

Child Care Nurse Consultant (CCNC) Role Guidance to Achieve Performance Measures and Annual Performance Standards FFY2026

Healthy Child Care Iowa

The Iowa Department of Health and Health Services (HHS) Division of Family Well-Being and Protection, Child Care Bureau and the HHS Title V Child and Adolescent Health (CAH) program supports Healthy Child Care Iowa (HCCI) to improve the quality of health and safety in Early Care and Education (ECE) programs serving infants, toddlers, preschoolers, and school-aged children and their families.

The Child Care Nurse Consultant Role Guidance to Achieve Performance Measures and Annual Performance Standards document is a tool used to define the child care nurse consultant role, competencies, activities and performance measures.

Child Care Nurse Consultant (CCNC)

In Iowa, Child Care Health Consultants (CCHCs) are licensed registered nurses (RN) and are identified as Child Care Nurse Consultants (CCNCs). Child Care Health (Nurse) Consultants:

- Are health professionals with early childhood experience
- Have knowledge of child care practices, rules, and regulations
- Integrate health into early learning systems
- Help programs understand infant and early childhood development and a range of health topics
- Assess the health and safety needs of the early care and education program

Research has shown that high quality early care and education for young children improves physical and cognitive outcomes for children and can result in enhanced school readiness¹. When care is consistent, developmentally appropriate, emotionally supportive, and the environment is healthy and safe, there is a positive effect on children and their families². Child Care Nurse Consultants incorporate principles of health equity when working with ECE programs providing consultation, coaching, training, technical assistance, information and referral, as well as care planning for children with special health needs. The CCNC program is evidence-based and helps to ensure that children have access to healthy and safe care. In SFY2025, 58% of Iowa ECE programs participated with CCNCs at the local level³.

Research indicates that child care health (nurse) consultants support healthy and safe early care and education settings and protect and promote the healthy growth and development of children and their families⁴. Caring for Our Children: National Health and Safety Performance Standards Guidelines for Early Care and Education Programs (CFOC) provides a widely accepted definition of a CCHC as “a licensed health professional with education and experience in child and community health and child care and preferably specialized training in child care health consultation”⁵.

The National Center on Early Childhood Health and Wellness (NCECHW) is a collaborative effort between the Office of Head Start, the Office of Child Care, and the Maternal and Child Health Bureau. In May 2019, NCECHW released Child Care Health Consultant Competencies. The competencies were developed collaboratively with the American Academy of Pediatrics; Georgetown University’s Center for Child and Human Development; National Maternal and Child Oral Health Resource Center; Education Development Center, Inc.; the Health Care Institute at the University of

¹ Donoghue EA and AAP COUNCIL ON EARLY CHILDHOOD. Quality Early Education and Child Care From Birth to Kindergarten. Pediatrics. 2017;140(2):e20171488. Retrieved from <https://pediatrics.aappublications.org/content/140/2/e20171488>

² Donoghue EA and AAP COUNCIL ON EARLY CHILDHOOD. Quality Early Education and Child Care From Birth to Kindergarten. Pediatrics. 2017;140(2):e20171488. Retrieved from <https://pediatrics.aappublications.org/content/140/2/e20171488>

³ Iowa Department of Health and Human Services Performance Measures <https://hhs.iowa.gov/about/performance-measures>

⁴ Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs. Standard 1.6.0.1 Retrieved 09/29/2025 from <https://nrckids.org/CFOC/Database/1.6.0.1>

⁵ Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs. Standard 1.6.0.1 Retrieved 09/29/2025 from <https://nrckids.org/CFOC/Database/1.6.0.1>

California Los Angeles' Anderson School of Management; Child Care Aware of America; the National Resource Center for Health and Safety in Child Care and Early Education; and Zero to Three.

Healthy Child Care Iowa has adopted the Child Care Health Consultant Competencies⁶ for Iowa's Child Care Nurse Consultants. The Child Care Health Consultant Competencies are embedded in the Child Care Nurse Consultant Role Guidance.

The Child Care Health Consultant Competencies are grouped into 2 categories:

- A. General Areas of Expertise (5 areas)
 - 1. Consultation Skills
 - 2. Quality Health, Safety & Wellness Practices
 - 3. Policy Development & Implementation
 - 4. Health Education
 - 5. Resource & Referral
- B. Subject Matter Areas of Expertise (11 areas)
 - 1. Illness & Infectious Disease
 - 2. Children with Special Health Care Needs
 - 3. Medication Administration
 - 4. Safety & Injury Prevention
 - 5. Emergency Preparedness, Response and Recovery
 - 6. Infant & Child Social-Emotional Wellbeing
 - 7. Child Abuse & Neglect
 - 8. Nutrition & Physical Activity
 - 9. Oral Health
 - 10. Environmental Health
 - 11. Staff Health & Wellness

⁶ Child Care Health Consultant Competencies Retrieved 08/22/2025 from University of North Carolina Child Care Health and Safety Resource Center <https://healthychildcare.unc.edu/wp-content/uploads/sites/17234/2025/04/child-care-health-consultants.pdf>

Performance Standards

1. Child Care Nurse Consultant required qualifications, education, and experience
 - a. Registered Nurse with current Iowa or multi-state (compact state) licensure
 - b. Bachelor of Science in Nursing or related degree, or minimum of two years experience as a RN in community health, public health, pediatric practice, or other pediatric health setting
 - c. Completion of the Iowa Training Project for Child Care Nurse Consultants (ITPCCNC)
 - d. Employed or sub-contracted by an Iowa Child and Adolescent Health (CAH) agency
 - e. Able to work at minimum 0.4 FTE as a CCNC
2. The Child Care Nurse Consultant follows all nursing practice laws, rules, and regulations
 - a. Nursing Practice for Registered Nurses -- Iowa Administrative Code 655-6
3. The Child Care Nurse Consultant uses the nursing process⁷
 - a. Assessment
 - b. Diagnosis
 - c. Planning
 - d. Implementation
 - e. Evaluation of Nursing Outcomes
4. The Child Care Nurse Consultant participates in nursing professional development
 - a. Iowa Training Project for Child Care Nurse Consultants
 - b. Healthy Child Care Iowa sponsored educational opportunities
 - c. Quality assurance and fidelity with the Health and Safety Checklist for Early Care and Education Programs⁸ and Iowa Quality for Kids (IQ4K®) tools
5. The Child Care Nurse Consultant uses national and state performance measures and standards in consultation, technical assistance, coaching and training

⁷ Nursing Diagnoses, Outcomes, and Interventions, NANDA, NOC, and NIC Linkages, Center for Nursing Classification, University of Iowa, College of Nursing, Iowa City. Mosby Press, 2001

⁸ California Childcare Health (CCHC) Program Health and Safety Checklist for Early Care and Education Programs: Based on Caring for Our Children National Health and Safety Performance Standards © 2014 California Childcare Health Program, UCSF School of Nursing, updated May, 2023 <https://cchp.ucsf.edu/resources/forms-policies-and-checklists/cchp-health-and-safety-checklist>

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- a. Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs⁹
 - b. Child Care Health Consultant Competencies
 - c. Child Care Nurse Consultant Role Guidance
 - d. Maternal Health and Child & Adolescent Health Title V, block grant
 - e. Collaborative Service Area CAH contract with the Iowa HHS, Bureau of Family Health
 - f. Collaborative Service Area CAH subcontract with local agency employing a CCNC
 6. The Child Care Nurse Consultant uses Iowa child care law, regulation, and rules in consultation, technical assistance, coaching and training
 - a. Child Care Center Licensing - Iowa Administrative Code 441-109, Comm. 204
 - b. Child Care Home Rules – Iowa Administrative Code 441-120, Comm. 95
 - c. Child Development Home Registration - Iowa Administrative Code 441-110, Comm. 143
 - d. Communicable Disease reporting and exclusion, Iowa HHS EPI Manual: Guide to Surveillance, Investigations and Reporting
 - e. Immunization and immunization education: Persons Attending Elementary or Secondary Schools, Licensed Child Care Centers or institutions of higher education – Iowa Administrative Code 641-7
 - f. Iowa Early Learning Standards, Iowa Department of Education
 - g. Iowa Quality for Kids –Iowa Administrative Code (IAC) 441-118
 - h. Iowa Quality Preschool Program Standards, Iowa Department of Education
 - i. Occupational Safety and Health Administration (OSHA) regulations

Per IAC 441-118.1(237A) *“Child care nurse consultant” means a registered nurse licensed in the state of Iowa who has completed training using a nationally approved curriculum for health and safety in child care and early education. The child care nurse consultant provides on-site consultation, technical assistance, and training to child care and early education providers regarding health and safety. The child care nurse consultant is employed by or has a written agreement with the local Title V maternal and child health agency or contracts for service delivery directly through the*

⁹American Academy of Pediatrics, American Public Health Association, National Resource Center for Health and Safety in Child Care and Early Education. *Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs*. 4th ed. Itasca, IL; AAP; 2019

state-level Title V maternal and child health program administered by the Iowa department of public health, bureau of family health.

Per Child Care Regulation “HHS authorizes child care nurse consultants (CCNC), as defined in 441 Iowa Administrative Code 118.1(237A), who are employed or contracted through Iowa Child Health (Title V) agencies and who are enrolled in or have successfully completed the Iowa Training Project to access, audit, read, or review employee health records and health records of individual children or groups of children in regulated child care businesses. The authority in this agreement includes access to and reading of a child’s health information contained in the child’s admission and continued child care enrollment record.”

7. The CCNC uses Healthy Child Care Iowa nursing assessment tools in consultation, technical assistance, coaching and training
 - a. Business Partnership Agreement
 - b. ECE Provider Survey
 - c. Health and Safety Checklist for Early Care and Education Programs assessment tool and forms
 - d. Child Health Record Check-up assessment tool and forms
 - e. CCNC Coaching for Professional Development (PD) tools
 - f. Notice of Urgent Need form
 - g. Infant Safe Sleep Checklist
 - h. Medication Safety Checklist
 - i. Playground Checklist
 - j. Toxic Substance Checklist
8. The CCNC uses HHS approved professional development for coaching and training
 - a. HHS Approved Professional Development for ECE Providers:
 - i. Professional development contact hours can be coaching, education, or training provided by a department-approved entity.
 - ii. Coaching contact hours may only be used to meet up to half of an individual’s annual professional development requirement.

