Day Care Homes Can Foster Children’s Health

BY ALBERT CHANG, M.D.

Family day care homes provide most of the care, not given at home or by relatives, for infants and young children in the United States. It is not known exactly how many children are cared for in this type of setting but it is estimated that for every child enrolled in a day care center, there are two to three being cared for in a family day care home. This number will probably be increasing, as there is a significant nationwide trend toward using family day care to meet the growing need for child care.

Given that a large number of children, perhaps several million, are cared for in this setting, what is known about the health and health services needs of children in family day care? Unfortunately, very little, and for this reason, in 1976, I surveyed 70 family day care homes listed in the 1975 edition of the Berkeley Guide to Child Care. My findings indicated that the health services available in these homes left much to be desired and that there were many unmet needs in a number of important health areas. Below are some recommendations for improvement.

Child Health Supervision. Every child cared for in the family day care home should have a health folder containing (a) name, address, and telephone number of regular physician or medical clinic; (b) telephone number where parent or guardian can be reached in case of emergency; (c) consent form signed by parent or guardian for emergency treatment (see Figure 1); (d) health history, physical examination and routine laboratory test results provided by regular physician or medical clinic within the past 12 months; (e) any special instructions for management of chronic health conditions, e.g., medication, diet, etc.

It is important that the immunization schedule (shown in Table 1) be up to date and that the results of health screening tests be recorded in the health folder as they are taken. This is especially important when borderline results occur. In such cases, the parents, family day care provider, and physician should plan and carry out additional testing as soon as possible. The health screening tests recommended in Table 1 are available free to Medicaid children through the Early and Periodic Screening Diagnosis and Treatment program (EPSDT) in every state except Arizona. In California, a recent law mandates a health assessment for all young children at the time of school entry.

Because continuity is so important, the health folder should accompany the child whenever he or she is transferred to a new care setting. This would provide helpful health information on the child to the caregiver and eliminate the need for her to repeat requests for health history, physical examination, immunizations, and health screening tests.

Emergencies and First Aid. Every...

Setting an example for the rest of us, children in family day care in California use doctors' tools to check each others' health.
TABLE 1

Health Supervision Schedule for Infants and Preschool Children

<table>
<thead>
<tr>
<th>Procedure</th>
<th>3 wks</th>
<th>2 mo.</th>
<th>4 mo.</th>
<th>6 mo.</th>
<th>9 mo.</th>
<th>12 mo.</th>
<th>15 mo.</th>
<th>18 mo.</th>
<th>2 yr.</th>
<th>3 yr.</th>
<th>5 yr.</th>
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Instructions

Health history, nutritional & developmental assessment
Child care, diet, growth & development, discipline, accident prevention, school readiness, etc.
Pediatrician or Pediatric Nurse Practitioner
DPT & Polio (2 mo. 4 mo. 6 mo. 18 mo. 5 yr.), Measles, Rubella, Mumps (15 mo.)
Head circumference measured in first year only
Always repeated after iron therapy
Performed if low hematocrit is found
Protein, sugar, blood & pH
When indicated may be performed annually
When indicated may be repeated 1 month later
Ewing test
Pure tone audiometer
Children with environmental risk only
After age 3 yrs., annual checkup

FIGURE 1

CONSENT FORM FOR EMERGENCY MEDICAL TREATMENT

In case of a medical emergency occurring while my child is in the family day care home, I would like to request the following procedure:

1. Contact Parent: Home Number: ____________________________
   Work Number: ____________________________
2. Contact Child's Doctor: Name of Doctor: ____________________________
   Office Number: ____________________________
3. Arrange for emergency medical treatment after above.

I hereby give permission and consent to follow the above procedure in case of an emergency. ____________________________

(name of provider)

Parent's Signature: ____________________________
Date: ____________________________

TABLE 2

Articles In First-Aid/Emergency Kit

1. Bandages (Assorted sizes)
2. Sterile cotton gauze (Assorted sizes)
3. Syrup of Ipecac (1-ounce bottle)
4. Rubbing Alcohol
5. Tourniquet to stop bleeding
6. Scissors
7. Airway (Assorted sizes)

Nutrition. All recommendations and guidelines for nutrition services and nutrition education proposed for day

family day care home should be prepared to deal with emergency situations such as accidents, serious injury, falls, convulsions, poisonings and other ingestions, and fire. Fire drills in family day care homes are almost nonexistent and this is unfortunate, as advance preparation and a well-planned course of action can prevent serious injury and possibly save lives. The telephone numbers for the fire department, the police, and the ambulance, as well as the nearest poison control center* should be readily available. Another important telephone number is the U.S. Consumer Product Safety Commission in Washington, D.C. (The toll-free number is 800/648-266.)

At least one adult caretaker should have instruction in the first-aid procedures taught by the Red Cross, YMCA health departments, and community hospitals. Every family day care home should also have a first-aid/emergency

*The Directory of Poison Control Centers, which lists them by state, is available from the Food and Drug Administration, 5401 Westbard Avenue, Bethesda, Maryland 20016.