Helps programs identify a staff member, consultant, or community resource to communicate with families whose preferred language is not English (*CFOC* [2.1.1.7](#))

## 6. ILLNESS AND INFECTIOUS DISEASES

### COMPETENCY 6A. Works with ECE programs to reduce the spread of illness

The CCHC helps staff and families implement preventive measures that limit the spread of infectious diseases<sup>4</sup> in ECE programs.

#### APPLICATION

- Helps staff apply knowledge about how diseases spread, infectious diseases that are common in ECE programs, and steps to take to reduce the spread of disease
- Assists programs with implementing and monitoring strategies to reduce illness, such as handwashing, gloving, diapering, cleaning, sanitizing, and disinfecting procedures (*CFOC 3.3.0.1, 3.2.1.4, 3.2.1.5, 3.2.2.1, 3.2.2.2, Appendix D, J and K; MCCHP 7A, B, and E*)
- Assists programs with implementing and monitoring Standard Precautions (*CFOC 3.2.3.4*)
- Models healthy behaviors and supports staff in teaching and modeling healthy behaviors for children, such as proper handwashing, and cough and sneeze hygiene
- Helps programs work with families to keep children fully immunized (*CFOC 7.2.0.1, Appendix G; MCCHP Appendix W*)
- Helps programs understand the importance of appropriate staff immunizations and encourages staff compliance (*CFOC 7.2.0.3, Appendix H*)
- Works with programs to implement a daily health check (*CFOC 3.1.1.1; MCCHP 1C, 10A, Appendices M, N*)
- Ensures programs have access to current and evidence-based materials about infectious disease

<sup>4</sup> “Infectious” means capable of causing an infection. Other common terms are “contagious” (when germs can be spread to others) and “communicable” (can be transmitted to others), but all three terms essentially mean the same thing: a disease that can spread from one person to another (see the American Academy of Pediatrics curriculum: Managing Infectious Diseases in Early Education and Child Care Settings).

## 6. ILLNESS AND INFECTIOUS DISEASES

**COMPETENCY 6B. Helps programs use current, evidence-based criteria for identifying, caring for, and excluding children who are ill and for identifying staff who are ill and should not be working**

The CCHC and ECE staff work together to determine when children require exclusion and how to care for them before a parent or guardian can pick them up. The CCHC also helps programs determine when staff require exclusion.

The CCHC helps programs determine control measures for infectious disease outbreaks.

### APPLICATION

- Encourages programs to use evidence-based criteria to make decisions about inclusion and exclusion of children and staff who are ill (*CFOC* [3.6.1.1](#), [3.6.1.2](#))
- Helps programs determine steps to take when a child shows signs of illness (*CFOC* [Appendix A](#))
- Helps programs identify and prioritize situations that require immediate medical attention and those that require emergency medical services (*CFOC* [Appendix P](#) and [A](#); [MCCHP 11A, B, and D](#))
- Helps programs ensure that staff and families understand how to identify signs and symptoms of common childhood illnesses
- Helps programs know how to respond when a child or staff member has been diagnosed with a reportable disease<sup>5</sup>
- Helps programs manage responses to infectious disease outbreaks (*CFOC* [3.6.1.1](#); [MCCHP 11C and E](#))

<sup>5</sup> All U.S. states require reports of specified diseases, food borne illness outbreaks, and extraordinary occurrences of illness to the Local Health Authority. The purpose of disease reporting is to recognize trends in diseases of public health importance and to intervene in outbreak or epidemic situations. Child care programs should report any occurrence of a reportable disease to their specified health authority. Consult your state's health department for a list of reportable diseases and information about how to report.

## 7. CHILDREN WITH SPECIAL HEALTH CARE NEEDS

### COMPETENCY 7A. Collaborates with programs and families to support the care and inclusion of children with special health care needs and/or chronic physical health or mental health conditions

The CCHC supports programs and families to ensure that children with a special health care need and/or chronic health condition have full, safe inclusion in the ECE program (*CFOC Chapter 8; MCCHP 10E*).

