

WEST VIRGINIA  
EARLY CHILDHOOD  
**PROVIDER**  
QUARTERLY

**What is  
Professional  
Development?**

**West Virginia Quality  
Support Services**

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# ACDS News

Submitted by Sherrie Myers, ACDS State Coordinator

## ACDS Curriculum Pilot

Exciting news!! The ACDS State Coordinator, along with several professionals from across the state, have been working this summer to rewrite and update the ACDS curriculum to align with current research. The program will implement a pilot in select counties for first semester August 2015. The curriculum will focus on infant/toddler development in first semester and continue in part of second semester. Preschool development will be covered in second and third semester with school-age being the focus for fourth semester. The new curriculum is scheduled to be implemented across the state fall 2017.

The registered Apprenticeship for Child Development Specialist Program began in West Virginia and has now been adopted in more than 30 states around the country. In April of 1989, Dana Daughterty, the West Virginia State Director of the United States Department of Labor, Bureau of Apprenticeship and Training, had a vision. He approached Dr. Norma Gray, Director of River Valley Child Development Services in Huntington, West Virginia, about providing apprenticeship training opportunities for individuals in child care. Partnerships were secured with local and state programs to secure funds and develop a curriculum for the first class.

Since that time, the ACDS program has received national recognition and more than 4,000 young children and their families have benefited from state participation in the registered ACDS program.

For more information on the ACDS program, visit  
[www.wvacds.org](http://www.wvacds.org)





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Have a question? E-mail [Help@EarlyCareShareWV.org](mailto:Help@EarlyCareShareWV.org) for help.

# What Exactly is Professional Development?

Submitted by Natalie Snider, Distance Learning Statewide Coordinator

In the field of early childhood education, continued learning and improving of knowledge, skills, practices, and dispositions is often called professional development. When people use the term professional development, they often refer to an event like a conference or workshop; however, professional development happens in a variety of different formal and informal contexts, and it can also happen over a longer period of time.

Typically, early childhood education professional development includes one of three types of activities: training, technical assistance, or education. As shown in the graphic published by the National Association for the Education of Young Children (NAEYC) and the National Association of Child Care Resource & Referral Agencies (NAC-CRRA), professional development can be made up of one, two, or three of these activities. (Early Childhood Education Professional Development: Training and Technical Assistance Glossary, 2011). Considering the types of activities and the differences between each will help a professional determine what professional development is available, and which might be the best way to continue learning.

## Training

Most early childhood education profes-



sionals have some experience with participating in training. Training can be a one-time event or occur over multiple sessions. It should be delivered by professionals that have expertise in the training content, experience teaching adults, and meet certain qualifications (such as a WV STARS Credentialed Trainer). Typically, during training, professionals will be presented with new information and will be challenged to think about the information, why it is important, and how the new knowledge applies to each individual's work.

Training may be delivered through face-to-face, distance, technology-based, or hybrid methods and is measured by clock hours or CEUs.

Professionals may engage in either pre-service or in-service training. Pre-service training occurs before a professional begins a position. In contrast, in-service training is for professionals already employed to enhance skills and remain up-to-date on current research or practice.

### Technical Assistance

Technical Assistance, often referred to as TA, is different from training because the focus is about supporting a professional through a learning process. There are many types of technical assistance like mentoring, coaching, or consultation. TA can involve working with an expert in a specific subject matter, like a Nurse Health Consultant, or meeting with a peer that has similar professional experiences. What all forms of TA have in common is that the process will be customized to the individual or group and rely on building a trusting and respectful relationship. Because TA is customized, the length and intensity of technical assistance can vary.

Professionals engage in technical assistance while already working in early childhood education. This professional development is effective when an individual wants to gain knowledge, reflect on his or her own practice, and translate that into improving skills and knowledge. Because of the variation of the process, TA can be difficult to measure, but often contact hours can be awarded.

### Education

Early childhood professional development is considered education when it is offered through a state approved and nationally accredited school, college, or university. Often referred to as higher education, this type of professional development activity occurs between

faculty and students. Educational programs require the individual to show satisfactory performance by assessment to meet a specific standard of learning. Examples of education include completing a course at a community college or obtaining a degree from a university. Completion of education is measured in credit hours.