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- iii. The department may randomly monitor any state-approved professional development for quality control purposes.
 - iv. Professional development conducted with staff during the hours of operation of the facility, during staff lunch hours, or while children are resting must not diminish the required staff ratio coverage. Staff must not be actively engaged in care and supervision and simultaneously participate in training.
- b. Professional Development (PD) Definitions:
- i. “Coaching” means a relationship-based process led by an expert to build capacity for specific professional dispositions, skills and behaviors and is focused on performance-based outcomes.
 - ii. “Professional development” means a continuum of learning activities designed to prepare and support individuals for work with children and families, including coaching, education, and training
 - iii. “Training” means a learning experience that addresses a specific topic of professional relevance that builds or enhances knowledge.
- c. Each CCNC offers a minimum of four (one each quarter) HHS-approved HCCI trainings (in person or virtual) annually. CCNCs may offer Coaching for PD as appropriate following the Coaching for PD process pages 54-55.

Child Care Nurse Consultant Performance Measures (PM)

Iowa’s FFY26 CAH State Performance Measure (SPM) 3 is the “Percent of early care and education programs that receive Child Care Nurse Consultant services”. **The CCNC accurately and thoroughly tracks the following data quarterly and at year end for the time period of October 1, 2025 to September 30, 2026.**

FFY26 CAH CCNC Data to be reported by the CCNC:

- Amount of funding by funding source
- Number of ECE providers participating with CCNC in CAH service area (unduplicated)
- Number of ECE providers receiving CCNC services that improve health and safety conditions in their early learning environments

- Percent of ECE providers receiving CCNC services that improve health and safety conditions in their early learning environments
- Number of visits to ECE providers by CCNC
- Number of technical assistance contacts to ECE providers by CCNC
- Number of special health need by category (unduplicated):
 - Asthma
 - Allergy (includes anaphylaxis)
 - Seizures
 - Diabetes
 - IEP/IFSP
 - other
- Total number of special health needs
- Number of special health needs with care plan in place at the ECE program
- Percent of special health needs with a care plan in place at the ECE program
- Number of HCCI HHS approved trainings provided by the CCNC
 - Number in attendance
 - Number of participants that reported increased knowledge as a result of HCCI training
- Percent of participants that reported increased knowledge as a result of HCCI training

Child Care Health Consultant Competencies (CCHC) and the Child Care Nurse Consultant (CCNC) Role

CCHC Competency	CCHC Application	CCNC Action	Guidance
1A. Understands the role of the CCHC. The CCHC understands the need for and qualifications of a	Describes the practices of the CCHC role consistent with state, local, territory, and/or tribal laws and regulations.	Promote the use of Caring for Our Children: National Health and Safety Performance Standards in ECE visits, TA, coaching, and training.	Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs, 4 th ed. AAP (2019) CFOC Basics (July 2025) https://childcareta.acf.hhs.gov/resource/caring-our-children-basics

<p>CCHC, including how to comply with state, local, tribal, and agency-specific regulations (CFOC 1.6.0.1).</p>	<p>Demonstrates an understanding of health, safety, and wellness in the context of ECE settings.</p>	<p>Disseminate pertinent portions of CFOC when providing guidance to ECE providers.</p> <p>Utilize and understand other national standards specific to ECE providers.</p> <p>Utilize HHS Comm. when providing consultation related to regulatory concerns.</p> <p>Stay up to date with ECE health and safety national and Iowa resources.</p>	<p>Other national standards specific to child care:</p> <ul style="list-style-type: none"> • Head Start Performance Standards https://eclkc.ohs.acf.hhs.gov/policy/45-cfr-chap-xiii • National Association for the Education of Young Children (NAEYC) https://www.naeyc.org/resources/position-statements/early-childhood-program-standards • National Association for Family Child Care (NAFCC) https://nafcc.org/accreditation/nafcc-accreditation-quality-standards/ <p>Iowa Department of Health and Human Services (HHS) Licensing and Registration Standards at https://hhs.iowa.gov/programs/programs-and-services/child-care</p> <ul style="list-style-type: none"> • Licensing Rules Chapter 109. Comm. 204 Child Care Centers and Preschools Licensing Standards and Procedures (revised 7/2025) • Registration Rules Chapter 110. Comm. 143 Child Development Home Registration Guidelines (revised 4/2024)
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**1A. Understands
the role of the
CCHC continued...**

- Child Care Home Rules Chapter 120 Comm. 95 Guidelines for Child Care Homes (revised 4/2024)

Subscribe or follow website/listserv:

- California Childcare Health Program
<https://cchp.ucsf.edu/newsletter-sign>
- Centers for Disease Control and Prevention
https://tools.cdc.gov/campaignproxyservice/subscriptions.aspx?topic_id=USCD C_1_3
- Child Care Aware
<https://www.childcareaware.org/about/sign-up-for-enews/>
- Child Care Resource and Referral
<https://iowaccrr.org/contact/>
- Children's Defense Fund
<http://www.childrensdefense.org/>
- Children's Safety Network
<https://www.childrenssafetynetwork.org/newsletter>
- Consumer Product Safety Commission (CPSC) <http://www.cpsc.gov/>
- CPSC Neighborhood Safety Network
<https://www.cpsc.gov/Safety-Education/Neighborhood-Safety-Network/NSN-Signup-Form>
- Early Childhood Iowa
<https://hhs.iowa.gov/programs/programs-and-services/eci>

1A. Understands the role of the CCHC continued...			<ul style="list-style-type: none"> • Early Childhood Learning & Knowledge Center (ECLKC) https://eclkc.ohs.acf.hhs.gov/upcoming-events • Food Allergy Research and Education (FARE) https://www.foodallergy.org/media-room • Iowa Poison Control https://www.iowapoisn.org/news-and-recalls • National Resource Center for Health and Safety in Child Care https://nrckids.org/ • Safer Products https://www.saferproducts.gov/ • Zero to Three https://www.zerotothree.org/connect
1B. Develops and executes a collaborative process for effective consultation. The CCHC works collaboratively with programs as equal partners to build their capacity to identify and resolve health and safety concerns and promote wellness.	Establish a collaborative approach to consultation that recognizes the autonomy, strengths, and expertise of programs. Works with programs to assess the current status of health, safety, and wellness practices and to establish goals for the consultation.	Conduct on-site visits to address and promote the resolution of health and safety concerns related to policy, practice or a specific child/family concern. Conduct and document assessments and reports using HCCI assessment tools and other evidence-based instruments or tools.	Refer to pages 45-56 in the CCNC Role Guidance for descriptions and processes of approved CCNC assessment tools.

<p>1C. Uses communication approaches that strengthen relationships.</p> <p>The CCHC uses culturally responsive and strength-based communication approaches that build the skills and expertise of others.</p>	<p>Seeks to understand the perspectives of others.</p> <p>Communicates effectively with diverse audiences by using appropriate oral and written communication.</p> <p>Gathers sufficient information about the participants' specific needs and expertise to support the consultation relationship.</p>	<p>Build strong relationships with ECE providers working as a team recognizing each other's knowledge and expertise.</p> <p>Use active listening and ask open-ended questions.</p> <p>Recognize individual attitudes and perceptions that may be influenced by trauma.</p> <p>Use trauma informed practices and language when providing consultation.</p> <p>Complete a Business Partnership Agreement (BPA) with programs in the CCNC service area.</p>	<p>The Business Partnership Agreement (BPA) should be completed with all ECE programs the CCNC provides services to. The BPA is valid for 2 years. Refer to pages 46-47 in the CCNC Role Guidance for description and process for completing the BPA and ECE Provider Survey.</p> <p>Child Care Health Consultant modules available at https://eclkc.ohs.acf.hhs.gov/health-services-management/article/child-care-health-consultation-skill-building-modules</p> <p>Trauma Informed Care Resources:</p> <ul style="list-style-type: none"> • ACEs https://www.iowaaces360.org/aces-training.html • Connections Matter http://www.connectionsmatter.org/iowa • Early Childhood Learning & Knowledge Center (ECLKC) free webinar videos https://eclkc.ohs.acf.hhs.gov/mental-health/article/supporting-children-facing-trauma • Iowa Association for Infant & Early Childhood & Mental Health: https://promotingmentalhealthiowa.org/ • Iowa CCR&R Foundations of Understanding Trauma https://iowaccrr.org/training/FUT/
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<p>1D. Applies principles of health equity and cultural and linguistic competence to work with ECE programs, including staff, children, and families.</p> <p>The CCHC helps programs respond to the needs of staff, children, and families in a culturally and linguistically competent manner.</p>	<p>Demonstrates an understanding of how one's own values, beliefs, assumptions, and experiences affect interactions with staff, children, and families.</p> <p>Connects programs to community health resources (medical interpreters and translated materials) that can address families' health needs in their preferred language.</p>	<p>Seeks out opportunities for cultural competency training.</p> <p>Work with your CAH agency to provide forms/handouts in other languages when requested.</p> <p>Work with the HCCI Professional Development Coordinator for questions about translation of HCCI trainings.</p>	<p>California Childcare Health Program has resources in multiple languages https://cchp.ucsf.edu/</p> <p>Centers for Disease Control (CDC) has publications available in other languages https://wwwn.cdc.gov/Pubs/other-languages?Sort=Lang%3A%3Aasc</p> <p>Iowa HHS MCAH Title V Administration Manual Policy 313: <i>Review and Approval of Informational and Education Material</i> provides guidance for translating materials. https://hhs.iowa.gov/portal-mcah-project-management/title-v-tools</p> <p>Translation/Interpreter services in Iowa:</p> <ul style="list-style-type: none"> Iowa HHS Bureau of Refugee Services https://hhs.iowa.gov/assistance-programs/refugee-services Iowa International Center Interpretation and Translation Services 515-282-8269 https://iowainternationalcenter.org/
<p>2A. Uses evidence-based instruments to assess the quality of health,</p>	<p>Matches evidence-based assessment</p>	<p>Provide quality assurance monitoring, consultation and TA for programs.</p>	<p>Refer to pages 45-56 in the CCNC Role Guidance for descriptions and processes of approved CCNC assessment tools.</p>