#### APPLICATION

- Keeps up-to-date on relevant knowledge to serve as a resource on caring for children with special health care needs and/or management of chronic health conditions
- Helps programs understand how to meet their responsibilities to provide services in accordance with the [Americans with Disabilities Act \(ADA\)](#)
- Supports programs in planning for and fully accommodating children with special health care needs including chronic physical health and mental health conditions so they can be included in all possible activities (*CFOC 8.2.0.1, 8.2.0.2*)
- Collaborates with programs to develop and implement individualized healthcare plans in partnership with the child's family, health care provider, and identified specialists, if applicable (*CFOC 3.5.0.1, 8.4*)
- Connects programs and families with resources for children with special health care needs and/or chronic physical health or mental health conditions
- Supports transition planning between the ECE settings and kindergarten

## 8. MEDICATION ADMINISTRATION

### COMPETENCY 8A. Helps ECE programs safely manage medication administration and medical procedures<sup>6</sup>

The CCHC ensures staff have the training, knowledge, skills, and competency to safely manage medication administration and medical procedures.

When necessary, the CCHC helps programs make connections with specialists who can provide training, consultation, and monitoring to meet the needs of children with a range of health conditions.

### APPLICATION

- Helps programs develop policies and implement procedures for medication administration (*CFOC 3.6.3.1, 3.6.3.2, 3.6.3.3; MCCHP 10F, Appendix X*)
- Provides and/or supports training in medication administration and medical procedures in the context of state regulations and applicable professional practice acts
- Helps programs set up a system to ensure that emergency medications are accessible at all times
- Identifies consultants with specialized skills who can support staff caring for children with special health care needs (*MCCHP 10E*)
- Supports ongoing monitoring of medication administration and performance of medical procedures (*CFOC 3.5.0.2*)

<sup>6</sup> Medical procedures include tube feedings, endotracheal suctioning, supplemental oxygen, postural drainage, catheterization, checking blood sugars, or any other special medical procedures children may need routinely or on an urgent basis. See *CFOC 3.5.0.2* for details about caring for children who require medical procedures.

## 9. SAFETY AND INJURY PREVENTION

### COMPETENCY 9A. Collaborates with ECE programs to promote safety and reduce injuries

The CCHC assesses and identifies injury hazards indoors, outdoors, and in and around vehicles. The CCHC helps programs promote safety by understanding how the interaction between children, adults, and the environment may contribute to injury risk.

Competencies 12a and 12b include information on preventing and responding to child abuse and neglect.

#### APPLICATION

- Helps programs implement safety practices through planning, policies, and procedures ([MCCHP 5C and D](#))
- Provides [training](#) to staff and families about [common injuries](#) and [injury prevention](#) for infants and children
- Helps staff use evidence-based checklists to assess and monitor [indoor](#) and [outdoor environments](#) for hazards associated with these injuries
- Helps programs determine how to respond when safety risks are identified
- Ensures use of safe and developmentally-appropriate equipment, including furniture, toys, art supplies, and playground structures and surfacing that comply with safety standards, such as those set by the [Consumer Product Safety Commission](#) and [ASTM International](#)
- Assesses sleep areas and procedures to ensure safe sleep practices ([CFOC 3.1.4](#); [MCCHP 6A and B](#))
- Connects programs to training and resources on safety in and around vehicles, including selecting and installing child passenger safety seats
- Helps programs ensure families understand their safety policies and procedures

### COMPETENCY 9B. Promotes active supervision practices

The CCHC helps programs create a safe environment and prevent injuries by ensuring that staff are [actively supervising](#) the children in their care at all times. The CCHC helps the program with active supervision training, implementation, and monitoring ([CFOC 2.2.0.1](#)).

#### APPLICATION

- Reviews and revises policies to ensure they include assignments for supervision, monitoring, and contingency plans to maintain developmentally appropriate child-to-staff ratios
- Supports programs in implementing supervision strategies in all indoor and outdoor settings, including vehicles in programs that provide transportation, and during transitions
- Collaborates with programs to plan environments to allow for visibility and responsive caregiving
- Encourages programs to perform ongoing observations of staff to ensure active supervision is being implemented consistently
- Helps programs develop strategies to minimize staff distractions

## 9. SAFETY AND INJURY PREVENTION

### COMPETENCY 9C. Helps programs with planning and response to injuries

The CCHC collaborates with ECE programs to ensure staff are trained in how to identify and respond to injuries.

#### APPLICATION

- Helps programs know how to respond in the event of an injury, medical emergency, or an unresponsive child
- Helps programs identify situations that require immediate medical attention and those that require emergency medical services (*CFOC [Appendix P](#)*)
- Connects programs with local resources for attaining CPR, choking response, and first aid training



## 10. EMERGENCY PREPAREDNESS, RESPONSE, AND RECOVERY

### COMPETENCY 10A. Helps programs prepare for, respond to, and recover from emergencies and disasters

The CCHCs works collaboratively with programs to develop an [emergency preparedness, response, and recovery plan](#). The CCHC helps programs develop relationships with relevant community partners to support emergency preparedness, response, and recovery.