All types of professional development activities can be beneficial to an early childhood education professional. Depending on a professional's experience, goals, accessibility, and area of interest, the individual may choose to participate in many types of professional development throughout his or her career. Regardless of the kind, all professional development is a continuum of learning and is critical to prepare individuals for work with and on behalf of young children and their families, as well as ongoing experiences to enhance this work.

For more information about professional development terms, please access Early Childhood Education Professional Development: Training and Technical Assistance Glossary at [www.naeyc.org](http://www.naeyc.org).

### Resource:

National Association for the Education of Young Children, & National Association of Child Care Resource & Referral Agencies. Early Childhood Education Professional Development: Training and Technical

Assistance Glossary. (2011). Retrieved from [http://www.naeyc.org/GlossaryTraining\\_TA.pdf](http://www.naeyc.org/GlossaryTraining_TA.pdf)

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# Making the Most of Your Training Dollars

Reprinted with permission from Leadership Letter, SECA, Volume 6, Issue 4, July 2012



The field of early care and education is always evolving, meaning that it is important for you and your staff to participate in staff development and training to stay up-to-date with the latest information, ideas, and techniques. In addition to being a big responsibility, staff training is also a major investment. The money you spend on things like registration fees, travel expenses, paid time off the job, and training materials can add up quickly. Unfortunately, it can sometimes seem like all of the effort and expense was for naught when you realize that your staff either isn't using or has simply forgotten what they learned.

The good news is that it doesn't have to be that way. With some thoughtful planning and leadership, you can take steps to ensure that every dollar you spend on staff training yields meaningful results that lead your organization on the path to providing better care for the children and families you serve.

## **Identify Training Needs and Goals**

The first step to maximizing your staff training dollars is to find out what training you and your staff actually need. Different staff members will have different needs based on their positions and on their own strengths and weaknesses. Consider performing a classroom observation to determine what

type of training is needed. Set specific learning goals with measurable outcomes.

### Find the Right Training

Look for training that suits the individual learning styles of you and your staff. It may not always be practical to send everyone to different trainings, but when you can, do your best to accommodate individual learning needs. Reach out to local training organizations, consultants, and professional organizations to get information about training that fits your needs. Look for a reputable trainer or organization that you know provides useful and effective training.

### Take an Active Approach to Learning

People are more likely to understand and remember new information and skills when they actively participate in the learning experience. Before entering a seminar or workshop, define two specific things you want to learn about the topic. During the training, take notes and ask questions. If by the end of your training your two questions haven't been answered, ask the trainer. Immediately after the training, write down three main things you want to remember.

### Follow Through

Hold a staff meeting for everyone to share their training experiences and discuss ways to implement new strategies or change existing ones based on what

was learned. Within a day or two, begin implementing the changes. If necessary, post reminder notes.

### Follow Up

A week later, follow up with staff to check on progress and make any necessary adjustments. Continue following up as necessary to make sure the changes and improvements become permanent.

Source: "TIPS for Getting the Most Out of Training," Penn State Extension Better Kid Care Program, [www.betterkidcare.psu.edu/page06.html](http://www.betterkidcare.psu.edu/page06.html)



# Child Care Nurse Health Consultants

A Child Care Nurse Health Consultant works with child care providers to promote the health and safety of children in the child care setting. These consultants can provide expert guidance and technical assistance on a wide range of health and safety topics. Child Care Nurse Health Consultants have the training to access appropriate resources to assist child care providers in successfully including children with special health or medical needs.

All trainings are registered through WV STARS and are completely free to your program. The nurse health consultants have flexible schedules and can work with you to schedule trainings on a day and time that best meets your needs. Services and training topics (not an all-inclusive list) include:

- Help providers develop strategies for caring for children with special health needs
- Provide up-to-date information on the latest guidelines and policies regarding child health and safety
- Child Abuse and Neglect Prevention
- Communicable Diseases
- Infection Control
- Medication Administration
- Other health related topics

The Child Care Nurse Health Consultants are Glenna Bailey and Sara Bell. Glenna works in the southern half of the state covering the Connect, Link, and Mountain Heart South

regions. Sara works in the northern half of the state covering the Choices, Child Care Resource Center, and Mountain Heart North regions. For more information or to schedule/request trainings, you can contact them via email or phone:



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Health Consultants**

# Team Leadership: The Answer for Today?

Reprinted with permission from Leadership Letter, SECA, Volume 8, Issue 3, May 2015

We're entering a new era of organizational management, whether in a business or non-profit organization.

