FROM THE DIRECTOR

There is no question that the child care profession has challenges. These challenges come in many forms. Personnel issues consume a great deal of a center director’s time. Family and group home providers often have similar personnel problems, but on a smaller scale. You want to pay staff a worthy wage, but if you raise your prices too much, you risk losing your families. You recognize that trained staff and quality child care go hand-in-hand, but struggle with staff coverage when you send some of your staff to training. The children you care for may also present challenges: Children with special needs; children with challenging behaviors; aggressive and withdrawn children; children that take you to the end of your rope! There are probably times when working with the Office of Children and Adult Licensing is challenging.

We all have challenges every day. It is how we approach and deal with the various challenges that sets some people apart from others. Do you use challenging times as an excuse to give up and stop trying, or do you welcome challenges as opportunities to come up with creative solutions, new and, perhaps, even better ways of dealing with problems. My hope is that you see the many challenges you face daily in your work with children as fresh opportunities to improve your skills, your interactions with children and parents, and ultimately, your child care business.

One of the challenges family and group child care home providers are now facing is a new set of administrative rules. To help home-based providers better comply with the new rules, we will be using the next several issues of Michigan Child Care Matters to address some of the questions that are being raised about various rules.

Please take some time to review the responses; they should enable you to better comply with the rules.

Remember, too, that a technical assistance document is available online, with rationales, technical assistance, and consultation on many of the new rules.

This issue of Michigan Child Care Matters has a number of articles that will provide you with important information on some of the unique challenges caregivers often face. I hope you can use this information to help you grow as a child care professional.

James S. Sinnamon, Director
Division of Child Day Care Licensing

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ADVANTAGES OF BEING A MEMBER OF AN ASSOCIATION
Karen Eaton, Executive Director UAW-GM CDC
Roberta Cox, President of GCCDA

When you work with children all day in your home or center, it is refreshing and helpful to have the opportunity to talk to grown ups! The experience feeds your sense of well-being and self esteem. Sharing stories of fun experiences and funny things children say, means laughter and smiles, and we all know how important this is in our lives. Sharing ideas, suggestions, and yes, complaints, provides opportunities for area child care providers to brainstorm solutions to problems that are faced each day. Working together as a group with people who share a similar profession provides understanding and support. Time with people who understand the day-to-day decisions that are made and the effects they have on the families they serve, helps us renew our energy for a new day.

Associations provide a solid support system in generating ideas about how to make life as a child care provider easier. An Association can promote quality child care services by providing area child care homes and centers with available resources and trainings, aid providers in developing quality child care settings. When you are a member of an association, you become more aware of trainings that are available and can often share costs of trainings with other child care providers.

Other ways members of organizations share costs is by purchasing consumable materials (paper, paint, etc.) together to take advantage of bulk rates. Some groups have organized ways to save on health insurance costs. All of this helps parent fees stretch farther and programs become stronger.

When the Child Care Association becomes known in the community, it can serve as a resource of information by providing new information regarding best practices, fresh ideas and the latest research as it becomes available. It allows members to be in the know.

The advantages of being a member of an association far outweigh the time and effort it takes to participate. Come and join and be part of the group! ✡
Joey’s Junction serves as one of the most unique child care centers in the nation. Currently, we serve children within our Head Start, child care, and respite programs. While Head Start and child care are well-known, respite care is a growing need in Michigan. Respite care is occasional care of a child, so that the family can have a much needed break from caregiving. Frequently, respite care helps keep special needs children living at home. Sometimes, if respite care is not available, the burden is too much for family members. We provide respite care for dozens of children, some daily, some weekly, others monthly or even less often. Although there are challenges, the benefits are amazing.

As the director of a center that serves special needs children, some issues need to be considered. First, your staff has to be specially trained, so that they can understand and be successful when working with children with special needs. Second, staff must pay careful attention to ratios, which differ from state child care licensing laws. Third, the environment needs to be very carefully considered. Fourth, centers that provide respite care must be able to meet the needs of families, who might need care at unusual hours.