### APPLICATION

- Helps programs identify types of emergencies for which the program should prepare
- Encourages programs to include emergency preparedness and response information in training for all adults including staff, substitutes, consultants, and volunteers
- Ensures programs align emergency preparedness planning with state/tribal and local disaster plans
- Helps programs develop [written plans](#) for responding to emergency situations or natural disasters that may require evacuation, lock-down, or sheltering in place ([MCCHP 13](#), [Appendixes EE, FF, GG](#))
- Helps programs regularly practice and document the practice of evacuation, lockdown, and shelter-in-place procedures, and modify as needed
- Connects programs to community resources and services to help with training and assistance in preparing for, responding to, and recovering from emergencies
- Helps programs address the needs of infants and toddlers and children with special health care needs or disabilities in their emergency preparedness plans
- Supports programs during recovery after an emergency or disaster to assess the environment for safety risks and support staff, children, and families

## 11. INFANT AND CHILD SOCIAL AND EMOTIONAL WELLBEING

### COMPETENCY 11A. Collaborates with ECE programs to create an environment for children that promotes positive social and emotional wellbeing

The CCHC assists programs to support children's executive functioning, self-regulation, and developmentally appropriate relationships with other children and adults.

Research Connections' Child Care and Early Education Glossary includes definitions of these terms.

#### APPLICATION

- Reviews written discipline policies and observes procedures to ensure they align with positive guidance principles (*CFOC 9.2.1.6, 2.2.0.6; [Positive Behavior Support and The Pyramid Model](#)*)
- Identifies factors that enhance children's social and emotional wellbeing
- Matches programs with community resources, including mental health consultation

### COMPETENCY 11B. Helps ECE staff respond to social and emotional and behavioral concerns

The CCHC connects programs to resources and strategies to assess and appropriately address social and emotional and behavioral concerns.

#### APPLICATION

- Helps identify possible underlying health problems that contribute to social and emotional and behavioral issues and assists with appropriate referrals
- Works with staff to develop a method for observing and documenting information about social and emotional and behavioral concerns (*CFOC [2.1.1.4](#)*)
- Supports staff in finding compassionate ways to share information about social and emotional and behavioral concerns with families
- Helps programs access mental health consultation to prevent suspension and expulsion of children with challenging behaviors (*CFOC [1.6.0.3, 2.2.0.8](#)*)
- Connects programs with mental health consultants who can address the effect of [adverse childhood experiences](#) (ACEs) on children's wellbeing and who can provide guidance on [trauma-informed practices](#)

## 12. CHILD ABUSE AND NEGLECT

### COMPETENCY 12A. Collaborates with programs to prevent child abuse and neglect

The CCHC helps programs implement measures that build protective factors known to reduce child abuse and neglect.

Find out more about preventing child abuse and neglect in the [Federal Child Abuse Prevention and Treatment Act \(CAPTA\)](#) and [The Role of Professional Child Care Providers in Preventing and Responding to Child Abuse and Maltreatment](#).

#### APPLICATION

- Helps programs implement strategies to identify risk factors and strengthen protective factors for children and families to help prevent abuse and neglect (*CFOC 1.4.5.2, Appendix N; MCCHP 14, Appendix HH*)
- Observes and helps programs address staff behaviors or environmental conditions (such as the facility layout or obstructed visibility within a classroom) that could increase the risk for abuse and neglect within the program (*CFOC 3.4.4.5, 2.2.0.6*; also review competency 16b for applications related to reducing staff stress)
- Helps programs develop training for staff and families on the prevention of shaken baby syndrome and abusive head trauma
- Helps programs maintain a current list of community resources for staff and families such as mental health consultants, child protection, and/or family violence hotlines and services (*CFOC 9.4.1.6*)
- Works with programs to understand different family approaches to caring for their children (for more information, review [Cultural Competence: Child Abuse and Neglect](#))

### COMPETENCY 12B. Supports programs in identifying and reporting suspected child abuse and neglect

The CCHC helps staff integrate strategies for recognizing signs and symptoms of abuse and neglect and is knowledgeable about reporting requirements.

Each state, territory, and tribe has laws related to reporting suspected cases of child abuse and neglect.

Learn more about abuse and neglect reporting laws and procedures in [Responding to Child Abuse and Neglect](#) from the Child Welfare Information Gateway.