The "traditional" volunteer is changing and we're facing a new leadership group that may have very different perspectives and ideas about what employment or volunteering means.

If we're reaching out to the new generation (and it's critical for the survival of our organizations), the tried and true leadership roles won't necessarily work. The younger group wants:

- A well-defined mission and set of expectations.
- A leadership opportunity that is available more quickly and doesn't require "putting in your time" to reach that position.
- A volunteer opportunity that fits within their personal lifestyle.
- A leadership team that thinks outside the box and accepts change readily and easily.

The world is moving too quickly these days for us to remain "stuck" in a system because we've always done it that way. For many of us, we've moved through the ranks over a defined period of time. Younger members with the required skills want to have those opportunities presented more quickly and to feel that they have contributed to the mission of the organization.

Team Leadership is one of the variety of leadership theories that is being implemented on a much broader scale than in the past. This type of leadership means organizational groups that:

- Are independent
- Share common goals
- Coordinate activities to reach their goals

Many early care and education organizations rely on the standard board structure. We have the elected officers, representatives from different groups, and probably some type of committee structure. If we move toward team leadership, that traditional structure will no longer be viable, changes will occur in how the organization conducts business and the organization must ask itself these questions.

1. Does our leadership have the capacity to create those teams and allow them the autonomy to complete assigned tasks?
2. Is our leadership skilled in team dynamics and “letting go” of control in some areas?
3. Can our leaders support and nurture those teams to blend the old and new to accomplish a goal?

### **Characteristics of Effective Teams**

When looking at team leadership, it is very important to look at the characteristics that make those teams effective. These aren't so different from those that make traditional boards effective...They are just different in method and measurements.

#### **Characteristic 1: Teams are judged on outcomes and achievements, not process.**

Too often, we measure process (how things get done) rather than the outcome. Does it matter how we get there, as long as whatever system we employ gets us to the final destination? Obviously, the dynamics of teams rather than traditional groups can change the landscape of how a mission is achieved.

#### **Characteristic 2: The team sets clear goals and objectives and operates within a results driven structure.**

Without clearly defined goals and objectives, teams often flounder in trying to figure out what's expected of them. Strategic planning (setting those goals and objectives) is a critical part of the success of teams. Once a goal is defined, the team can begin to plan initiatives, programs, and activities that will meet that goal. The leader of the team expects results and will take actions to ensure that those results are achieved. (This may mean some difficult decisions in moving people into different positions that more clearly reflect their skills.)

#### **Characteristic 3: The team is made up of competent people who have the background and skills to achieve the goals and objectives assigned to the team.**

This team can operate in a collaborative manner, has a unified commitment to the team's goal, and has an integral role to play in developing the project/goal. Team members trust each other based on honesty, openness, and respect. Members are willing to take risks and know that they will not be penalized for taking those risks.

**Characteristic 4: The team has a leader that keeps them on a task.** This involves maintaining a collaborative climate, setting priorities, managing performance, and perhaps, subjugating an ego!

## **The Strengths and Challenges of Team Leadership**

As with any approach, the team leadership approach has both strengths and weaknesses. Because this approach is largely dependent upon the expertise and strength of the leader, groups must decide if the approach will work for them before implementation.

### **Strengths**

The approach is focused on real-life organizational work teams and the leadership needed to ensure the effectiveness of the team.

The approach provides a practical model that can be utilized to gauge organizational effectiveness.

The changing roles of leadership within the organization are taken into account.

Leaders are identified and matched to areas which highlight their strengths and knowledge.

### **Challenges**

Leading a team is much harder and more difficult than just telling people what to do. It requires a collaborative nature that allows other opinions and approaches to surface.

It's not clear cut and provides many avenues to resolve the problem. There are no specific answers to a specific question.

It provides a framework, not a roadmap. Leaders who have difficulty with change and a variety of options will struggle with teams.

Source: Leadership & Innovation: Team Leadership, [leadershiptheories.blogspot.com](http://leadershiptheories.blogspot.com)



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## Financial Assistance Available to Those Seeking Tier II or National Accreditation

### **Financial Assistance:**

Through the Quality Support Services project, West Virginia Early Childhood Training Connections and Resources (WVECTCR) provides financial assistance to West Virginia child care centers, family child care facilities, and family child care homes seeking Tier II Quality Status or national accreditation from an approved accrediting body, as part of the WV Tiered Reimbursement Program.