Directors need to consider the needs of all the children at the center. If the center or home provider has children with special needs, it is important to make sure that their needs are accommodated. For instance, children with autism often need a space that is apart from the noise that typically inhabits a child care center. Having a quiet room, or even a quiet corner with large pillows and bean bag chairs would help a child who needs a quiet area to relax. Being able to meet the needs of the children will also help staff members avoid difficult situations.

With that in mind, it is important for staff to undergo training that most other child care staff do not have or need. I recommend that all staff members who interact with special needs children go through specialized training that includes classes such as how to follow a behavior treatment plan, how to appropriately restrain someone in order to protect others, and that will also teach adaptive feeding techniques.

While child care centers in Michigan have to follow state guidelines for child to staff ratios, centers offering respite care have several sets of ratios that need to be followed. Children who need respite care receive funding so that their families can have a break from daily caregiving. Many of those children need one on one care, and centers must staff accordingly. Some of the children who receive respite care services do not need such intense supervision. This group of children may be accommodated in a group of three children to one adult.

Frequently, children with special needs also have sensory issues: certain materials feel uncomfortable to them, such as tags on clothing. Other times, certain smells will trigger an “episode.” Sometimes, the need to chew on paper products is very intense. Centers that accommodate children with sensory concerns must be cognizant of that. Papers hanging from the ceiling might be too tempting for a child who likes to chew on paper. Painting with shaving cream might be too strong of a smell for some children. An alternative, such as painting with Cool Whip, might be more appropriate.

Centers that provide respite care services should be able to meet the needs of their families who often need care at unusual times. For instance, families often want respite care on Sundays, so that the rest of the family can attend church services. Sometimes, families need to go to a wedding, and their special needs child would have a hard time with the noise and activity. Instead of missing the event, the family seeks to use respite caregiving. Sometimes, families just need to take a break, and go out to dinner and a movie. Centers that offer respite services must be able to accommodate the needs of the clients, which are varied.

Overall, many challenges are presented when a child care center or home day care begins to accept children with special needs. Staff need to be specially trained and willing to learn how to adapt what they are already doing to meet the needs of all children. Ratios need to be accommodated. The environment needs to be meticulously checked, to make sure that special needs children feel welcome. Hours of operation need to be
Is your program full? Like many programs, you may not have the enrollment you had in the past. You may be wondering what happened to all the kids and how to boost enrollment in your program. This article is intended to shed some light on the situation and offer suggestions on how to build enrollment through marketing.

Although the number of child care providers in mid-Michigan has remained consistent, the number of women working has increased. Logically, it would seem that there would be fewer spaces available in child care programs. However, more people are working non-traditional hours and seeking a combination of care. Those who use formal child care may choose to combine a part-time program with relative care to save money. Relative care is increasing. Some parents are choosing to work alternate shifts during these difficult economic times.

How can your program compete for the children needing care? Consider many aspects of marketing: the needs of today’s workforce, advertising, your initial phone call with a family, the family’s visit, how to keep the family loyal once they are enrolled.

Are you meeting the needs of today’s workforce?
- Because of the current trends, look at your program to see if you can meet the needs of today’s workforce. Determine who your competition is, and what the needs are in your area. Your local child care resource and referral agency may be able to help
- Set your marketing goals.
- Check the hours you are available, the ages of children you accept and your policies. Are they family friendly?
- Find a marketable niche for your program. For example, offer extended hours, provide transportation or offer special programs/events.
- Develop a marketing strategy to improve your ability to sell your program in today’s market.

How can you advertise your program?
Start with the basics and enlist the help of friends and the families in your care to add to your options. Sell yourself by mentioning your certificates, education, training and experience in your advertising. Sell the unique aspects of your program.
- Be sure your flyer and /or brochure look professional.
- Talk with the businesses and school personnel in your area. Find out their hours of operation. Let them know of your services and how you can meet their needs. Ask to post a flyer.
- Consider placing a sign in your yard. Check local zoning ordinances first.
- Distribute business cards to everyone you know.
- To encourage word-of-mouth advertising, offer incentives to the families in your program who refer another family.
- Network with other child care providers via the phone, Internet or through child care provider trainings. They may refer you when their program is full.
- Keep your vacancies updated at your local child care resource and referral agency.