<p>safety, and wellness practices in ECE programs.</p> <p>The CCHC accesses a variety of objective, evidence-based instruments to use in ECE programs to identify areas of strength and areas that may need improvement.</p>	<p>instruments to program priorities.</p> <p>Demonstrates respect for programs when observing programs.</p>	<p>Prioritize visits for the purpose of conducting health and safety assessments.</p> <p>Prioritize and schedule IQ4K® assessment visits within 3 weeks of the request by the ECE program.</p> <p>Ensure timely response to all ECE programs requesting on-site assessment/consultation and technical assistance, information, and referral.</p> <p>Seek out additional training specific to outdoor play environments.</p> <p>Conduct a review of ECE business' child health records (including immunizations), employee health records</p>	<p>Nursing assessments are completed to guide quality improvement. The CCNC may identify hazards and concerns that require extensive assessment prior to planning and intervention.</p> <p>Programs may request nursing assessment visits to fulfill requirements for accreditation through a national child care or education organization (example NAEYC, QPPS), Iowa Quality for Kids or for an individual business' quality improvement plan.</p> <p>NAP SACC assessments/action plans are available at https://gonapsacc.org/ To access NAP SACC assessments and training modules register for an account. Contact the HCCI Program Coordinator for the registration code.</p> <p>Within 6-12 months after completing ITPCCNC, CCNCs are strongly encouraged to complete training offered through either of the following:</p> <ul style="list-style-type: none"> • National Program for Play Area Safety (NPPAS) https://nppas.org/ • National Program for Playground Safety (NPPS)
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<p>2A. Uses evidence-based instruments to assess the quality of health, safety, and wellness practices in ECE programs continued...</p>		<p>and safety related records upon request by the ECE provider, or from HHS and/or local public health.</p> <p>Document 100% of consultation, assessments, visits and technical assistance (TA).</p> <p>Refer to your agency's record retention policy, your contracted entities (local public health, United Way, etc.) and at <u>minimum</u> HHS Service Contracts Record Retention https://hhs.iowa.gov/initiatives/contract-terms for the number of years records must be kept.</p>	<p>https://playgroundsafety.uni.edu/training</p> <p>Playground Resources are available from:</p> <ul style="list-style-type: none"> Centers for Disease Control (CDC): Outdoor Play and Safety for Children in ECE https://www.cdc.gov/early-care/communication-resources/outdoor-play-and-safety-for-children-in-ece.html Consumer Product Safety Commission (CPSC July 2025) Public Playground Safety Handbook https://www.cpsc.gov/Playground-Handbook National Program for Play Area Safety https://nppas.org/ National Program for Playground Safety 319-273-7529 https://playgroundsafety.uni.edu/ <p>If the CAH or CCNC agency ends CCNC services all child care files/records/data must be given immediately to Iowa HHS, the CAH Agency, or their duly authorized representative upon completion of their contract, subcontract or MOU.</p>
<p>2B. Collaborates with ECE programs to improve the quality</p>	<p>Helps programs align health, safety, and wellness practices with licensing regulations,</p>	<p>Review and become familiar with the HHS child care database.</p>	<p>HCCI materials may be added to CCR&R promotion packets for new ECE businesses. The CCNC and CCR&R staff shall work together informing ECE</p>

<p>of their health, safety, and wellness practices.</p> <p>The CCHC and ECE staff use their mutual areas of expertise in developmentally appropriate health, safety, and wellness practices to identify and implement strategies to improve the quality of programs.</p>	<p>IQ4K®; developmentally appropriate practices, and CFOC standards.</p> <p>Ensures programs have an effective record keeping system to support health, safety, and wellness.</p> <p>Works together with programs to prioritize quality improvement actions and set achievable goals to address concerns.</p> <p>Observes intervention strategies and recommends changes when needed.</p>	<p>Identify programs in CCNC service area.</p> <p>Provide materials and offer services to child care businesses within 3 months of the time they obtain a new license or registration.</p> <p>Review HHS child care compliance reports to aid in providing consultation and TA.</p> <p>Conduct and document assessments and reports using HCCI assessment tools and other evidence-based instruments or tools.</p>	<p>businesses about CCNC services and other health or safety related resources.</p> <p>Non-registered child care businesses shall be recruited to become a registered child care business.</p> <ul style="list-style-type: none"> • Search the Iowa HHS child care provider database (Kindertrack) for ECE programs by county http://ccmis.dhs.state.ia.us/ClientPortal/ProviderSearch.aspx • Iowa Child Care Connect (C3) allows families to search for child care specific to their needs including searching by route from home to work or school. https://search.iachildcareconnect.org/Search <p>For ECE programs that are NAEYC accredited search https://ais.naeyc.org/search_programs</p> <p>HHS regulatory reports can be downloaded at https://hhs.iowa.gov/programs/programs-and-services/child-care</p>
<p>3A. Works with ECE programs to develop and</p>	<p>Helps programs develop or revise</p>	<p>Review policies and make recommendations</p>	<p>The CCNC may be asked to review health/safety related policies and practices within the program. It is appropriate for the CCNC to review and consult regarding</p>

<p>review child care health policies.</p> <p>The CCHC helps programs develop policies that describe what they will do to promote health, safety, and wellness.</p>	<p>policies to comply with regulations.</p> <p>Encourages programs to develop policies that promote CFOC standards.</p>	<p>for meeting CFOC standards.</p> <p>Provide consultation regarding child care health policies.</p>	<p>health/safety policy. The CCNC should not write the policies for the program.</p> <p>Policy Resources:</p> <ul style="list-style-type: none"> • Child Care Health and Safety Policy Guidance on the CCNC Gateway • Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs 4th ed. AAP (2019) available on the CCNC Gateway
<p>3B. Works with ECE programs to develop procedures that outline the specific steps required to implement child care health policies.</p> <p>The CCHC and ECE staff use their mutual areas of expertise in developmentally appropriate practices to identify and implement strategies to</p>	<p>Helps programs determine procedures needed to effectively implement policies.</p> <p>Collaborates with programs to identify the resources and support needed to fully implement each policy.</p> <p>Observes procedures and helps programs make changes when needed.</p>	<p>Provide on-site observation, assessment and consultation regarding a program's policies and procedures for meeting HHS regulatory compliance and encourage programs to follow CFOC standards.</p>	<p>The Health and Safety Checklist helps the CCNC evaluate ECE provider health and safety policies documenting practices/procedures performed by provider/staff.</p> <p>When HHS licensing or home registration staff identify a serious health or safety concern in a center or home, HHS staff may make a referral to CCNCs for follow-up.</p> <p>Refer to pages 45-56 in the CCNC Role Guidance for descriptions and processes of approved CCNC assessment tools.</p>

improve the quality of programs.			
<p>4A. Identifies, designs, and implements health education.</p> <p>The CCHC provides and/or facilitates health education for staff, children, and families. The CCHC collaborates with staff to provide health education to children and families.</p>	<p>Assesses the need for timely health education within programs.</p> <p>Provides training on a wide range of health and safety issues relevant to staff, children, and families.</p>	<p>Provide HCCI HHS approved provider training in CCNC service area.</p> <p>Provide a minimum of 4 trainings (one each quarter) in CCNC service area from the HCCI HHS Approved Training List.</p>	<p>All HHS approved trainings provided by the CCNC need to be posted on I-PoWeR Iowa's Early Childhood and School Age Professional Workforce Registry and coordinated with an approved training entity (re: CCR&R, ISU Extension and Outreach, Iowa NAEYC, etc.)</p> <p>I-PoWeR Iowa's Early Childhood and School Age Professional Workforce Registry https://ccmis.dhs.state.ia.us/trainingregistry/TrainingRegistry/Public/</p> <p>HCCI HHS Approved Training List is available on the CCNC Gateway.</p>
<p>4B. Works with ECE programs to build staff and family health literacy.</p> <p>The CCHC works with programs to ensure that staff and families have health information they can understand and use</p>	<p>Strengthens the ability of programs to communicate accurate health information in ways staff and families can understand.</p>	<p>Provide health and safety materials and related resources as indicated.</p> <p>Monthly email/mail providers the HCCI "Quality Care For Kids" newsletter.</p>	<p>Newsletters may be emailed or mailed out to providers and included in new provider packets. CCR&R is available to assist with sending an email blast.</p>

to make informed decisions.			
<p>5A. Helps ECE programs make linkages to community resources that address the physical health, mental health, and social services needs of the program staff, children, and families.</p> <p>The CCHC connects programs with community resources and expertise to enhance health, safety, and wellness services.</p>	<p>Helps programs access appropriate resources to meet program and family needs.</p> <p>Facilitate communication between programs and qualified specialists in fields such as mental health, early childhood education, disabilities, and nutrition.</p>	<p>Promote and refer families to resources: Hawki, Medicaid, WIC, I-Smile, Title V CAH program, etc.</p> <p>Make available information about health care public programs (Medicaid, Hawki, and CAH services).</p> <p>Refer families directly to the CAH agency-Care Coordinator for help with securing health care.</p>	<ul style="list-style-type: none"> Care For Kids (EPSDT periodicity) https://hhs.iowa.gov/programs/welcome-iowa-medicaid/iowa-medicaid-programs/epsdt Child Care Assistance (CCA) https://hhs.iowa.gov/assistance-programs/child-care-assistance Free Clinics of Iowa: https://www.fciowa.org/ Hawki https://hhs.iowa.gov/programs/welcome-iowa-medicaid/iowa-health-link/hawki Healthy Families Line 1-800-369-2229 Available 8:00-4:00 M-F Iowa Health Link https://hhs.iowa.gov/medicaid/plans-programs/iowa-health-link Iowa Health Insurance Marketplace https://iid.iowa.gov/consumers/insurance/health-insurance I-Smile https://hhs.iowa.gov/programs/programs-and-services/dental-and-oral-health/i-smile <p>The CCNC role is not to provide EPSDT direct care services to individual children. If a direct care need is identified, the CCNC refers to the CAH agency to determine community resources available.</p>
<p>5A. Helps ECE programs make linkages to community resources that</p>			