Currently, the National Association for the Education of Young Children (NAEYC) and the National Association for Family Child Care (NAFCC) are approved accrediting bodies.

Stipends will be issued for the following four categories of accreditation fees: self-study enrollment fee, application fee, candidacy/site visit fee, and annual report and renewal fees. Quality Support Services will reimburse for half of the costs of these fees.

### **Mentoring and Technical Assistance:**

Mentors and technical assistance are available to programs seeking a mentor to assist with the Tier II or accreditation process. You may request a particular mentor, or one may be assigned to you. Stipends will then be issued to mentors that complete an agreement to provide the following assistance:

- A minimum of one-full day, on-site visit for observation to evaluate the program's readiness to participate in the Tier II or accreditation process.
- Assistance to center director in organizing tasks and timelines involved in the Tier II application or accreditation process.
- Telephone consultation as needed for up to a one-year period.
- Bi-monthly contact with the center to encourage progress toward Tier II or accreditation.

**For more information, contact Elizabeth Teel at [Elizabeth.D.Teel@wv.gov](mailto:Elizabeth.D.Teel@wv.gov)**

# Safe Sleep **is** Simple

The **ONLY** place a baby should sleep is in a crib or bassinet

**YES**

Baby always sleeps in a smoke-free room

**YES**

Baby always sleeps alone, on her back and in her crib

**YES**

Baby has on only diaper, sleeper, & light blanket

**YES**

Crib is clear of toys, heavy blankets, bumper pads & pillows

**YES**

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# Incorporating Reflective Supervision into Effective Early Care and Education Practice

Submitted by Michelle Tveten Rollyson, West Virginia Infant/Toddler Mental Health Association

Early care and education practitioners are faced each day with many challenges while interacting with stressed children and families. Research indicates rising rates of abuse and neglect, poverty, substance abuse, and depression—all which affect school readiness, positive social behavior, and lifelong nurturing relationships. “These risk factors demand effective, evidence-based support for families and young children through quality early care and education—paired with targeted interventions when needed—all provided by well-trained, well-supported practitioners. These early childhood professionals (developmental specialists, early interventionists, home visitors, family educators, Head Start teachers, public health nurses, child welfare workers, and others) in turn require support and ongoing professional development to provide perspective, increase their skills, and avoid burn-out” (Cox, M., Harrison, M., & Neilson-Gatti, S. (2011). *Foundations for understanding a widely used practice: Elements that define reflective supervision*. Presented at 2011 League of States Retreat).

Incorporating reflective supervision into early care and education practice is a way to support practitioners who are exposed to the emotional content and difficult life experiences while working with children and families. “An ongoing

professional development process, reflective supervision provides a way for early childhood professionals to reach greater understanding of children and families, facilitating quality care, education, and intervention. Currently, the use of reflective supervision is growing rapidly, spanning multiple interventions and disciplines. It is theorized to improve staff training, competence, and morale, intervention efficacy, and ultimately child outcomes” (Cox, M., Harrison, M., & Neilson-Gatti, S. 2011).

## Reflective Supervision Defined

So what is reflective supervision? And how is it different from administrative supervision? Reflective supervision is a tool to guide early care and education professionals “to think about, understand, and put into perspective the information shared by families, the emotions experienced from that sharing, and the feelings generated from their own life experiences” (*Reflective Supervision: A Tool for Relationship-Based EHS Services*, pg. 1).

Reflective supervision is a parallel process, meaning the early care and education professional looks at the thoughts, feelings, and emotions of each person involved—practitioner and supervisor, practitioner and family, and child and family. It is critical to under-

stand how each of these relationships affects the others. During reflective supervision, the supervisor does not provide solutions to problems. Instead, through the respectful space created by reflective supervision, the staff member and supervisor mutually explore alternative solutions together.