The inquiry phone call:
First Impressions are lasting impressions. The initial inquiry phone call may be the critical first impression a family has of your program.
- When the phone rings, be friendly and courteous. Your goal for the inquiry call is to obtain information about the family, and set a time for a visit.
- Listen to the parent. What do they need? Can you accommodate their needs?
- Use the parent and child’s name in your conversation.
- Sell your program based on how you can accommodate their needs. Be honest.
- Explain how you will work in “partnership” with them to provide the best personalized care for their child by taking into consideration their child’s temperament, developmental stage, special needs and culture.
- Give the parent a choice of mutually convenient times to visit. If the family does not keep the appointment, call them to see if they need more information or if they would like to re-schedule a visit.
- Thank the parent for calling.
The visit:
This is the time for the parent and you to decide if your program is a good match for their needs. Be enthusiastic and prepared.

- Prepare for the visit in advance. Look at your home and center inside and out. What is the first impression of the setting? Is it warm and inviting to children and families? Invite a fresh pair of eyes to look too.
- Invite their child to join the other children in play or have toys available while you speak with the parent.
- Develop a photo album or scrapbook for the parent to see the types of activities you do with children. Describe how these activities will benefit their child personally.
- Be prepared to talk 50% of the time and listen 50%.
- Have a list of references ready.
- If the family is not ready to commit after the visit, let them know you will call them in a day or two to see if they have made a decision.
- If your program is not a good match for the family, refer the family to your local child care resource and referral agency for additional provider names.

After enrollment:
Marketing is an on-going process. It continues after your program is full and involves everything you do at your child care program. Setting clear expectations and developing a partnership with parents for the care of their children are important marketing goals. With clear expectations parents are not surprised with your policies or program. Developing a partnership lets the parents know you value their expertise and that you are committed to work together for the benefit of their children.

Special events such as open houses are wonderful. However, sometimes it is the little things you do for parents, such as a warm greeting and a cup of coffee in the morning, and regular communication about their child, that keeps parents loyal to your program.
Child care providers have a very important role in the building of primary relationships and promoting social and emotional well-being of the children in their care. At times, care becomes challenging to adults when infants, toddlers and young children are acting out with behaviors such as hitting, kicking, biting, screaming or engaged in excessive crying. Behaviors such as extreme sadness or not making friends are also worrisome. In an overtaxed child care system, many child care providers and parents are at a loss in terms of supporting the social and emotional well being of all children.

Far too often, the consequences for infants, toddlers and young children with challenging behaviors is expulsion from their child care setting. A national study on Pre-Kindergarten expulsion, led by Yale University Child Study Center researcher Walter S. Gilliam reports that there are more expulsions in Pre-K, than in all primary grades combined. Researchers have found that emotional, social and behavioral competence in early childhood predicts children’s academic performance as early as the first grade.

Michigan is making efforts to support its youngest children. In 1999, the Michigan Department of Human Services (DHS), Child Development and Care, entered into an interdepartmental agreement with the Michigan Department of Community Health (MDCH), to establish a CCEP initiative to support the mental health needs of young children being cared for by licensed child care centers, licensed group day care homes, registered family day care homes, day care aides, or relative care providers. Currently, 12 CCEP projects are supported covering 26 counties.

Child Care Expulsion Prevention Programs provide free on-site early childhood mental health consultation for parents and child care providers caring for children ages 0-5, who are experiencing behavioral or emotional challenges that put them at risk for expulsion from child care. CCEP aims to reduce expulsions, improve the quality of child care, and increase the number of parents and child care providers who successfully nurture the social-emotional development of infants, toddlers and preschoolers.