<p>address the physical health, mental health, and social services needs of the program staff, children, and families continued...</p>			<p>CCNC's working with 1st Five/Title V Child Health may promote developmental screening of children using the Ages & Stages Questionnaire (ASQ and ASQ-SE). Training through your CAH agency is required to utilize these tools.</p>
<p>5B. Collaborates with ECE programs to ensure families are able to access services.</p> <p>The CCHC plays a role in connecting families with community services, assistance programs, and resources to address their health, safety, and wellness needs.</p> <p>5B. Collaborates with ECE programs to ensure families are able to access</p>	<p>Identifies community service providers that can help family's access health and social services.</p> <p>Helps programs develop and maintain a current list of health care providers able to serve families.</p>	<p>Provide brochures and resources to programs on children health and safety topics (WIC, Safe Sleep, Early Access, Lead Poisoning Prevention, Kid Sight, Hearing Screening, Developmental Milestones, I-Smile, Immunizations, etc.).</p>	<p>Resources available:</p> <p>Child Development</p> <ul style="list-style-type: none"> Early Access / Early Intervention https://www.iafamilysupportnetwork.org/families/early-access/ 1st Five https://hhs.iowa.gov/programs/programs-and-services/family-health/1st-five Learn the Signs, Act Early https://www.cdc.gov/ncbddd/actearly/index.html <p>Childhood Lead Poisoning Prevention</p> <ul style="list-style-type: none"> Iowa Department of Health Lead Poisoning Prevention https://hhs.iowa.gov/programs/programs-and-services/childhood-lead-poisoning-prevention-program <p>Health and Dental Insurance for Children</p>

<p>services continued...</p>			<ul style="list-style-type: none"> Hawki 1-800-257-8563 https://hhs.iowa.gov/programs/welcome-iowa-medicaid/iowa-health-link/hawki Medicaid https://hhs.iowa.gov/medicaid/apply-medicaid <p>Hearing Screening</p> <ul style="list-style-type: none"> Early Hearing Detection https://hhs.iowa.gov/programs/programs-and-services/ehdi <p>Immunization</p> <ul style="list-style-type: none"> Immunization schedules https://hhs.iowa.gov/immunization <p>Infant Safe Sleep</p> <ul style="list-style-type: none"> SIDS and Safe Sleep https://www.cdc.gov/sudden-infant-death/sleep-safely/ Iowa SIDS Foundation http://iowasids.org/ <p>Nutrition Support</p> <ul style="list-style-type: none"> Women, Infant and Children (WIC) supplemental nutrition program https://hhs.iowa.gov/programs/food-assistance/wic-iowa <p>Oral and Dental Health for Children</p> <ul style="list-style-type: none"> I-smile https://hhs.iowa.gov/programs/progr
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5B. Collaborates with ECE programs to ensure families are able to access

services continued...			ams-and-services/dental-and-oral-health/i-smile Vision Screening <ul style="list-style-type: none"> Kid Sight https://medicine.uiowa.edu/kidsight/ Well-child Check-ups <ul style="list-style-type: none"> EPSDT https://hhs.iowa.gov/programs/welcome-iowa-medicaid/iowa-medicaid-programs/epsdt
6A. Works with ECE programs to reduce the spread of illness. The CCHC helps staff and families implement preventive measures that limit the spread of infectious diseases in ECE programs.	Helps staff apply knowledge about how diseases spread, infectious diseases that are common in ECE programs, and steps to take to reduce the spread of disease.	Provide resources and consultation regarding prevention of infectious diseases.	Disease information available at: <ul style="list-style-type: none"> AAP's Managing Infectious Diseases in Child Care and Schools, 6th Edition. https://www.aap.org/Managing-Infectious-Diseases-in-Child-Care-and-Schools-6th-Edition-Paperback CDC Health Topics https://www.cdc.gov/health-topics.html Iowa HHS Child Illnesses and Exclusion Criteria for Child Care and Schools https://hhs.iowa.gov/programs/programs-and-services/child-care/hcci Iowa HHS EPI https://hhs.iowa.gov/center-acute-disease-epidemiology/disease-information
6A. Works with ECE programs to reduce the spread of illness continued...	Assists programs with implementing and monitoring strategies to reduce illness, such as handwashing, gloving, diapering, cleaning, sanitizing, and disinfecting procedures.	Assess handwashing, gloving, diapering, cleaning, sanitation and disinfecting procedures and provide consultation and training to programs on CFOC standards.	
		Review immunization records of children enrolled in programs.	

<p>6A. Works with ECE programs to reduce the spread of illness continued...</p>	<p>Helps programs work with families to keep children fully immunized.</p>	<p>Utilize the HHS schedules for childhood immunizations.</p> <p>Any communication regarding immunizations must include the following statement: “Documentation of a valid Certificate of Immunization Exemption (Religious or Medical) or Provisional Certificate of Immunization may be submitted in lieu of a Certificate of Immunization.”</p> <p>Assist ECE providers and families to obtain immunization records from Iowa’s Immunization Registry Information System (IRIS).</p> <p>Help to ensure that immunizations are entered into IRIS.</p>	<p>Handwashing, gloving, diapering posters, Common Illnesses and Exclusion Criteria, and CFOC Appendix J are available on the HCCI website https://hhs.iowa.gov/programs/programs-and-services/child-care/hcci</p> <p>Immunization schedules and requirements https://hhs.iowa.gov/immunization</p> <p>The immunization review assesses the immunization status of the child to ensure child care requirements are met. This is not intended to duplicate the required <u>immunization audit</u> conducted by the local public health agency. The results of the immunization review of child care centers shall be reported to HHS child care regulatory and licensing staff.</p> <p>Local boards of health (LBOH) assure the auditing of childhood immunization status in each county. If a CCNC will be auditing immunizations, it will be under the work and direction of the local public health agency as a public health nursing activity. Immunization audit requirements at https://hhs.iowa.gov/immunization#auditor-information</p>
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<p>6A. Works with ECE programs to reduce the spread of illness continued...</p>		<p>Work with local public health, ECE programs and families to obtain needed immunizations. Make referrals when needed.</p> <p>Help programs work with families to keep children fully immunized.</p> <p>Help programs ensure children have a primary care provider and are up to date on routine preventative health services.</p>	<p>CCNCs employed with local public health agencies may be an IRIS Enrolled User. CCNCs employed by non-public health agencies may also request access to IRIS though Iowa's Immunization Program Immunization Registry Information System (IRIS) Health & Human Services (iowa.gov)</p> <p>CCNC's who are an IRIS Enrolled User may obtain immunization records for children in child care and release them to licensed child care providers per Iowa law (641 IAC Chapter 7).</p> <p>The HHS Bureau of Immunization has local immunization clinic providers in each county. Contact your local public health agency or health department.</p> <p>Immunization Resources and Q&A:</p> <ul style="list-style-type: none"> • How Do Vaccines Work? American Academy of Pediatrics (AAP) video https://www.youtube.com/watch?v=l8fewK2Vxes • https://www.immunize.org/handouts/discussing-vaccines-parents.asp • https://www.cdc.gov/vaccines/hcp/conversations/understanding-vacc-work.html
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			<p>ECE Programs should maintain up-to-date immunizations. CCNC provides immunization information and connects providers with resources.</p> <p>Certificate of Immunization, Provisional Certificate of Immunization, and Certificates of Immunization Exemption must be properly completed to be valid. A signed faxed copy, photocopy, or electronic copy is acceptable.</p>
<p>6B. Helps programs use current, evidence-based criteria for identifying, caring for, and excluding children who are ill and for identifying staff who are ill and should not be working.</p> <p>The CCHC and ECE staff work together to determine when children require exclusion and how to care for them before a parent or guardian can pick them up. The CCHC also helps programs</p>	<p>Encourages programs to use evidence-based criteria to make decisions about inclusion and exclusion of children and staff who are ill.</p> <p>Helps programs ensure that staff and families understand how to identify signs and symptoms of common childhood illnesses.</p> <p>Helps programs know how to respond when a child or staff member has been diagnosed</p>	<p>Provide consultation to programs on management and response to infectious disease outbreaks.</p> <p>Report 100% of incidents (IAC 641-1 Notification and Surveillance of Reportable Diseases) when the CCNC is directly involved.</p> <p>Report involvement with communicable disease to HCCI.</p> <p>Assist programs with reporting communicable diseases to HHS</p>	<p>CCNC may not initially be involved or knowledgeable of incidents of communicable disease.</p> <p>CCNC shall report incidents where the consultant is directly involved in providing consultation or technical assistance.</p> <p>The CCNC shall work with the local public health department for reporting communicable diseases.</p> <ul style="list-style-type: none"> List of reportable diseases https://hhs.iowa.gov/center-acute-disease-epidemiology/reportable-communicable-diseases-and-infectious-conditions Disease Reporting Hotline 1-800-362-2736

<p>determine when staff requires exclusion.</p> <p>The CCHC helps programs determine control measures for infectious disease outbreaks.</p>	<p>with a reportable disease.</p> <p>Helps programs manage responses to infectious disease outbreaks.</p>	<p>licensing consultant for child care centers.</p> <p>Follow instructions given by HHS Center for Acute Disease Epidemiology (CADE) or local public health authority pertaining to communicable disease.</p> <p>IMMEDIATELY report to CADE outbreaks. Outbreaks may be infectious, environmental or occupational in origin and include food-borne outbreaks or illness secondary to chemical exposure (e.g., pesticides, anhydrous ammonia).</p> <p>Maintain record of all reporting documents completed.</p>	<ul style="list-style-type: none"> The EPI Manual & reporting procedures is available at https://hhs.iowa.gov/center-acute-disease-epidemiology/epi-manual <p>Child care centers are required to publicly post a notice about communicable diseases. CCNCs may assist the child care program with appropriate disease posting information utilizing the following resources:</p> <ul style="list-style-type: none"> CADE - list of diseases https://hhs.iowa.gov/center-acute-disease-epidemiology/disease-information CDC Diseases and Conditions https://www.cdc.gov/health-topics.html AAP's Managing Infectious Diseases in Child Care and Schools, 6th Edition. https://www.aap.org/Managing-Infectious-Diseases-in-Child-Care-and-Schools-6th-Edition-Paperback Local public health
<p>7A. Collaborates with programs and families to support the care and inclusion of children with</p>	<p>Keeps up to date on relevant knowledge to serve as a resource on caring for children with special health care needs and/or</p>	<p>The MCAH Bureau defines children with special health needs as children who have or are at increased risk for chronic physical,</p>	<p>Children birth to three may be eligible to receive Early Access services. Referrals can be made by parents, child care providers, medical providers</p>