The primary objectives of reflective supervision include the following:

- form a trusting relationship between supervisor and practitioner
- establish consistent and predictable meetings and times
- ask questions that encourage details about the infant, parent, and emerging relationship
- listen
- remain emotionally present
- teach/guide
- nurture/support
- apply the integration of emotion and reason
- foster the reflective process to be internalized by the supervisee
- explore the parallel process and allow time for personal reflection
- attend to how reactions to the content affect the process

In contrast, administrative supervision relates to the oversight of federal, state, and agency regulations, program policies, rules, and procedures. Supervision that is primarily administrative will be

driven to achieve the following objectives:

- Hire
- Train/educate
- Oversee paperwork
- Write reports
- Explain rules and policies
- Coordinate
- Monitor productivity
- Evaluate

Reflective supervision/consultation may mean different things depending on the program in which it occurs. Reflective supervision/consultation may be carried out individually or within a group. A reflective supervisor or consultant may be hired/contracted from outside the agency or program, and may be offered to an individual or group/team. If the supervisor or consultant is contracted from outside the agency or program, he or she will usually not engage in administrative objectives (unless it is clearly indicated in the contract.) If the reflective supervisor operates within the agency or program, they will most likely need to address reflective and administrative objectives.

#### Resources:

Cox, M., Harrison, M., & Neilson-Gatti, S. (2011). *Foundations for understanding a widely used practice: Elements that define reflective supervision*. Presented at 2011 League of States Retreat.

Early Head Start National Resource Center @ Zero to Three. Reflective Supervision: A Tool for Relationship-Based EHS Services. (2010).

## Defining reflective supervision in the context of your work

Reprinted from The Early Head Start National Resource Center

Reflective supervision is:

...because in work with children and families, you:

**Reflective.** Reflective supervision allows staff to take a step back from the work and examine it differently.

Work at a fast pace.

**Collaborative.** Reflective supervision is a time for supervisors and supervisees to consider the work together, share ideas, and think about possible next steps.

Might feel isolated.

**Regular.** Reflective supervision is a predictable time when staff and supervisors can meet to consider the work.

Never know what to expect.

**Relationship-based.** Reflective supervision offers a secure, consistent relationship in which staff can experience the trust, support, and respect they offer the families they serve.

Develop relationships with children and families that form the basis of your work with them.

**Focused on professional growth.** Reflective supervision supports staff--and supervisors!--in building skills important to their individual work.

Support children and families in building new skills.

**Strengths-based.** Reflective supervision helps staff identify their unique strengths and supports staff in applying their skills to the challenges of the work.

Identify and build on the strengths of children and families.

**Safe.** Reflective supervision provides a secure environment where staff can discuss the real challenges of their work and their own vulnerabilities in a way that supports growth.

Build an atmosphere of confidentiality, mutual trust, and respect.

**Individualized.** Reflective supervision is based in learning about each unique staff member and what is most helpful to them in their work.

Individualize your services to each child and family.

**Characterized by active listening.** Reflective supervisors listen intently to staff, paying attention to spoken language, and unspoken cues.

Give children and families your undivided attention, "listening" to what they tell you with their words, their voices, and their body language.

# Child Care Health Educators

Need more WV STARS credit? Want more trainings on child health? Then let the Child Care Health Educators from River Valley Child Development Services help. The Child Care Health Educators are a great resource for all child care centers. They provide trainings focusing on health, safety, and nutrition topics. All trainings are registered through WV STARS and are completely free to your program. The health educators have very flexible schedules and can work with you to schedule trainings on a day and time that best meets your needs. Some training topics (but not all-inclusive) include:

- Let's Make a Menu
- Being a Good Role Model
- Picky Eaters
- Kitchen Safety
- Understanding Special Dietary Needs
- Safe Sleep
- Keeping Kids Safe
- Bed Bugs and Beyond
- Play Hard
- Physical Activity

If you have a topic you want training on that is not on the list, feel free to request it!

The Child Care Health Educators are Renee Stonebraker and Kellie Smith. Renee works in the northern half of the state covering the Choices, Child Care Resource Center, and Mountain Heart North regions. Kellie works in the southern half of the state covering the Connect, Link, and Mountain Heart South regions. For more information or to schedule/request trainings, you can contact them via email or phone.