What do CCEP programs offer?
• Short-term child/family-centered consultation for children with challenging behaviors:
• Observation of the child at home and at the child care setting
• Functional assessment of a child’s behavior
• Individualized plan of service developed by a team
• Intervention (e.g., coaching and supporting parents and providers to learn new ways to interact with the child, providing educational resources for parents and providers, arranging for specialized evaluations, modifying the physical environment, connecting the family to community resources, providing counseling for families in crisis)

Programmatic consultation:
• Training for administrators, staff and parents
• Strategies and curricula to promote social-emotional competence
• Quality improvement activities
• Strategies to improve communication among administrators, staff and parents
• Support to promote the mental health of child care staff and parents

Why are CCEP programs needed?
• 60.9% of children under the age of six in Michigan require child care.
• It is estimated that only 12-14% of babies and toddlers enrolled in organized care programs nationally receive “good quality” education and care. Early care has a long lasting impact on how children develop, on their ability to learn, and on their capacity to regulate their own emotions.
• The prevalence of challenging behavior among infants, toddlers and preschool-age children in early care and learning settings ranges from 3-15%.
• Child care programs are expelling increasing numbers of children due to challenging behavior.

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WHY DO CHILDREN BITE AND WHAT CAN WE, AS PROVIDERS, DO?
Christina Jacobs, Home Child Care Provider
Wayne County

When biting occurs, no one is happy. There is the frustrated biter who can’t understand the social consequences, the victim who received the bite and the parents of both the biter and the victim.

When an incident occurs, it is important to step back and look at the possible causes for the biting. Then come up with a plan involving staff and parents to monitor situations that might give rise to biting again. This way, there is a chance that the caregivers can react proactively to the next incident, and perhaps redirect and channel the biter’s actions in a more socially acceptable way.

Common causes of biting in toddlers include:
- Teething
- Frustration, especially when fighting over toys
- Anger
- Tension
- Anxiety
- Excitement
- Hungry
- Tired

According to Care Connections, a provider resource in SE Michigan, some methods to help prevent repeat occurrences are:
- Try to directly observe what happens before the next biting attempt, to better understand why it’s occurring. A log may be kept to help detect a pattern.
- Minimize waiting times for children as much as possible.
- Keep a caregiver close to the biter at all times to intervene and redirect when biting is about to occur.
- Try to avoid using the word “bite” around the children, as it may create conditions for another incident to occur. Instead, say to the child, “your mouth hurts the other child.”
- Use puppets to role play situations and encourage communication.
- Talk to parents at enrollment about your methods and biting policy.
- If needed, hold a meeting with all parents to make them aware of biting behaviors, and to reassure them that it is not an unusual situation.
- Try to keep a daily routine that is predictable for the children.
- Learn the best way to communicate with the biter.
- Provide teething children with teethers, and also provide special baskets or cubbys with comfort items within reach for each child (favorite toy, picture of parent, etc).

All children need to be able to communicate. This is especially true for children who tend to bite others. Teach children to express their feelings with words rather than biting (telling others “NO,” “STOP”, “Mine,” “take turns,” etc). Also, encourage children to come to a caregiver when they are upset. Under no circumstances should a child benefit from biting and have their needs met.

The book “No Biting” by Gretchen Kinnell is a remarkable resource for understanding and dealing with biters. It provides a guide to help caregivers assist repeat victims of biters, a section on appropriate first aid, strategies on dealing with biters, and ways to develop policies about biting.

By working together with staff and parents, and by actively responding to each situation, it is possible to create an environment where children feel safe and know how to respond to each other by using their mouths for words, not bites. ❖
Teaching children not to be—or be victims of—bullies

Parents and teachers are sometimes reluctant to intervene in conflicts between young children. They don’t want to see children harm or ridicule one another, but they want to encourage children to learn how to work out problems for themselves. In such cases, adults have a responsibility to stop violence or aggression in the classroom or at home — both for children who demonstrate harmful behavior and for all other children. We can teach children not to take part in — or become victims of — bullying.

Children who demonstrate aggression, or “bully” other children may be unable to initiate friendly interactions, express their feelings, or ask for what they need. If these children do not improve their social skills, they will continue to have problems relating to peers throughout their lives. In addition, if other children see that aggressors get what they want through bullying, they are more likely to accept or imitate this undesirable behavior.

Young children who are unable to stand up for themselves are easy targets for aggressive playmates. These children inadvertently reward bullies by giving in to them, and risk further victimization. Adults do not help by speaking for victims and solving their problems for them. Children must learn that they have the right to say “No,” not only when they are threatened, but in a wide range of everyday situations.