<p>special health care needs and/or chronic physical health or mental health conditions.</p> <p>The CCHC supports programs and families to ensure that children with a special health care need and/or chronic health condition have full, safe inclusion in the ECE program.</p> <p>7A. Collaborates with programs and families to support the care and inclusion of children with</p>	<p>management of chronic health conditions.</p> <p>Helps programs understand how to meet their responsibilities to provide services in accordance with the Americans with Disabilities Act (ADA).</p> <p>Supports programs in planning for and fully accommodating children with special health care needs.</p> <p>Collaborates with programs to develop and implement individualized care plans/action plans in partnership with the child's family, health care provider, and identified specialists, if applicable.</p>	<p>developmental, behavioral, or emotional conditions.</p> <p>When identified/requested assist in the development of care plans/action plans collaborating with the child's health care provider.</p> <p>When consulting and care planning for a child with special health needs, a signed consent is required by the parent/guardian.</p> <p>Assist in the identification of barriers that may prohibit children with special health or developmental needs from enrolling and participating in the program and activities, including playground facilities.</p>	<p>https://www.iafamilysupportnetwork.org/families/early-access/</p> <p>The CCNC may contact the Area Education Agency (AEA) where the child care program is located https://iowaaea.org/</p> <p>AEA and local school districts partner and collaborate to ensure quality special education and early intervention services are provided to all eligible individuals, birth to 21, as outlined in Individuals with Disabilities Education Act (IDEA) https://iowaideainformation.org/</p> <p>Iowa Child Health Specialty Clinics have health care personnel specializing in the care of children with special health or developmental needs. https://chsciowa.org/</p> <p>Sample consent forms are available from:</p> <ul style="list-style-type: none"> California Childcare Health Program https://cchp.ucsf.edu/resources/form-s-policies-and-checklists/consent-exchange-information <p>Use contacts already involved with the family like Area Education Agencies (AEA), Early Access, 1st Five, Head Start/Early</p>
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<p>special health care needs and/or chronic physical health or mental health conditions continued...</p>	<p>Connects programs and families with resources for children with special health care needs.</p>	<p>Inform the director or owner of observed barriers.</p> <p>Inform ECE programs about the Americans with Disabilities Act and the sections pertaining to child care.</p> <p>Maintain access to ADA information and materials via online and community resources such as AEA and Iowa Child Health Specialty Clinics.</p>	<p>Head Start, Iowa Child Health Specialty Clinics, PT/OT/ST services, etc.</p> <p>Iowa Family Support Network-Children at Home Program helps eligible families with securing the services and supports to meet their child's needs https://www.iafamilysupportnetwork.org/children-at-home</p> <p>ASK (Access for Special Kids) Resource Center is a parent training, information, and advocacy center for families of children with special needs across the state of Iowa. https://www.askresource.org/</p> <p>ADA Child Care Q&A - American with Disabilities Act pertaining to child care available at https://www.ada.gov/resources/child-care-centers/</p> <p>Refer to pages 52-54 in the CCNC Role Guidance for the care planning process.</p>
<p>8A. Helps ECE programs safely manage medication administration and</p>	<p>Help programs develop policies and implement procedures for safe medication administration.</p>	<p>When requested or identified as needed in the CCNCs service area, provide Medication Administration Skills Competency Face-to-</p>	<p>Utilize HCCI tools for tracking Medication Administration Skills Competency initial and renewal. For assistance with tracking contact the HCCI Health and Safety Analyst.</p>

<p>medical procedures.</p> <p>The CCHC ensures staff have the training, knowledge, skills, and competency to safely manage medication administration and medical procedures.</p>	<p>Provides and/or supports training in medication administration.</p> <p>Helps programs set up a system to ensure that emergency medications are accessible at all times.</p>	<p>Face 2023-2027 edition and Skills Competency Evaluation (test out) trainings.</p> <p>Provide Competency Evaluation (test out) within 30 days for ECE participants who have taken the Medication Administration Skills Competency 2023-2027 edition online course.</p> <p>Provide ongoing monitoring of Medication Administration Skills Competency.</p> <p>Assist programs with policies regarding safe medication storage and handling.</p>	<p>Refer to pages 47-48 in the CCNC Role Guidance for additional information regarding the Medication Administration Skills Competency training and test-out process.</p> <p>Utilize the Child Care Health and Safety Policy Guidance (CCNC Gateway) for medication policy consultation.</p> <p>SafeNetRx.org for donating medication left at child care by parent/guardian https://safenetrx.org/ https://safenetrx.org/individual-donation</p>
<p>9A. Collaborates with ECE programs to promote safety</p>	<p>Helps programs implement safety practices through planning, policies, and procedures.</p>	<p>Conduct on-site assessments and consultation to address and promote the resolution of health and</p>	<p>CCNC may be asked to review health/safety related policies and practices within the child care facility. It is appropriate for the CCNC to review and consult regarding health/safety policy. The</p>

<p>and reduce injuries.</p> <p>The CCHC assesses and identifies injury hazards indoors, outdoors, and in and around vehicles. The CCHC helps programs promote safety by understanding how the interaction between children, adults, and the environment may contribute to injury risk.</p>	<p>Provides training for staff and families about common injuries and injury prevention for infants and children.</p> <p>Helps programs determine how to respond when safety risks are identified.</p> <p>Ensures use of safe and developmentally appropriate equipment, including furniture, toys, art supplies, and playground structures and surfacing that comply with safety standards, such as those set by the Consumer Product Safety Commission and ASTM International.</p>	<p>safety concerns related to policy and procedures.</p> <p>Consult with programs regarding their personnel policies and practices that impact the health, safety, and well-being of children and employees.</p> <p>Refer ECE programs to the HHS child care website for the Child Care Injury/Incident Report form for their use when an injury occurs at care.</p> <p>Promote infant “safe sleep” practices.</p>	<p>CCNC should not write the policies for the child care business.</p> <p>Refer to the CPSC Safety Guides on the HCCI website “Child Safety” tab https://hhs.iowa.gov/programs/programs-and-services/child-care/hcci</p> <p>Playground Safety:</p> <ul style="list-style-type: none"> National Program for Play Area Safety (NPPAS) https://nppas.org/ National Program for Playground Safety (NPPS) https://playgroundsafety.uni.edu/ <p>Infant safe sleep resources:</p> <ul style="list-style-type: none"> AAP Healthychildren Safe Sleep https://www.healthychildren.org/English/ages-stages/baby/sleep/Pages/default.aspx CDC SUID/ SIDS https://www.cdc.gov/sudden-infant-death/sleep-safely CPSC Cribs https://www.cpsc.gov/Safety-Education/Safety-Education-Centers/cribs HCCI Safe Sleep Policy and Safe Sleep FAQ
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9A. Collaborates with ECE programs to promote safety and reduce injuries continued...	<p>Assesses sleep areas and procedures to ensure safe sleep practices.</p>		<p>https://hhs.iowa.gov/programs/programs-and-services/child-care/hcci</p> <ul style="list-style-type: none"> • HHS Safe Sleep Resources https://hhs.iowa.gov/programs/programs-and-services/early-intervention-and-support/safe-infant-sleep • Iowa SIDS Foundation https://www.iowasids.org/index.php/en/child-care • Safe sleep Unresponsive Infant Drill https://www.vdh.virginia.gov/content/uploads/sites/54/2017/01/SIDSresourceemergency_drill.pdf • Safe Sleep Checklist available on the CCNC Gateway
9B. Promotes active supervision practices. <p>The CCHC helps programs create a safe environment and prevent injuries by ensuring that staff are actively supervising the children in their care at all times.</p>	<p>Supports programs in implementing supervision strategies in all indoor and outdoor settings.</p>	<p>Utilize child care national resources when providing consultation to programs on “active supervision”.</p>	<p>Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs, 4th ed. AAP (2019) available on the CCNC Gateway</p> <p>National Program for Playground Safety (NPPS) https://playgroundsafety.uni.edu/safe-resources/supervision</p>
9C. Helps programs with planning and	<p>Helps programs know how to respond in the event of an injury,</p>	<p>Assess First Aid kits for all needed items to meet CFOC standards.</p>	<p>First Aid Kit Checklist available on the HCCI website</p>

<p>response to injuries</p> <p>The CCHC collaborates with ECE programs to ensure staff are trained in how to identify and respond to injuries.</p>	<p>medical emergency, or an unresponsive child.</p> <p>Connects programs with local resources for attaining CPR, choking response, and first aid training.</p>	<p>Provide resources to programs on CPR/1st Aid, Stop the Bleed® training.</p> <p>Consult with programs regarding serious injury HHS reporting requirements using the Child Care Injury/Incident Report form.</p>	<p>https://hhs.iowa.gov/programs/programs-and-services/child-care/hcci</p> <p>First Aid and More (Nemours Kids Health) https://kidshealth.org/en/parents/firstaid-safe/sheets/</p> <p>In counties or service areas where access to CPR/1st Aid training is limited, CCNCs are encouraged to become a CPR/1st Aid trainer with either the American Heart Association or Red Cross.</p> <ul style="list-style-type: none"> • https://cpr.heart.org/en/resources/aha-instructors/become-an-instructor • https://www.redcrosslearningcenter.org/s/become-an-instructor <p>Stop the Bleed® Training and resources available at https://www.stopthebleed.org/training/</p>
<p>10A. Helps programs prepare for, respond to, and recover from emergencies and disasters.</p> <p>The CCHCs works collaboratively with programs to develop</p>	<p>Ensures programs align emergency preparedness planning with state/tribal and local disaster plans.</p> <p>Helps programs develop written plans for responding to</p>	<p>Utilize Iowa specific resources available when providing consultation on emergency preparedness planning.</p> <p>CCNCs are a resource (i.e., TA, consultation) for ECE programs in</p>	<p>CDC: Guidelines for Cleaning Safely After a Disaster- includes Mold Prevention and Clean Up https://www.cdc.gov/natural-disasters/safety/index.html</p> <p>County Emergency Management – county list https://homelandsecurity.iowa.gov/resource/s/county-emergency-management</p>

