



# Healthy Kids West Virginia

## West Virginia Child Care Nurse Health Consultants Newsletter

Volume 4, Issue 1



### The Period of PURPLE Crying—Understanding Baby's Cry

**By: Sarah Hicks, RN**

Healthy babies cry... sometimes A LOT! This frustrating period of crying early in a baby's life can be looked at as the Period of Purple crying, and it will come to an end. After 2 months, babies will begin to cry less each week. The letters of PURPLE can help you understand a baby's crying.

P – Peak of Crying – Baby's cries will peak in the first couple of months and then decrease.

U – Unexpected - Baby may cry at times that are unexpected and we may not understand why.

R – Resists Soothing – Baby may resist all efforts of comforting.

P – Pain-Like Face – Baby will sometimes cry as if in pain, but he/she isn't.

L – Long Lasting – Crying can last as much as 5 hours a day, or more.

E – Evening – Babies may cry more in the late afternoon and evening.

So what can you do to soothe a crying baby? Check and see if the baby is hungry, tired, or needs his/her diaper changed.

Walk and sing to the baby. Give the baby a warm bath. Hold the baby close to you.

Swaddle the baby. Allow the baby to suck on a pacifier. Sometimes the crying will stop, and sometimes it doesn't. If you find yourself getting frustrated, it is OK to put the baby down for a few minutes and just let them cry. Take this time to calm down.

This point of frustration is where some parents or caregivers may lose control and

shake the baby. Crying is the number one reason that babies are shaken! Shaking a baby is very dangerous and can cause blindness, seizures, death, and learning and physical disabilities. This is called Shaken Baby Syndrome.

As caregivers and parents, we need to share this information with families of new infants. We all need to understand that crying, though frustrating at times can be a normal part of infant development. If you are worried that something may be wrong, it is also appropriate to see if the baby can checked by a health care provider. The health care provider can ease your mind that the child is developing normally or help treat a condition if one is found.

Source: National Center on Shaken Baby Syndrome



### Inside This Issue:

**PURPLE CRYING** 1

**Celebrate the Non-food Way!** 2

**When is Diaper Rash a Medical Concern?** 2

**CFOC Highlight—Oral Health Policy** 3

**Chicken and Black Bean Smoky Skillet** 3

**Ask the Nurse—Too late for Flu Vaccine** 4

**May is National Better Hearing/Speech** 4

**Movement Ideas to Share** 5

**Get to Know your CCHC and Contact Information** 6



Any topics you would like to see or ideas you would like to share in the Healthy Kids West Virginia newsletter? Let us know by emailing or calling

Sarah, Glenna or Heidi. Our contact information can be found on the back page.

Any topics that you feel would make a great training? Feel

free to let us know. We are always looking for new ideas!

Feel free to make copies of this newsletter to distribute to other child care providers and parents.

Check out our website [www.wvearlychildhood.org](http://www.wvearlychildhood.org)

Food allergies affect millions of children in the United States. The chances that you will care for a child with a food allergy are greatly increasing. The most common foods that cause allergic reactions are: milk, eggs, fish, crustaceans, peanuts, tree nuts, wheat and soy. While avoiding these foods may be difficult to handle during daily activities, it can be even more challenging with parties and celebrations. Appalachian culture centers on food as an expression of celebration and comfort. It



can be a task for child care providers to provide a festive but safe environment for everyone to enjoy.



There are non-food alternatives for celebrations in the classroom. Focus on costumes or pictures representing what the celebration means to the children. Lessons about the culture and foods of various holidays can be taught by reading stories, dancing, performing puppet shows, and observing pictures. You can also share non-

edible treats such as books, stickers, or crafts. Be aware of hidden allergen ingredients that may be found in everyday classroom items such as finger paint (milk, egg whites), paste (wheat) and bean bags (beans, nuts, seeds). Most importantly, managing food allergies requires a team effort between staff and parents. Notify all parents of any class parties and field trips and review potential risks as well as a plan of action if an emergency does occur. Challenge yourself to be creative but safe when it comes to having fun in the classroom.