The key to promoting positive interactions among young children is teaching them to assert themselves effectively. Children who express their feelings and needs while respecting those of others will be neither victims nor aggressors. Adults must show children that they have the right to make choices — in which toys they play with, or (within boundaries) what they wear and what they eat. The more children trust and value their own feelings, the more likely they will be to resist peer pressure, to respect warm and caring adults, and to be successful in achieving their personal goals.

How to teach children assertiveness skills:

- Demonstrate assertive behavior (e.g., saying “No” to another child’s unacceptable demands) and contrast aggressive or submissive responses through demonstrations. Let children role-play with puppets or dolls.
- Intervene when interactions seem headed for trouble and suggest ways for children to compromise, or to express their feelings in a productive way.
- Teach children to seek help when confronted by the abuse of power (physical abuse, sexual abuse, or other) by other children or adults.
- Remind children to ignore routine teasing by turning their heads or walking away. Not all provocative behavior must be acknowledged.
- Teach children to ask for things directly and respond directly to each other. Friendly suggestions are taken more readily than bossy demands. Teach children to ask nicely, and to respond appropriately to polite requests.
- After a conflict between children, ask those involved to replay the scene. Show children how to resolve problems firmly and fairly.
- Show children how to tell bullies to stop hurtful acts and to stand up for themselves when they are being treated unfairly.
- Encourage children not to give up objects or territory to bullies (e.g., say, “I’m using this toy now”). Preventing bullies from getting what they want will discourage aggressive behavior.
- Identify acts of aggression, bossiness, or discrimination for children and teach them not to accept them (e.g., say, “Girls are allowed to play that, too”).
- Show children the rewards of personal achievement through standing up for themselves, rather than depending on the approval of others solely.
Complaints and disagreements with parents are bound to happen every so often. But problems can be solved if the relationship between you and parents is good and communication is open.

**If you have a complaint or a problem**
- Bring it to the attention of the parent at a time when neither of you is tired and when you both have a free moment. If that time never seems to be available, set up an appointment.
- Talk in a polite, helpful manner. For instance, if Timmy always seems to be tired, it does not do any good to blame his parents for keeping him up too late. Instead, phrase your comments more positively and ask for the parent’s help or advice. “Timmy seems more tired than usual today. Has he had trouble sleeping?”
- It will be easier for parents to accept your complaint if they know that you see their child’s good points too. And remember to comment sincerely on helpful things the parents do for their child. If you let them know you think they are doing a good job, they may be more open to hearing your suggestions.

**When a parent comes to you with a complaint or disagreement**
- Listen carefully, not just for the words, but also for the feelings. Try not to react defensively or in hurt or anger. And never resort to name-calling or blaming. That only makes it more difficult to reach an agreement. Hear parents out. Remember, as your customers, they have a right to complain. Their comments may help you improve the quality of your services.
- Once the parent has finished talking, summarize what she has just said so that you can be sure that you understood her concern. Next share your thoughts and feelings about the problem so that the parent can understand your point of view. Together each of you can propose several solutions and try to reach an agreement. Try to be specific as possible about what you will do to remedy the problem.

**If problems cannot be solved**
If despite your best efforts things just don’t work out, don’t blame yourself. It may be the result of a personality clash, differences in beliefs about child rearing, or unrealistic demands made on you or the child. But this doesn’t mean that you are not god for the child—just that you and the client are mismatched. So refer the parent to the child care resource and referral agency, and keep your complaints confidential. Sharing the care of children with parents has more ups than downs. Developing a good working relationship early on and often leads to a close personal friendship that may last for years. Parents recognize that their child care provider is a special person who brings skill, professionalism, and love to each family and child that they serve.

**Solving Problems**
**Step 1: State the problem.**
*Provider:* Laura, I noticed that you picked Jon up late every day this week. If you will remember the mutual agreement you signed when Jon began coming here, you agreed to pick him up by 5:30 p.m.