<p>an emergency preparedness, response, and recovery plan. The CCHC helps programs develop relationships with relevant community partners to support emergency preparedness, response, and recovery.</p>	<p>emergency situations or natural disasters that may require evacuation, lock-down, or sheltering in place.</p> <p>Connects programs to community resources and services to help with training and assistance in preparing for, responding to, and recovering from emergencies.</p>	<p>preparing for and response/recovery from emergencies/disasters including communicable disease outbreaks.</p> <p>In the event of a local emergency, CCNCs may take an active role as part of their local community emergency preparedness plan.</p> <p>Per the HHS state Emergency Preparedness Plan, CCR&R is the lead agency for working with programs that have experienced an emergency or disaster. CCR&R may make referrals to local CCNCs for additional assistance and resources.</p>	<p>Emergency preparedness planning resources are part of the Essentials Emergency Preparedness Module and are also available on the CCR&R website at https://iowaccrr.org/training/ep/</p> <p>Healthy Child Care North Carolina - Post disaster resources https://healthychildcare.unc.edu/resources/reference/immediate-post-disaster-resources/</p> <p>Iowa Disaster Recovery https://www.iowa.gov/iowa-disaster-recovery</p> <p>Iowa Statewide Child Care Emergency Preparedness and Response Plan 3/2022 https://hhs.iowa.gov/media/479/download?inline</p> <p>Sesame Street Resources https://sesameworkshop.org/topics/emergencies/</p> <p>USDA Food Safety Emergency Response Pocket Guide Disaster</p>
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			https://www.fns.usda.gov/fs/food-safety-emergency-response
<p>11A. Collaborates with ECE programs to create an environment for children that promotes positive social and emotional wellbeing.</p> <p>The CCHC assists programs to support children's executive functioning, self-regulation, and developmentally appropriate relationships with other children and adults.</p>	<p>Reviews written discipline policies and observes procedures to ensure they align with positive guidance.</p> <p>Identifies factors that enhance children's social and emotional wellbeing.</p> <p>Matches programs with community resources, including mental health consultation.</p>	<p>CCNC reviews the ECE program's discipline and biting policies and makes suggestions when appropriate.</p> <p>CCNC assesses PBIS resources available in their service area.</p> <p>Provide PBIS resources to programs.</p>	<p>Refer to HHS Comm 143 and Comm 204 regarding discipline and biting policies. Iowa Department of Health and Human Services Licensing and Registration Standards at</p> <ul style="list-style-type: none"> Comm. 204 Child Care Centers and Preschools Licensing Standards and Procedures (revised 07/2025) https://hhs.iowa.gov/media/6489/download?inline Comm. 143 Child Development Home Registration Guidelines (revised 04/2024) https://hhs.iowa.gov/media/6469/download?inline <p>PBIS Resources available at:</p> <ul style="list-style-type: none"> Center on the Social Emotional Foundations for Early Learning http://csefel.vanderbilt.edu/ The National Center for Pyramid Model Innovations (NCPMI) http://challengingbehavior.cbcs.usf.edu/index.html
<p>11B. Helps ECE staff respond to social and</p>	<p>Work with staff to develop a method for observing and</p>	<p>Make referrals to PBIS consultants and Early childhood mental health.</p>	<p>CCNCs are encouraged to obtain PBIS training. Training is available through:</p>

<p>emotional and behavioral concerns.</p> <p>The CCHC connects programs to resources and strategies to assess and appropriately address social and emotional and behavioral concerns.</p>	<p>documenting information about social and emotional and behavioral concerns.</p> <p>Support staff in finding compassionate ways to share information about social and emotional and behavioral concerns with families.</p> <p>Help programs access mental health consultation to prevent suspension and expulsion of children with challenging behaviors.</p> <p>Connect programs with mental health consultants who provide guidance on trauma-informed practices.</p>	<p>Utilize Early Childhood - Positive Behavioral Interventions and Supports (EC-PBIS) resources</p>	<ul style="list-style-type: none"> • I-PoWeR HHS training registry https://ccmis.dhs.state.ia.us/trainingregistry/TrainingRegistry/Public/ <p>Resources:</p> <ul style="list-style-type: none"> • CCR&R Behavioral Health Services https://iowaccrr.org/providers/bhs/ • Connections Matter in Early Childhood https://hhs.iowa.gov/programs/programs-and-services/child-care/hcci • Early Childhood Mental Health https://www.ia-iecmmh.org/ • Iowa ACES https://www.iowaaces360.org/ • Iowa HHS Mental Health Services https://hhs.iowa.gov/health-prevention/mental-health • National Center for Pyramid Model Innovations (NCPMI) https://challengingbehavior.org/resources/ • Project LAUNCH https://iowaprojectlaunch.org/
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<p>12A. Collaborates with programs to prevent child abuse and neglect.</p> <p>The CCHC helps programs implement measures that build protective factors known to reduce child abuse and neglect.</p>	<p>Helps programs implement strategies to identify risk factors and strengthen protective factors for children and families to help prevent abuse and neglect.</p>	<p>Provide resources to programs on child abuse and neglect prevention.</p>	<p>Prevent Child Abuse Iowa has information about preventing child abuse and neglect, and child advocacy. http://www.pcaiowa.org</p>
<p>12B. Supports programs in identifying and reporting suspected child abuse and neglect.</p> <p>The CCHC helps staff integrate strategies for recognizing signs and symptoms of abuse and neglect and is knowledgeable about reporting requirements.</p>	<p>Ensures program staff is aware of their role as mandated reporters and how to report suspected abuse and neglect.</p> <p>Supports staff who are making a report of suspected abuse and neglect.</p>	<p>Provide consultation and resources for programs that are making a report of suspected abuse.</p> <p>Iowa Code section 232.69 requires all mandatory reporters of child abuse to complete core training curriculum provided by HHS every three years.</p> <p>Provide Child Abuse Mandatory Reporter Poster to programs.</p>	<p>Iowa HHS Child Abuse reporting hotline 800-362-2178</p> <p>Iowa HHS Mandatory Reporter website and Online Training https://hhs.iowa.gov/report-abuse-fraud/mandatory-reporters</p> <p>HHS Mandatory Reporter Poster at https://hhs.iowa.gov/media/13666/download?inline</p> <p>Per Iowa code, CCNCs are not allowed to provide Mandatory Child Abuse Reporter Training (MCART) face-to-face training for child care.</p>
<p>13A. Provides guidance to programs on best</p>	<p>Demonstrates understanding of</p>	<p>Make referrals to Child and Adult Care Food</p>	<p>Iowa's Child and Adult Care Food Program has resources and local CACFP consultant</p>

<p>practices in nutrition and feeding for infants and children.</p> <p>The CCHC supports programs in ensuring access to nutritious food and mealtime practices and environments that are safe and developmentally appropriate for children.</p> <p>13A. Provides guidance to programs on best practices in nutrition and feeding for infants and children continued...</p>	<p>nutritional needs and safe feeding practices for healthy growth and development in infants and children.</p> <p>Helps programs encourage and support breastfeeding for young children in their care and ensure safe handling and storage of human milk.</p> <p>Collaborates with programs, caregivers, and health care providers to develop individualized feeding plans and dietary modifications for children with special health care needs, food allergies, or other health conditions.</p>	<p>Program (CACFP) for both homes and centers.</p> <p>Encourage programs to support breastfeeding and utilize resources when providing consultation.</p> <p>Offer HCCI HHS approved trainings for programs in CCNC coverage area including <i>Breast Milk Feeding Promotion and Support in Child Care training</i> for infant care providers.</p> <p>Provide consultation and care planning for children with food allergies or nutritional special needs.</p>	<p>contact information available at https://educateiowa.gov/pk-12/nutrition-programs/child-and-adult-care-food-program</p> <p>See the HCCI Training List for information on the <i>Breast Milk Feeding Promotion and Support in Child Care</i> training.</p> <p>Supporting Breast Milk Feeding fact sheet on the HCCI website https://hhs.iowa.gov/programs/programs-and-services/child-care/hcci</p> <p>Iowa Breastfeeding Database Map go to https://hhs.iowa.gov/health-prevention/birth-maternal-care/breastfeeding-support/iowa-breastfeeding-resource-database</p> <p>Food allergy resources available on the Food Allergy Research and Education (FARE) website https://www.foodallergy.org/</p> <p>Food Allergy Action Plan and CACFP Diet Modification Request form is available on the HCCI website https://hhs.iowa.gov/programs/programs-and-services/child-care/hcci</p>
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<p>13B. Works with ECE programs to ensure all children have daily opportunities for physical activity.</p> <p>The CCHC works together with programs to ensure staff are able to provide infants with sufficient opportunities for physical activity throughout the day, and toddlers, preschool, and school-aged children have opportunities for moderate to vigorous physical activity.</p>	<p>Helps programs understand how physical activity contributes to maintenance of healthy weight and development of gross motor, social and emotional, and cognitive skills.</p> <p>Helps programs integrate developmentally appropriate physical activity into children's daily routine, including outdoor play and indoor structured and free active play, and tummy time for infants.</p>	<p>Encourage programs to utilize GoNAPSACC and 5-2-1-0 resources.</p> <p>Utilize the HCCI Tummy Time fact sheet and AAP resources when providing consultation on the importance of tummy time and safety.</p>	<p>GoNAPSACC</p> <ul style="list-style-type: none"> • Training, tools and activities are available at https://gonapsacc.org/ • Register to link with ECE providers in your service area and provide TA for providers who are enrolled. Please contact HCCI Program Coordinator for the registration code https://gonapsacc.org/join-today <p>5-2-1-0 Healthy Choices Count resources are available at https://www.iowahealthieststate.com/5210-resources</p> <p>Tummy Time fact sheet available on the HCCI website at https://hhs.iowa.gov/programs/programs-and-services/child-care/hcci</p>
<p>14A. Collaborates with ECE programs to promote oral health.</p> <p>The CCHC ensures staff have the knowledge and skills to promote oral</p>	<p>Helps programs develop and implement oral health policies and procedures that include care of infants' oral health, infants who are teething, daily tooth brushing in the</p>	<p>CCNCs work with CAH to assure health care access.</p> <p>Make referrals to the local CAH agency I-Smile coordinator to access oral</p>	<p>Child Health locations https://hhs.iowa.gov/programs/programs-and-services/family-health/title-v-contractor-resources#location-of-child-and-adolescent-health-services</p>