#### APPLICATION

- Provides training to staff on how to recognize signs and symptoms of all types of abuse and neglect (*CFOC 3.4.4.1, Appendix M*)
- Helps programs implement and monitor strategies that support early identification of signs and symptoms of abuse and neglect, such as the daily health check
- Ensures program staff are aware of their role as mandated reporters and how to report suspected abuse and neglect
- Develops and/or reviews policies regarding reporting abuse and neglect in alignment with mandated federal, state, territorial, and tribal laws (*MCCHP 14*)
- Supports staff who are making a report of suspected abuse and neglect (for example, by connecting them with a child welfare agency representative who can explain possible outcomes and next steps)

## 13. NUTRITION AND PHYSICAL ACTIVITY

### COMPETENCY 13A. Provides guidance to programs on best practices in nutrition and feeding for infants and children

The CCHC supports programs in ensuring access to nutritious food and mealtime practices and environments that are safe and developmentally appropriate for children.

[MyPlate](#), [CFOC Chapter 4](#), and [NAPSACC](#) include details about nutritious food and mealtime best practices.

#### APPLICATION

- Demonstrates understanding of nutritional needs and safe feeding practices for healthy growth and development in infants and children
- Helps programs with development and implementation of written nutrition plans and procedures to meet programmatic needs  
([CFOC 9.2.3.11](#), [4.2.0.1](#); [MCCHP 4](#))
- Observes programs for implementation of food safety and sanitation practices, including food selection, storage, preparation, meal service, and clean up
- Helps programs [encourage and support breastfeeding](#) for young children in their care and ensure safe handling and storage of breast milk ([CFOC 4.3.1.1](#), [4.3.1.3](#), [4.3.1.4](#), [Appendix JJ](#))
- Works with programs to maintain a safe and developmentally appropriate physical and emotional environment at mealtimes that does not use food to bribe, reward, or punish
- Collaborates with programs, caregivers, and health care providers to develop individualized feeding plans and dietary modifications for children with special health care needs, food allergies, or other health conditions ([CFOC 4.2.0.1](#), [4.2.0.8](#), [4.2.0.10](#))
- Connects programs, as appropriate, to community agencies, the state's [Child and Adult Care Food Program](#) (CACFP), nutritionists, or registered dietitians to provide nutrition services and consultation
- Helps programs identify resources to address families' nutritional needs including food security and provide breastfeeding support

## 13. NUTRITION AND PHYSICAL ACTIVITY

### COMPETENCY 13B. Works with ECE programs to ensure all children have daily opportunities for physical activity

The CCHC works together with programs to ensure staff are able to provide infants with sufficient opportunities for physical activity throughout the day, and toddlers, preschool, and school-aged children have opportunities for moderate to vigorous physical activity.

#### APPLICATION

- Helps programs understand how physical activity contributes to maintenance of healthy weight and development of gross motor, social and emotional, and cognitive skills
- Collaborates with programs to develop written policies for the promotion of active indoor and outdoor physical activity (*CFOC* [9.2.3.1](#); [MCCHP 5](#))
- Works with programs to identify and remove potential barriers to indoor and outdoor physical activity (for example, by ensuring children and staff have appropriate clothing and shoes)
- Helps programs integrate developmentally appropriate physical activity into children's daily routine, including outdoor play and indoor structured and free active play, and tummy time for infants (*CFOC* [3.1.3.1](#))
- Ensures staff receive [training opportunities](#) to learn about age-appropriate gross motor activities and games that promote children's physical activity and limit screen time and other digital media (*CFOC* [2.2.0.3](#), [3.1.3.4](#))

## 14. ORAL HEALTH

### COMPETENCY 14A. Collaborates with ECE programs to promote oral health

The CCHC ensures staff have the knowledge and skills to promote oral hygiene within the programs, connect children to oral health services, and provide education to families.

Learn more about best practices in the *CFOC* Special Collection: [Oral Health in Child Care and Early Education](#).

### APPLICATION

- Helps programs develop and implement oral health policies and procedures that include care of infant's oral health, [infants who are teething](#), [daily tooth brushing](#) in the classroom, preventing injury in the classroom, and preventing tooth decay (*CFOC* [3.1.5.1](#), [3.1.5.2](#), [9.2.3.14](#); [MCCHP 10B](#))
- Reviews nutrition and food service policies and procedures to ensure they promote good oral health, such as proper use of bottles for feeding infants and limiting sugar-sweetened foods and beverages (*CFOC* [4.3.1.8](#); [MCCHP 4](#))
- Educates staff about the link between children's oral health and development and the importance of primary teeth
- Helps staff understand how to identify oral health concerns in children
- Ensures staff are prepared to respond to dental emergencies
- Ensures staff are able to connect families to community resources that provide oral health services, including fluoride varnish and other prevention strategies, as needed
- Helps programs access oral health educational materials for families

## 15. ENVIRONMENTAL HEALTH

### COMPETENCY 15A. Collaborates with ECE programs to reduce exposure to environmental health hazards

The CCHC works with programs to identify, prevent, and manage exposure to environmental health hazards in and around the facility.