**Step 2: Listen to the parent’s explanation.**
*Mother:* I’m sorry, but things have been so crazy at work. They are talking about layoffs, and I’m really trying to put in a little extra effort so that I don’t lose my job.

**Step 3: Check your understanding of the problem by summarizing.**
*Provider:* I see. So you are putting in extra time because you are worried about your job security. How long do you feel you will have to be staying late like this?
*Mother:* As long as it takes. It could be a few more weeks or months.

**Step 4: Share your thoughts and feelings about the problem.**
*Provider:* I can understand your dilemma. However, I really need to spend time with my family. Also we have

*Continued on next page*
evening activities like softball practice and church that we need to get to. When you pick Jon up so late, it really puts a hardship on my family.

**Step 5: Brainstorm some solutions.**
*Provider:* Let’s try to think of some solutions.

*Mother:* Well, I guess I could arrange for someone else to pick Jon up. My mother could do it on most evenings, I think.

*Provider:* You might also hire a teenager to watch Jon for about an hour. There are two teens next door that might be interested in the job. I’d be happy to introduce you.

*Mother:* What if I brought Jon early – around 6:15 a.m.? Would that be as much of an inconvenience for you? I’d be willing to pay extra.

*Provider:* I would be willing for you to bring Jon early, but it might be hard on him.

**Step 6: Try to reach an agreement. Be as specific as possible.**
*Mother:* I guess you’re right. Mornings are hectic enough already. So I guess we’re back to having someone pick him up.

*Provider:* Why don’t you check with your mother tonight and give me a call. If she doesn’t feel up to it, then I’ll make plans to introduce you to one of the teenagers next door tomorrow afternoon. If that doesn’t work out, then we will look at the early morning arrival idea again.

**Possible Problems:**
- Parents are divorcing or separating
- A parent always comes late to pick up a child
- A parent seems not to care about your program
- A parent loses his or her job
- You, the child care provider, get sick
- A child bites another child in your child care program
- You and the parent do not share the same values
- A parent doesn’t want their child to go outside in the winter
- A parent begins toilet training before a child is ready
- A parent is unhappy with messy art projects or muddy playgrounds

Play out possible problems with a friend. Be yourself, and have your friend play the parent. Try to be confident and fair as you handle each problem. How people hear information affects how they respond. When talking with parents about emotionally charged information, providers need to think about what they are likely to say before they say it. Think about other possible problems so that you will be prepared to discuss them calmly with the parent.

Some problems can be prevented with a Parent-Provider Agreement. Other problems will come up, even if you are well prepared. Some are just misunderstandings and others are disagreements.
- Discuss a problem when you and the parent are alone
- Talk in a polite, calm voice
- Try to find a way to work together
- Keep information about a child or family confidential.

Caring for Children with Special Needs
Cont’d from p. 3

reconsidered, possibly on a weekly basis. Yet, once these concerns are addressed, the finished product is wonderful: happy children interacting together, learning about their differences and, more importantly, their similarities.

Challenging Behavior in Child Care
Cont’d from p. 6

● Research shows that early intervention is the key to promoting social-emotional competence and school success among young children.

For more information about CCEP programs in Michigan contact Mary Mackrain, CCEP statewide technical assistant consultant, at (248)594-3250 or mackrain@aol.com.
Fingerprints
Q. Why do we need fingerprinting done at every renewal?
A. The fingerprint clearance is required by an amendment made to 1973 Public Act 116 last year. The new law requires the Office of Children and Adult Licensing (OCAL) to request a criminal history record check from both the Michigan State Police and the Federal Bureau of Investigation (FBI) prior to issuance of an original license, and prior to each renewal.

Q. Why can’t teachers use the fingerprinting they have done for their employment with the school?
A. 1973 PA 116 requires the criminal history records for child care licensees and program directors be requested by the Department of Human Services. In addition, the FBI does not allow the criminal record information it releases to one agency (school districts) to be shared with any other agency (OCAL).

Q. Why do I have to use Identix to get my fingerprinting done?
A. The Michigan State Police has recommended Identix as the vendor to perform the fingerprinting “livescans” because of their ability to provide service to all Michigan residents. Identix is familiar with the process OCAL has established for receiving the results of the livescan.