<p>hygiene within the program, connect children to oral health services, and provide education to families.</p>	<p>classroom, preventing injury in the classroom, and preventing tooth decay.</p> <p>Ensures staff are prepared to respond to dental emergencies.</p> <p>Helps programs access oral health educational materials for families.</p>	<p>health services for children.</p> <p>Working with the I-Smile coordinator, the CCNC may be trained to provide oral health screening and fluoride varnish application.</p> <p>Provide resources and consultation regarding daily tooth brushing and dental emergencies.</p>	<p>I-Smile Coordinator map https://hhs.iowa.gov/programs/programs-and-services/dental-and-oral-health/i-smile</p> <p>I-Smile Resources https://hhs.iowa.gov/programs/programs-and-services/dental-and-oral-health/education</p>
<p>15A. Collaborates with ECE programs to reduce exposure to environmental health hazards.</p> <p>The CCHC works with programs to identify, prevent, and manage exposure to environmental health hazards in and around the facility.</p>	<p>Demonstrates understanding of the effects of exposure to environmental health hazards on children's health.</p> <p>Helps programs identify nontoxic or least-toxic products for their environment.</p> <p>Helps programs develop policies and procedures related to</p>	<p>Help programs obtain Safety Data Sheets (SDS).</p> <p>Research chemicals in use and provide consultation regarding safety.</p> <p>Utilize Environmental Protection Agency (EPA) resources when providing consultation.</p>	<p>OSHA SDS Information and Hazard Labels:</p> <ul style="list-style-type: none"> • https://www.osha.gov/sites/default/files/publications/OSHA3514.pdf • https://www.ehs.com/2013/05/nfpa-hmis-and-oshas-ghs-aligned-hazard-communication-standard/ <p>Safety Data Sheets are available online or on the product's manufacturer website.</p> <p>The EPA Product and Label System search is available at https://iaspub.epa.gov/apex/pesticides/f?p=PPLS:1</p>

	use and storage of hazardous and toxic substances and Integrated Pest Management (IPM).		EPA IPM resources are available at https://www.epa.gov/safepestcontrol/resources-pesticide-issues-school-and-childcare
16A. Helps ECE programs implement measures to prevent and manage occupational hazards for staff. The CCHC helps programs develop policies and procedures to protect staff from injury and illness.	Helps programs develop and implement staff health and safety policies in accordance with OSHA regulations and the Americans with Disabilities Act. Helps programs identify procedures to ensure staff health that include review of health appraisals and immunizations. Helps programs monitor procedures to ensure staff are protected from blood borne pathogens. Helps programs develop procedures for	CCNCs may review employee health records at the request of the ECE program director, assist director, or owner. The purpose of the review is limited to identifying specific health issues, assuring that immunizations records are up-to-date and making referrals. Provide Universal Precautions training and assistance with the development of the program's Exposure Control Plan.	CCNC provides immunization information and connects providers with resources. CCNC may work with community partners to secure funds for a special immunization project for adults. Adult Immunization Schedules are available at https://www.cdc.gov/vaccines/hcp/imz-schedules/adult-age.html Universal Precautions training and resources are available on the CCNC Gateway Exposure Control Plan & Sample Sharps Injury Log at https://hhs.iowa.gov/programs/programs-and-services/child-care/hcci Iowa OSHA Consultation & Education program

	staff to safely use toxic substances.		https://dial.iowa.gov/iosha/consultation-education
16B. Helps ECE programs identify opportunities to promote staff wellness. The CCHC encourages programs to promote wellness by creating an environment that enhances workers' physical and mental health.	Connects programs to resources and training to promote staff wellness and resilience. Helps programs promote staff health through nutrition and physical activity	Provide local resources that promote staff wellness and resilience. Encourage programs to utilize GoNAPSACC and 5-2-1-0 resources.	GoNAPSACC training and tools are available at https://gonapsacc.org/ 5-2-1-0 Healthy Choices Count resources are available at https://www.iowahealthieststate.com/5210-resources

Collaboration

The CCNC develops and maintains a linkage with child care regulatory personnel, Child Care Resource and Referral, and other community partners.

Partner	Action	Guidance
Iowa HHS Child Care Licensing Consultants and Registration Personnel	<ul style="list-style-type: none"> Prioritize and respond to requests from HHS child care licensing consultants and child development home registration personnel. HHS regulatory staff may make referrals to CCNCs for health and safety concerns. 	HHS personnel are the legal authority for the regulation of child care businesses. The CCNC working with regulatory personnel helps to improve the health and safety of children in out-of-home child care.

	<ul style="list-style-type: none"> • Within the first year of employment as a CCNC, request to job-shadow both Iowa HHS Child Care Licensing Consultant and Child Development Home Registration personnel on a visit to a child care business. • Attend HHS/CCR&R/CCNC Collaboration meetings quarterly. 	<p>The HHS Licensing and Registration Consultant Maps with contact information are available on the CCNC Gateway.</p> <p>See CCNC Role Guidance page 55 for HHS regulatory referrals process</p> <p>The CCNC should have knowledge of the federal Child Care Development Block Grant (CCDBG) Health and Safety Requirements for child care providers. CCNCs should review the “Essentials Series” health and safety modules for providing consultation related to the Essentials Series.</p>
Child Care Resource and Referral (CCR&R)	<ul style="list-style-type: none"> • Attend HHS/CCR&R/CCNC Collaboration meetings quarterly. • Make joint visits with CCR&R consultants as appropriate. • CCNC agency shall have an instructor agreement with the CCR&R lead agency. 	<p>Work with CCR&R consultants and training specialists to identify child care business needs for health and safety information or resources.</p> <p>Iowa Child Care Resource and Referral (CCR&R) http://iowaccrr.org/</p>
Child Care Businesses and Community Partners	<ul style="list-style-type: none"> • Receive and respond to invitations from community groups to promote health and safety in child care. • Conduct a minimum of one HCCI promotion or training session per year promoting child care nurse consultation in child care. 	<p>Examples: Local Early Childhood Iowa groups, Child Abuse Prevention groups, Local Board of Health, United Way, Community Foundation, Kawanis, Rotary International, etc.</p>

Hawki & Medicaid, Title V CAH, WIC programs	<ul style="list-style-type: none"> • CCNC will disseminate Hawki applications and marketing materials during on-site visits. • Children without health insurance will be referred to Medicaid/Hawki program. • CCNC will provide WIC marketing materials during on-site visits. • CCNC will be included in a local CAH agency contract either through direct employment or through a subcontract. • At minimum CCNC attends two CSA CAH staff meetings annually. 	<p>Hawki materials available at https://hhs.iowa.gov/hawki</p> <p>Medicaid information at https://hhs.iowa.gov/programs/welcome-iowa-medicaid</p> <p>WIC materials available at https://hhs.iowa.gov/wic-resources-education</p>
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Iowa Quality for Kids (IQ4K®)

Early care and education providers are required to work with the Child Care Nurse Consultant in Iowa Quality For Kids (IQ4K®). Providers applying for IQ4K® levels 2-5, will take the Medication Administration Skills Competency (online or Face to Face) 2-hour course (or other course approved by HHS) and request Medication Skills Competency evaluation (test-out) be completed by the CCNC. Providers applying for IQ4K® levels 3-5 will request the Health and Safety Checklist for Early Care and Education Programs assessment be completed by the CCNC.

- Information about IQ4K® requirements can be found on the IQ4K® (CCR&R) website at <https://iowaccrr.org/providers/iq4k/>
 - ECE providers who meet national/state quality initiatives may have a specialized track for IQ4K® application.
- The Iowa Administrative Code and information outlining the Iowa's quality rating system Rule 441.118 at <https://www.legis.iowa.gov/DOCS/ACO/IAC/LINC/Chapter.441.118.pdf>

- All staff who administer medication shall complete the Medication Administration Skills Competency Course or other training as approved by the department and hold a valid certification of completion. All staff who administer medication shall also successfully complete a competency skills evaluation assessment checklist or department-approved equivalent and hold a valid certification of completion. There shall be one person who meets these criteria present on site in the program at all times.

“Health and safety checklist for early care and education (ECE) programs” means the nationally recognized quality assessment tool, conducted by a CCNC or another designee as approved by the department, that uses key observable health and safety standards from CFOC. If followed, these standards are most likely to prevent adverse outcomes for children and staff in ECE settings. For the health and safety checklist, “observable” is defined as the following:

1. Requires interaction with the staff or director only to ask where to find an item or identify products.
2. Able to observe when walking through a program over a two-hour period of time.
3. The standard or item can be seen and evaluated in an objective way.
4. Observation may include opening windows, taking measurements (for example, measuring the depth of an impact surface or height of equipment), smelling for odors and reading labels (for example, checking dates on medication labels).
5. Does not require checking records or documents, such as child immunizations, professional development records or written program policies.

Nursing Assessment Process and Tools

The following information is to guide the child care nurse consultant (CCNC) in understanding the health and safety nursing assessment instrument process, components, and the actions needed. The nursing assessment process for health and safety begins with the child care program completing a Business Partnership Agreement (BPA) and Early Care and Education Provider Survey. The BPA and Survey serve as a foundation for the nursing process. The required assessment tool that is part of the Iowa Quality For Kids (IQ4K®) application levels 3-5 is the Health and Safety Checklist for Early Care and Education Programs. The required training that is part of the IQ4K® application levels 2-5 is the Medication Administration Skills Competency (course and test-outs). All assessment tools and training

curriculums are available on the CCNC Gateway. The CCNC receives access to the CCNC Gateway during ITPCCNC training.

Child Care Nurse Consultant Tools

Process

Protocol for On-site and Virtual Visits

CCNC On-site Visit Process:

1. On-site health and safety visits are required to assess the child care environment.
2. Contact the ECE program director/owner to arrange the visit.
3. Follow the ECE program's protocol (and agency protocol) regarding name/visitor badge and sign-in/sign out.
4. Complete BPA/survey at the initial meeting with ECE provider and determine needs of program.
5. Provide assessments, consultation, TA as needed.
6. Complete the CCNC Site Visit Form or agency's documentation protocol.
7. Record as a site visit for CCNC Performance Measure data reporting.