Learn more about hazards and strategies to reduce them in the *CFOC* Special Collection on [Environmental Health in Early Care and Education](#), the Environmental Protection Agency's resources on [Healthy Child Care](#), and the Agency for [Toxic Substances and Disease Registry](#).

### APPLICATION

- Demonstrates understanding of the effects of exposure to environmental health hazards on children's health
- Works with programs to coordinate [environmental health assessments](#) (*CFOC* 5.1.1.5)
- Helps programs identify nontoxic or least-toxic products for their environment (*CFOC* 4.3.1.3, 4.3.1.5, 4.5.0.2, 5.2.9.7, 5.2.9.9, 5.3.1.4, 6.4.1.2, [Appendix J](#))
- Helps programs develop policies and procedures related to use and storage of hazardous and toxic substances (*CFOC* 5.2.9.1; [MCCHP 8](#))
- Helps programs develop policies and procedures related to [integrated pest management](#) to reduce exposures to pesticides and harmful substances (*CFOC* 5.2.8.1)
- Helps programs develop policies related to assessing and managing indoor and outdoor air quality (*CFOC* 3.1.3.3, 3.4.1.1, 5.2.1.1, [Air Quality Index](#))
- Refers programs to community resources that can assist with identification and remediation of environmental health hazards (*CFOC* 5.2.6.3, 5.2.9.4, 5.2.9.6, 5.2.9.13)
- Helps programs consider how to reduce environmental health hazards when [planning for construction](#), remodeling, repairs, or purchases (*CFOC* 5.1.1.5, 5.2.9.15, 5.3.1.1)
- Identifies [educational materials](#) for staff and families about environmental health hazards

## 16. STAFF HEALTH AND WELLNESS

### COMPETENCY 16A. Helps ECE programs implement measures to prevent and manage occupational hazards for staff

The CCHC helps programs develop policies and procedures to protect staff from injury and illness. Competencies 6a, 6b, 9a, and 9c also include information preventing and managing illness and injury.

#### APPLICATION

- Helps programs develop and implement staff health and safety policies in accordance with [OSHA regulations](#), the [Americans with Disabilities Act](#), and best practices, such as the *CFOC* standards (*CFOC Appendix B, 1.7.0.3*)
- Helps programs identify procedures to ensure staff health that include review of health appraisals and immunizations (*CFOC 1.7.0.1, Appendix E*)
- Helps programs monitor procedures to ensure staff are protected from blood borne pathogens by implementing annual [Standard Precautions training and a program-specific exposure control plan](#) (*CFOC 3.2.3.4*)
- Helps programs develop procedures for staff to safely use toxic substances (*CFOC 5.2.9.1, 5.2.9.3*)
- Helps staff identify practices to support proper body mechanics (*CFOC 5.3.1.7*)
- Helps programs educate staff on best practices for preventing illness and injury, including risks to staff who are pregnant (*CFOC 2.4.2.1, 1.7.0.4, 7.7.1.1*)

### COMPETENCY 16B. Helps ECE programs identify opportunities to promote staff wellness

The CCHC encourages programs to promote wellness by creating an environment that enhances workers' physical and mental health.

#### APPLICATION

- Supports programs' efforts to provide accommodations for staff with allergies, special health needs, and who are pregnant or breastfeeding (*CFOC 1.8.1.1*)
- Advises programs on enacting a comprehensive program for stress management and reduction (*CFOC 1.7.0.5*)
- Connects programs to resources and training to promote staff wellness and resilience
- Encourages programs to consider strategies to help staff feel valued, respected, and comfortable discussing concerns
- Helps programs promote staff health through nutrition and physical activity
- Helps programs maintain and promote a current list of community resources (or an employee assistance program) that can help staff address issues related to health, mental health, substance misuse, financial stability, food security, housing, and domestic violence



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This document is supported by the Administration for Children and Families (ACF) of the United States (U.S.) Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$7,582,500 with 97% funded by ACF and 3% by the Health Resources and Services Administration (HRSA) of HHS. The contents are those of the author(s) and do not necessarily represent the views of, nor an endorsement by, ACF/HHS or the U.S. Government. This resource may be duplicated for noncommercial uses without permission



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