Q. What is ICHAT? Who needs to do it? How do we do it?
A. ICHAT is an acronym for Internet Criminal History Access Tool. ICHAT allows a person, for a fee, to access the criminal history of an individual within Michigan. An ICHAT clearance must be conducted on all center staff prior to employment. All current center employees must have an ICHAT clearance before January 1, 2007. Centers may require their employees to pay the ICHAT fee, usually $10.

Annual Training
Q. What type of training will count towards the “annual training hours” for child care homes?
A. Training topics may include, but are not limited to: Child development (language, social, emotional, physical, intellectual), programming for various age groups (math, science, dramatic play, and art), managing children’s behavior, health and safety issues, nutrition for young children, and caring for children with special needs. The rules also allow for training on administrative management for a child care business.

Q. I have a college degree (or college credits) in early childhood development. Do I still need to have 10 training hours every year?
A. Yes, regardless of past degree(s) and course work, every family home registrant and group home licensee is required to complete 10 clock hours of training each year. The same applies to every assistant caregiver who must complete 5 clock hours of training annually.

Q. What type of documentation will I need to confirm that I completed a training session?
A. Verification of participation in a training session may be a certificate, signed by the trainer or authorized individual, indicating the date and topic of the training, and the number of hours of the training. These certificates must be kept on file and presented to your consultant upon request. OCAL’s “Training Record” form (OCAL-4590) may be used to track training where no certificate was provided.

Q: Are family and group home providers required to have Adult CPR if they only care for children under 8 years of age?
A: Yes, because OCAL issues the license/certificate of registration for children from birth to 17 years of age and the children served can change at any time without notification to licensing.

Q: How do assistant caregivers obtain training on SIDS and Shaken Baby Syndrome?
A: Training resources for these topics include your local licensing office, OCAL’s Child Care in Michigan CD, local hospitals, health departments and libraries, on-line web sites and local 4C offices. The licensee or registrant may provide this training to her assistant caregivers using the resources noted above.

Continued on next page
Rule-related Questions

Q. I have been using my basement for child care; what do I need to do to make sure I comply with the new rules?
A. If you are using a window as the second exit from the basement, R 400.1943(11) requires that steps and a platform be in place as the means to reach the window exit. Ladders leaned against the wall and furniture placed under a window as a “step” are no longer acceptable. Licensees and registrants have until January 1, 2007 to make any changes needed to comply with this rule.

R. 400.1934(4) requires a radon test be completed, with the level of radon gas not to exceed 4picoCurries per liter of air. If radon levels exceed this amount, a corrective action plan, which includes the completion of a year-long “Alpha-track” test, must be submitted before OCAL will approve the basement for child use.

Q. Please clarify the 1:1 ratio rule regarding water activities.
A. One adult is needed for every child under 3 years of age who is in the water (pool, lake, pond). This rule does not apply to wading pools. Example: Six children, ages 1, 2, 2, 4, 5, and 8 are in care. If all of the children are in the pool, four adults would be required (one adult for each of the three children under 3 years of age, and one for the other three children - over 3 years of age - in the pool).

Q. What is a “land line” phone?
A. A line telephone is one that does not require electricity in the home to operate (e.g. does not need to be plugged into a electrical wall socket). A land-line based phone. These phones may be used as additional phones, but not in place of a land line phone.

Q. What kinds of locks are prohibited in the escape path?
A. Double cylinder locks are prohibited on doors used as primary exits from the home. A double cylinder lock is one that requires a key to open the deadbolt lock from the inside. Deadbolt locks are separate from the locking mechanism found in most door knobs. A deadbolt is often activated by turning a separate knob or using a key. The rules do not prohibit all deadbolt locks, just those requiring an inside key to engage and disengage the lock.