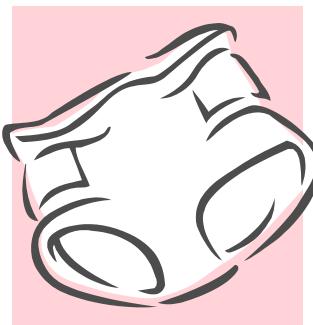
**Did You Know....** That metal water bottles are causing a new problem: kids getting their tongues stuck inside! While cases are rare, it has been reported with three different children across the United States. Doctors believe that when some children stick their tongues in to take a drink, it creates a strong suction—and since the metal bottle doesn't flex, the tongue begins to swell up inside. This can lead to suffocation or loss of tongue. Getting the bottle off requires special surgical tools. For more information check out: <http://todaynews.today.com>



## When is Diaper Rash a Medical Concern? By: Glenna Bailey, RN

Diaper rash is a common skin condition found under the diapers of babies. Diaper rash usually appears as bright red skin and is commonly treated with over-the-counter ointments such as Desitin. Occasionally though diaper rash is more serious and may warrant a trip to the doctor.

Diaper rash can be caused by several different things. The most common cause is irritation from stool and urine but there may be other reasons for the rash. The introduction of new foods may cause the nature and frequency of stools to change. An increase in the number of stools may lead to more irritation. Also the introduction of a new product such as detergent, diapers or fabric softener may cause a rash. Also tight fitting diapers could cause chafing and rubbing that could lead to a reddened area. Finally the use of antibiotics may result in depleting the bacteria that keeps yeast at bay and as a result cause a yeast infection.



Although most diaper rashes are minor and easily treated, there are certain circumstances that warrant a visit to the doctor. These would include rashes that are severe in nature or one that worsens in despite over-the-counter treatment. Also any diaper rash that is accompanied by a fever should be investigated by the physician. Any rash that develops blisters, boils, pus or weeping discharge may require prescription treatment.

The West Virginia Child Care Center Regulations allows the use of over-the-counter creams and ointments to be applied without a doctor's orders for five consecutive days in a thirty day period. Any use after that five days would need to be accompanied by written instructions by a licensed health care provider.

# Caring For Our Children - Standard Highlight! By: American Academy of Pediatrics

## Standard 9.2.3.14— Oral Health Policy

The program should have an oral health policy that includes the following:

Information about fluoride content of water at the facility;

Contact information for each child's dentist;

Resource list for children without a dentist;

Implementation of daily tooth brushing or rinsing the mouth with water after eating;

Use of sippy cups and bottles only at mealtimes during the day, not at naptimes;

Prohibition of serving sweetened food products;

Promotion of healthy foods per the USDA's Child and Adult Care Food Program (CACFP);

Early identification of tooth decay;

Age-appropriate oral health educational activities;

Plan for handling dental emergencies.



## Healthy Recipe – Chicken and Black Bean Smoky Rice Skillet

This recipe is delicious and kid-tested! My girls thought it was great. [http://picky-palate.com/2013/01/07/chicken-and-black-bean-](http://picky-palate.com/2013/01/07/chicken-and-black-bean-smoky-rice-skillet/)



Ingredients: 3 TBS EVOO, 1 1/2 cups finely chopped white onion, 2 cups sliced zucchini, 2 cups sliced yellow squash, 2 tablespoons minced garlic, 3 cups cooked shredded chicken, 15 ounce can black beans, drained, 6 cups prepared rice medley, 2-3 tablespoons ground cumin, 1 teaspoon kosher salt, 1/4 teaspoon freshly ground black pepper, 1/2 cup chopped parsley

### Directions:

Heat oil into a large skillet over medium heat. Sauté zucchini, squash, and onions until softened, about 5 minutes. Stir in garlic and cook for 1 minute. Add chicken, beans, rice, cumin, salt, pepper and parsley stirring to combine. Cook for 5 minutes or until hot.