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# West Virginia State Training And Registry System



WV STARS announces the release of our new website  
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## Contact Us

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Phone 304.522.7827

Toll Free 855.822.7827

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[wvstars@rvcds.org](mailto:wvstars@rvcds.org)



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# Celebrating Connections Conference Joins with WV Home Visitation Conference

To enhance the growth and development of all professionals working with West Virginia children and families, the Celebrating Connections Conference and the West Virginia Home Visitation Conference will be merging into one dynamic, multi-discipline conference. This year, the conference will be from April 5-8, 2016, at the Charleston Civic Center. There will be a range of topics covered including:

- promoting partnerships/mobilizing communities
- health and wellness/nutrition
- safety
- special needs
- assistive technology
- positive behavior support
- leadership
- families
- curriculum
- infant/toddler
- technology
- infant/toddler mental health
- authentic assessment
- early readiness learning

These sessions will be delivered in a variety of formats (pre-conference seminars, one-day institutes, full day sessions, break out sessions, and keynote addresses).

Celebrating Connections began 19 years ago as a way to provide relevant information about practices, policies, planning, and research that enhances community partnerships and quality for all those working with West Virginia children and families.

Conference sponsors include:

- WV Department of Education/Office of Special Programs
- WV Department of Health and Human Resources/Office of Maternal, Child and Family Health/WV Birth to Three and WV Home Visitation Program
- WV Department of Health and Human Resources/Bureau for Children and Families/ Division of Early Care and Education
- WV Department of Health and Human Resources/WV Head Start State Collaboration Office

For more information, please visit [www.wvearlychildhood.org](http://www.wvearlychildhood.org). Conference programs will be mailed in January.

# Do you know a child who is not \*moving \*hearing \*seeing \* learning or \*talking like others their age?

By 3 months,

Does your baby...

- grasp rattle or finger?
- hold up his/her head well?
- make cooing sounds?
- smile when talked to?

By 6 months,

Does your baby...

- play with own hands/feet?
- roll over?
- turn his/her head towards sound?
- holds head up/looks around without support?

By 9 months,

Does your baby...

- sit alone or with minimal support?
- pick up small objects with thumb and fingers?
- move toy from hand to hand?

By 12 months,

Does your baby...

- wave goodbye?
- play with toys in different ways?
- feed self with finger foods?
- begin to pull up and stand?
- begin to take steps?

By 18 months,

Does your baby...

- cling to caretaker in new situations?
- try to talk and repeat words?
- walk without support?

By 24 months,

Does your baby...

- point to body parts?
- walk, run, climb without help?
- get along with other children?
- use 2 or 3 word sentences?

If you are concerned about your child's development, get help early.

**Every child deserves a great start.**

WV Birth to Three supports families to help their children grow and learn.

To learn more about the  
WV Birth to Three services  
in your area, please call:

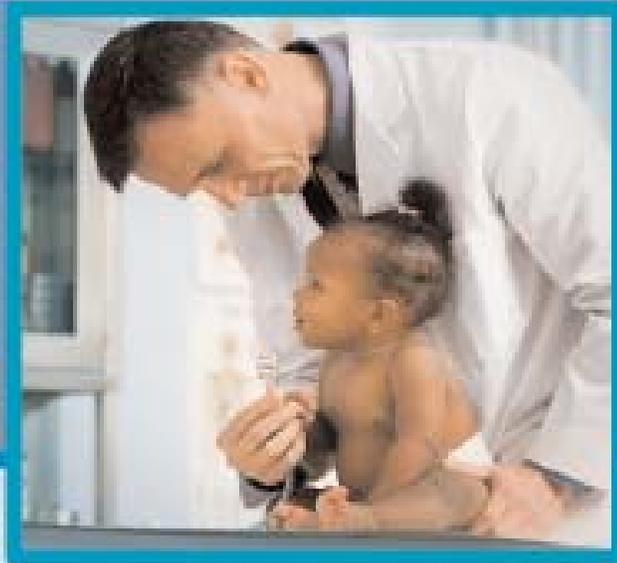
**1-866-321-4728**

Or visit [www.wvdhhr.org/birth23](http://www.wvdhhr.org/birth23)



WV Birth to Three services and supports are provided under Part C of the Individuals with Disabilities Education Act (IDEA) and administered through the West Virginia Department of Health and Human Resources, Office of Maternal, Child and Family Health.