Q: If the handwashing sink for diapering is located in the bathroom which is off the kitchen, where should the diaper changing area be located?
A: R 400.1923 only requires that diapering and handwashing not be in the food preparation or meal service area (e.g. kitchen, dinner area, etc.). A bathroom off the kitchen is acceptable for handwashing. The diapering area can be in the bathroom or anywhere, other than the kitchen, that there is a nonabsorbent surface. The rule requires the diaper changing surface to be easily sanitized. Surfaces that are acceptable are bathroom countertops or floors, laundry room countertops, the top of a washer or dryer, or any other nonabsorbent surface. A diaper changing table is another acceptable option. The surface must also have a diaper changing pad placed on top of the nonabsorbent surface to allow both the surface and the pad to be sanitized. A carpeted floor or piece of furniture is not an acceptable surface because it cannot be sanitized.
PROFESSIONAL DEVELOPMENT OPPORTUNITIES

National Head Start Association
Annual Training Conference
May 10-13, 2006
Marriott Detroit Renaissance Center
Detroit, MI
(703) 739-0875; www.nhsa.org

Early On Annual Conference
May 11-12, 2006
Eberhard Center, Grand Valley State University
Grand Rapids, MI
(866) 334-5437
http://eotta.ccresa.org/Calendar/event.php?ID=707

Michigan After-School Collaborative Conference
Michigan Department of Education
May 11, 2006
Kellogg Center, Michigan State University, East Lansing
(517) 241-4290; stoela@michigan.gov

Birth to Three Institute, 10th Annual Conference
May 16-19, 2006
Baltimore, MD
(202) 638-1144
http://ehsnrc.org/activities/BirthToThreeInstitute.htm

National Institute for Early Childhood Professional Development
June 4-7, 2006
San Antonio, TX
(800) 424-2460
http://www.naeyc.org/conferences/institute.asp

Michigan Healthy Mothers, Healthy Babies Conference
June 7-9, 2006
Mt. Pleasant, MI
ptackitt@comcast.net

NAEYC National Conference and Expo
November 8-11, 2006
Atlanta, GA
(202) 232-8777
http://www.annualconference.naeyc.org/

Supporting Families with Infants, Toddlers, & Young Children Conference
Michigan’s 5th Biennial Statewide Conference on the Early Years;
November 13-15, 2006
Amway Grand Plaza
Grand Rapids, Michigan
Contact: Tricia Headley, Conference Coordinator

National Training Institute - Zero to Three
December 1-3, 2006
Albuquerque, NM
(202) 624-1760
http://www.zerotothree.org/nti/

High Scope Conference and Training Opportunities
www.highscope.org
(734) 485-2000 ext. 234

The Barry-Eaton District Health Dept. will be conducting environmental health training for licensed child care facilities in these two counties starting this spring and summer. This training may be counted towards the new annual requirement for licensed child care homes.

The primary focus of the training will be:
- Safe Food Practices
- Personal Hygiene
- Responding to health concerns
- Providing a Safe Environment
- Public Health Awareness

If you are interested in attending or hosting a training workshop please contact Dur Efaw at the Barry-Eaton District Health Dept. by calling (517)-541-2629 or e-mail at defaw@hline.org.
RESOURCES: CHALLENGES OF CHILD CARE


Michigan Association for the Education of Young Children, www.miaeyc.org

Michigan Community Coordinated Child Care Association, www.mi4c.org

MSU Extension, http://fcs.msue.msu.edu


CONSUMER PRODUCT SAFETY COMMISSION
INFANT/CHILD PRODUCT RECALLS (not including toys)

The recalls have been added since the last issue:

- Simplicity Cribs with Graco Logo
- Ace Han Baby Walkers
- Bike Pro Inc. Baby Walker
- SunTome Baby Walker
- Simplicity Inc. Recall Graco Branded Aspen Cribs
- Kids II Inc. Recall of Doorway Baby Jumpers
- Ideal Distributors Inc. Recall of Pacifiers
- Delta Enterprise Corp. Recall of Certain Cribs sold at Toys R Us stores
- Sycamore Kids inc. Expands Recall of Mountain Buggy Jogging Strollers

Details on these product recalls may be obtained on the Consumer Product Safety Commission’s website: www.cpsc.gov. To review the complete list, see the Child Care Licensing Division website at: www.michigan.gov/dhs (licensing/child day care).