This recipe was designed by "Picky Palate" Jenny Flake. Please visit her website or Facebook page for more great recipes, though I will say some of them aren't so healthy (but delicious too...) [www.picky-palate.com](http://www.picky-palate.com)



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

[www.wvearlychildhood.org](http://www.wvearlychildhood.org)

## Ask the Nurse... Is it too late to get a Flu Vaccine? By: Sarah Hicks, RN

Influenza can strike at anytime of year although "Flu Season" is generally considered to start in October and last through May. Many cases of Influenza occur between late December though March. It is NOT too late to get your flu vaccine especially since this year has shown to be one of the worst flu seasons we have had in quite some time. It can take up to 2 weeks for the vaccine to be at its peak effectiveness in your body, so try to schedule your appointment as soon as you can. It is VERY important to get vaccinated when your work with children or have children of your own. The complications of the flu could be like threatening for children, especially those that haven't been protected through vaccination themselves!



## May is National Better Hearing and Speech Month By: Heidi Zbosnik, RN

According to the Centers for Disease Control (CDC), 1 to 3 children per every 1,000 in the United States are born with hearing loss each year. Many children also experience mild, temporary hearing loss when fluid gets in the middle ear from allergies or colds. The American Academy of Audiology endorses detection of hearing loss in early childhood and school-aged populations. Learning to identify new or emerging hearing loss in one or both ears followed by the appropriate referral or diagnosis can help minimize these effects. Even if a child has passed a hearing screening before, it is important to observe for the following signs:



**Babies:** does not startle at loud noises; does not turn to the source of a sound after 6 months of age; does not say single words (dada or mama) by 1 year of age; turns head when seeing you but does not respond to name (this is often mistaken for ignoring); seems to hear some sounds but not others.

**Children:** speech is delayed; speech is not clear; does not follow directions; often says "huh?"; turns up the TV volume too high.

There are many causes of hearing loss in children. 50% to 60% percent of hearing loss in babies is due to genetic causes, 25% is due to a maternal infection during pregnancy, and another 25% is due to unknown causes.

Hearing loss can affect a child's ability to develop speech, language, and social skills. This could cause learning problems in school and can lead to poor self-esteem, if appropriate detection and treatment is not sought. The earlier children with hearing loss start getting services, the more likely they are to reach their full potential.

For more information and a printable fact sheet go to <http://www.cdc.gov/ncbdd/hearingloss/facts.html>

(Source: CDC.gov)



# Movement Ideas To Share!

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

## **Exploring Hoops—All Ages**

Place hoops on the ground indoors or outdoors. Let infant and toddlers discover and explore. Non-mobile infants can place objects inside, outside, under, or through the hoop. They can be touched, smelled, dragged, pushed, and lifted. Demonstrate simple activities. Roll the hoop along the ground or floor. Lift it over a toy. Stand it up so they can crawl through. Toddlers and Preschoolers can through bean bags through the hoop. Hold the hoop parallel to the ground and about 2 feet off the ground so children can toss a ball through it. Rise it higher or have the children stand farther away to make it more challenging. School age children can use it as a target to throw beanbags in.

## **Jump, Skip, Hop—Preschoolers and up**

Place 3 to 8 Hula Hoops in a row on the floor. Have the children jump from hoop to hoop all the way to the end. Next try skipping through, and then hopping through. Make a large circle of hoops when the children want to keep going round and round.



## **Circle Round the Waist—Toddlers and up**

Children and adults start “hooping” by circling the hoop around their waist while rocking front to back on their feet. When they feel ready, release hands and keep the hoop circling around their waist. Start with the hoop at the back of the waist, unwind and fling the hoop around the waist aka “Hula Hooping”



## **Thread the Needle—School-Age**

School-aged children can join hands with five or six other children and form a circle. Hang a hoop from one child’s arm. The child with the hoop starts by climbing through the hoop and passing it to the next child without letting go of their neighbor’s hand. Pass the hoop around the circle!