**Help Me Grow**  
*Helps Parents, Kids,  
and Doctors!*



For information about your  
child's development, call us -  
**1-800-642-8522**



## Help Me Grow...

*Connecting BOTH parents and their kids' doctors to:*

- ✦ Free questionnaires such as Ages & Stages to see where your baby, toddler, or preschooler is developmentally
- ✦ Locate services in your nearby community from an up-to-date statewide database
- ✦ Speak with a care coordinator to schedule a developmental screening or specialized services
- ✦ Find hard-to-access services not readily available nearby



*In support of Help Me Grow  
and Thrive by Five.*

# Parent Blocks

## NEWSLETTER



"Providing resources to parents throughout West Virginia"  
Volume 12, Issue 4, Fall 2015

## The Importance of Professional Development

Just as children grow and develop, so too should the early care and education professionals who are with your child each day. Research demonstrates the vital importance of professional development of individuals providing early care and education experiences.

in their learning capabilities and their future success in life.

It is important for early care and education professionals to have clear professional development goals. Current research within the practice of early care and education has expanded a lot during the past several years. Professional development opportunities not only serve as a way for providers to access current research, but can also engage the early childhood provider in ways to integrate the new research into classroom settings.

There are many opportunities for professional development around the state--from on-site trainings, conferences, webinars, mentorship programs, and more. Encourage and support those who are engaging in professional development opportunities, even if that means the center is closed one or two days a year for staff training. Your child will thank you!

Regardless of where the child is (in child care, in-home family care, preschool, or a different arrangement), specific early experiences are documented to support children's optimal development. What we do or do not do for young children makes a difference

WV Parent Blocks Newsletter is a project of West Virginia Early Childhood Training Connections and Resources, a collaborative project of West Virginia Department of Health and Human Resources/Bureau for Children and Families/Division of Early Care and Education; WV Head Start State Collaboration Office; Office of Maternal, Child and Family Health/West Virginia Birth to Three; West Virginia Department of Education/Office of Special Education; and West Virginia Home Visitation Program and is supported and administered by River Valley Child Development Services.

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Visit our website at [www.wvearlychildhood.org](http://www.wvearlychildhood.org)

# The Early Care & Education Workforce

The early care and education industry supports an estimated 5 million jobs nationwide. Of this total, 2.3 million work with children under the age of five. The provision of early care and education services by an educated workforce positively impacts child outcomes both in the short-term and over a lifetime. Providing quality services also supports the economic needs of communities across the nation – allowing parents to work, adults to attend college or training and local businesses to operate.

## Who We Are

### The early care & education workforce...

- Is working in every state in America.
- Is mostly women, most of whom are mothers.
- Is very diverse -- both in terms of the age and ethnicity.
- Follows an ethical code of conduct and uses developmentally appropriate practices.
- Adheres to standards and guidelines to inform practice.
- Works long hours in challenging environments.
- Earns low wages in comparison to other professions with like education and responsibility.
- Has few benefits and is likely to be using a form of government aid.
- Wants to attend college and is likely to be a first generation student.
- Wants to increase its earnings and have a career in the field.

## What We Do

### The early care & education workforce...

- Enters the field from multiple entry points, with varying levels of education.
- Provides services for families with children ages birth to twelve in out-of-home settings.
- Works as teachers in a diverse array of settings from corporate programs and college campus settings to school-based pre-kindergarten programs, federally funded programs (Head Start) and home-based settings.
- Also works in government agencies, colleges and universities, non-profit organizations and private companies.
- Attends college part-time, while working full time – most often, after becoming employed.
- Expects professional recognition for the education earned.

## What We Need

### The early care & education workforce needs...

- Career guidance to learn about available opportunities.
- Planning tools to guide professional development.
- Access to information to make choices about which college will work best.
- Financial assistance to provide access to the college courses, credentials and degrees to improve knowledge and skills.
- Education that leads to better compensation that supports our families and retention in the profession.
- The public to understand why early care and education work is important to children, families and society.