We'd like to thank our friends at the North Carolina Child Care Health and Safety Resource Center for coming up with these ideas about using Hula Hoops for fun! Check out their website and other resources at: [www.healthychildcarenc.org](http://www.healthychildcarenc.org)

**West Virginia Child Care  
Nurse Health Consultants**

**Glenna Bailey, RN**  
**611 7th Ave Suite 322**  
**Huntington, WV 25701**  
**304-972-6300**  
**gbailey@rvcds.org**  
**Covers Link, Connect,**  
**MountainHeart South**  
**counties of McDowell,**  
**Mercer, Monroe,**  
**Summers, Raleigh,**  
**Fayette and Wyoming**

**Sarah Hicks, RN**  
**8 Memorial Dr**  
**Parsons, WV 26287**  
**304-972-6200**  
**shicks@rvcds.org**  
**Covers MountainHeart**  
**North and**  
**MountainHeart South**  
**Counties of Braxton,**  
**Nicholas, Webster,**  
**Pocahontas, and**  
**Greenbrier**

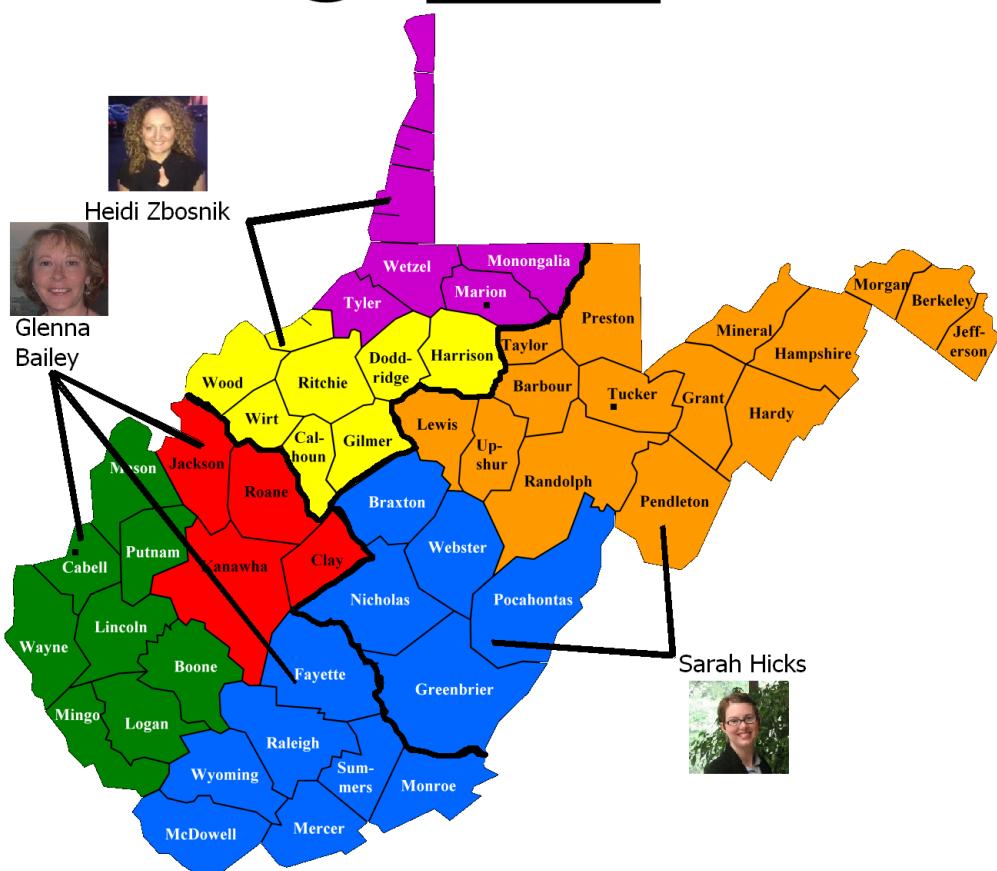
**Heidi Zbosnik, RN**  
**Cleveland Ave**  
**Fairmont, WV**  
**304-710-9065**  
**hzbosnik@rvcds.org**  
**Covers Choices and**  
**Child Care Resource**  
**Center**

[www.wvearlychildhood.org](http://www.wvearlychildhood.org)



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

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



**Meet Your Child Care  
Nurse Health Consultants!**