A product of the  
T.E.A.C.H. Early Childhood® National Center

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

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# 10 Ways Families Make a Difference for Young Children



**I make a difference for young children in my family by...**

1. Ensuring they receive well-child checkups, dental, vision and hearing screenings and immunizations in a timely manner.
2. Providing them with nutritious meals and snacks and daily opportunities for physical activity and outdoor play.
3. Ensuring that they are always in emotionally and physically safe, violence free environments.
4. Promoting language and literacy by reading stories daily, going to the library regularly, using lots of words and asking them questions that begin with who, what, where, why or how?
5. Learning about and choosing a high quality early care and education program, if needed, and becoming an involved family by visiting, volunteering and participating in special events.
6. Learning about early brain development and the stages of growth and development.
7. Being actively engaged with my children, creating teachable moments in routine activities, turning off my phone and computer and enjoying time being together.
8. Modeling positive, appropriate behavior and recognizing them as they learn how to share, use inside voices, ask for help, are polite, etc.
9. Becoming an active advocate for community, state and federal resources that help young children and their families at this critical time in a child's life.
10. Snuggling with them and telling them how much they are loved.

# T.E.A.C.H. Early Childhood®

## *Transforming Lives and Creating Partnerships*



The early childhood workforce is significant and matters to our nation. An estimated 2.3 million early educators work in early care and education settings with young children ages birth to twelve across the country. Early educators are largely female, ethnically diverse, earn low wages and receive few, if any, employee benefits. Despite the need for early educators to be educated, they lack the resources to attain college credentials and degrees they need to provide critical services for children and families.

Child Care Services Association (CCSA) recognized many years ago that in order to provide quality early care and education services, the education, compensation and retention of the early childhood workforce would need to be addressed. With a bold mission to create a sustainable strategy to improve the education level of those working with young children in out-of-home settings, CCSA implemented the T.E.A.C.H. Early Childhood® (Teacher Education and Compensation Helps or T.E.A.C.H.) Project in 1990.

T.E.A.C.H. is a cost-sharing model that spreads the cost of higher education among the recipient, the employer and T.E.A.C.H. – providing early educators with funding needed to earn credentials and degrees at community colleges and universities, as well as paid release time and a bonus or a raise. Licensed organizations in states across the country implement the model to fidelity with the support of shared tools, technical assistance and training provided by the T.E.A.C.H. Early Childhood® National Center.

In its first year, T.E.A.C.H. served 21 early educators in North Carolina. Today, an average of 20,000 recipients are served annually in over 500 colleges and universities in 23 states and the District of Columbia. Nationally, over 120,000 recipients have benefitted from public-private partnerships between and among preschool, higher education and workforce development.

T.E.A.C.H. is a model that has created real change for real people working on the front lines of a critically important, but perpetually under-resourced industry. Over twenty years of steady, effective incremental growth have created an award-winning model and transformative results -- for the individual recipient, their families, their employers, the children in their care, the institutions of higher education where they learn, and the communities where they work and live --semester after semester.

CCSA is a private, non-profit organization whose mission is to ensure affordable, accessible, high-quality child care for all young children and their families through research, services and advocacy. Founded in 1974, CCSA utilizes diverse sources including the United Way, local, state and federal governments, foundation and corporate grants, employers, fees for services and its own fundraising efforts to improve the early care and education system serving young children ages birth to five in North Carolina and across the United States. To learn more about CCSA, visit [www.childcareservices.org](http://www.childcareservices.org).

### *Five Components*

Utilizing private-public partnerships, T.E.A.C.H. employs a multi-pronged, comprehensive strategy to educate and retain early childhood teachers, positively impacting outcomes for the children in their care. T.E.A.C.H. is comprised of four components:

#### **Comprehensive Scholarships**

*Provide support for early educators to access college courses, certificates and degrees in child development or early childhood education resulting in no student debt.*

**College Education** *Require completion of a specified number of credit hours per contract at a participating college or university coupled with support from T.E.A.C.H. counselors.*

**Counselor** *Support each recipient by providing a state-based T.E.A.C.H. Counselor able to assist the student in securing a scholarship, navigating the college processes, helping the student balance work, family and school and monitoring progress and needs.*

**Compensation** *Increase earnings through the provision of a bonus and/or a raise for recipients who complete their education in a prescribed period of time to support economic viability of staff.*

**Commitment** *Establish a contract between employee, employer and T.E.A.C.H. that requires the recipient to remain in the sponsoring program for a specified period of time (generally a year) after they receive their to reduce staff turnover.*

For the latest annual report and results, click:  
[www.childcareservices.org/ps/teach\\_ta\\_qac.html](http://www.childcareservices.org/ps/teach_ta_qac.html)



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**CCSA**  
helping  
families  
educating  
teachers  
supporting  
children