CCNC Virtual Visit Process (only when on-site visit is not required):

1. Refer to your agency virtual platform (Zoom, Google Meet, Microsoft Teams, etc.).
2. Schedule the virtual visit with the ECE provider.
3. Complete a CCNC Site Visit Form or agency's documentation protocol for the virtual visit.
4. Document the CCNC services provided.
5. For obtaining the provider's signature on the CCNC Site Visit Form, save as a pdf or scan the document and email it to the director for signature (or mail it with a return envelope).
6. Record as a site visit for CCNC Performance Measure data reporting.

<p>Business Partnership Agreement (BPA)</p> <p><u>Purpose:</u> To build the business relationship between the ECE provider and the CCNC. The BPA informs the provider of the scope of services available from the CCNC. The CCNC is required to complete a BPA with all ECE programs (regulated, DE) requesting and receiving CCNC services.</p> <p>To complete the BPA, a face-to-face, on-site, or virtual visit between the CCNC and ECE provider is strongly encouraged.</p>	<p><u>CCNC BPA Process:</u></p> <ol style="list-style-type: none"> 1. The BPA begins the partnership with the ECE provider and is the foundation for the relationship building between the CCNC and the ECE provider. 2. The CCNC reviews the BPA with the ECE provider (owner/director/site-director). 3. Date and signatures of the CCNC and ECE provider are obtained. 4. The ECE provider for their records keeps the original. 5. The CCNC keeps a copy of the document for the ECE provider chart at the CCNC agency. 6. The BPA is valid for 2 years. 7. The signed BPA with the program indicates that the ECE program is participating with the CCNC for CCNC Performance Measure data reporting.
<p>Early Care and Education (ECE) Provider Survey</p> <p><u>Purpose:</u> This document is referred to as the Survey. The Survey is a self-report assessment that gives the CCNC information about the ECE program, health/safety needs, and may identify potential hazards. The CCNC is required to review the Survey and begin the nursing consultation process.</p>	<p><u>CCNC Process:</u></p> <ol style="list-style-type: none"> 1. The CCNC gives the ECE program the ECE Provider Survey to complete and sign. The Survey is available in both paper and online through SurveyMonkey. Note: The Survey should be completed when the director/owner is at their business site. Completion of the Survey requires the ECE provider to review information, look up dates, etc. 2. The CCNC reviews the responses given by the ECE provider and begins to identify and document needs and health/safety recommendations. 3. The CCNC reviews the Survey with the ECE provider and provides consultation and resources to work toward remedy of identified needs. The CCNC keeps a copy of the Survey for the ECE provider record. 4. It is recommended that the Survey be completed every 2 years with the BPA.

<p><u>CCNC On-Site Visit:</u> Recommended but not required.</p>	
<p>IQ4K® Tool: Medication Administration Skills Competency Face to Face 2023-2027 edition 2-hour course and Medication Skills Competency Evaluation (test-out) Initial and Reassessment</p> <p><u>Purpose:</u> The Medication Administration Skills Competency course and test-out provides general training on the skills needed to safely administer medication to children in the child care setting. The course is not a delegation of duties.</p> <p>The course and test-out is required for IQ4K® Levels 2-5. It is available online on-demand. CCNCs may continue to offer the course for face-to-face training.</p> <p><u>CCNC On-Site Visit:</u> Required. CCNCs provide the Medication Skills Competency Evaluation (test-out) both initial and reassessment as an on-site visit.</p>	<p><u>CCNC Process:</u></p> <ol style="list-style-type: none"> 1. The CCNC offers the Medication Administration Skills Competency Face-to-Face 2-hour course collaborating with an approved training organization (CCR&R, ISU Extension & Outreach, Head Start) for posting and enrollment in I-PoWeR HHS Training Registry. Posting/enrollment recording of participant attendance is important because I-PoWeR is linked to the IQ4K® application system. 2. The Medication Administration Skills Competency Face-to-Face course training outline provides the process for the training and skills test-out. The Online Course Test-out Procedure provides the skills test-out process for online participants. 3. The CCNC obtains access to this course and skills test-out from the ISU E&O CyBox. A signed Instructor Agreement is required in order to access the course PPT, manual, handouts, skills test-out form and certificates. 4. Refer to the Medication Administration Skills Competency Course and Evaluation: Overview and Requirements on the HCCI website for additional information. 5. Participants have 30 days to complete the skills test-out. Participants have three tries to score $\geq 80\%$ on the initial and reassessment test-outs. 6. CCNCs are to sign and date the certificate of completion for <u>both</u> initial and reassessment test-outs and give to the participant. 7. CCNCs should remind participants to upload their initial and reassessment skills test-out certificates into I-PoWeR. 8. For initial and reassessment test-outs, complete the CCNC Site Visit Form or agency's documentation protocol. 9. Record initial and reassessment test-outs as a site visit for CCNC Performance Measure data reporting.

	<p>10. CCNCs are strongly encouraged to track course and test-out participants using the Medication Administration Skills Competency Participant Tracking Tool.</p> <p>11. The Medication Administration Skills Competency 2023-2027 edition course certificate is valid for 5 years. The skills competency (test-out) is a quality measure and should be reassessed per the ECE programs' quality protocol (every 1-2 years) or whenever a medication error occurs.</p>
<p>IQ4K® Tool: Health and Safety Checklist for Early Care and Education Programs</p> <p><u>Purpose:</u> The Health and Safety Checklist for Early Care and Education Programs is designed to assess the key observable health and safety Caring for Our Children (CFOC) standards, which if followed, are most likely to prevent adverse outcomes for children/staff in early care and education settings.</p> <p><u>CCNC On-Site Visit:</u> Required. Minimum of 3 on-site visits. Additional visits may be needed.</p>	<p><u>CCNC Process:</u></p> <ol style="list-style-type: none"> 1. The ECE program requests a visit from the CCNC to complete a Health and Safety Checklist for Early Care and Education Programs assessment. 2. Appointments for IQ4K® assessment tools must be scheduled within 3 weeks of the request by the ECE program. 3. The CCNC schedules an appointment for the <u>on-site visit</u>. The CCNC informs the provider about the assessment and that the CCNC needs to be on-site during food service and will need to open cabinets, read labels, open windows, measure heights of equipment and depths of impact surfaces. The CCNC may refer the provider to the IQ4K® website for additional information about the assessment https://iowaccrr.org/providers/iq4k/ 4. The CCNC assesses one classroom (or group of children) over a 2–3-hour on-site visit using the Health and Safety Checklist for Early Care and Education Programs. For home programs, assess the group of children and all child care areas in the home. Note: The outdoor playground area for the classroom (or group of children) should be assessed even if the children do not go outdoors during the day/time the CCNC is onsite. 5. At the end of the visit, the CCNC provides a verbal report to the director/owner with an overview of the assessment. The CCNC schedules the next on-site visit within a few days.

IQ4K® Tool: Health and Safety Checklist for Early Care and Education Programs continued...

6. After the visit, the CCNC completes the Health and Safety Checklist notes and calculates the average score.
7. Schedule a second on-site visit within a few days to provide the completed Health and Safety Checklist document and a blank Summary Action Steps plan to the ECE director/owner and offer assistance/consultation for creating the Action Steps. The fillable Word version of the Summary Action Steps plan may be emailed to the ECE director/owner.
8. The CCNC asks the ECE director/owner to complete the Health and Safety Checklist Summary Action Steps plan. The CCNC informs the ECE director/owner that a copy of the plan will be reviewed at the next on-site visit.
9. The CCNC schedules the third on-site visit (in 2-3 weeks) for follow-up. Allowing a couple weeks will give the provider time to fill out the Action Steps plan. Too many weeks (or months) the provider may forget what was discussed or forget that they need to fill out the Action Steps plan. The CCNC completes the fillable PDF Signature Form demographics and average score section electronically and makes two copies. Do not complete the signature and date part of the form electronically as this will be signed at the third visit.
10. The CCNC makes the third required on-site visit to review the program's Health and Safety Checklist Summary Action Steps plan, and to sign the Health and Safety Checklist Signature Form x2 that includes the average health and safety score. The CCNC keeps one copy, and the provider keeps one copy.
11. The CCNC should remind the provider to upload the signed Signature Form in the IQ4K® application.
12. The Health and Safety Checklist assessment and Signature Form is valid for 2 years.
13. If a child care business does not meet the minimum score needed for an IQ4K® level 4 (average score of 2.5) or IQ4K® level 5 (average score of

	<p>2.75), they may request a re-assessment in 60-90 days. During that time, the CCNC may offer consultation visits to assist them in making improvements identified in their Health and Safety Checklist Summary Action Steps plan.</p> <p>14. The CCNC and ECE provider maintains copies of the assessment, action plan and signed Signature Form.</p> <p>15. Complete the CCNC Site Visit Form or agency's documentation protocol.</p> <p>16. Record as site visits for CCNC Performance Measure data reporting.</p>
<p>Child Health Record Check-up</p> <p><u>Purpose:</u> To identify if children are receiving preventive health services and screenings; to identify special health or development needs; and to assist families in securing needed health care services through care coordination.</p> <p><u>CCNC On-Site Visit:</u> Required 1-2 visits, more visits will be needed if the ECE provider requests additional help with health-related policies or concerns</p>	<p><u>CCNC Process:</u></p> <ol style="list-style-type: none"> 1. The ECE provider requests the CCNC visit for an assessment of their child health records. The visit will be approximately 3-4 hours. 2. The CCNC schedules an appointment for an on-site visit. The CCNC informs the program about the assessment that will be conducted. 3. Day of the visit: The CCNC selects child health records for assessment. A minimum of 20 records should be pulled at random. If fewer than 20 children are enrolled, the CCNC assesses the records of all enrolled children. The CCNC should prioritize infant/toddler records. If no infants or toddlers are enrolled, then the CCNC should assess records moving from the youngest children enrolled to the oldest with an assessment of records from each age group. Note: The ECE provider may request records of specific children be assessed by the CCNC. Example: child with frequent illnesses, child with special needs, and child with developmental concerns etc. 4. The CCNC assesses the records for all items contained on the Child Health Record Check-up Assessment Tool. The CCNC documents items found/missing in the child's record. 5. The CCNC completes one Child Health Record Check-up Family Report form for each child to provide the family and ECE provider with health items that are missing. The CCNC may also fill out the Child Health

<p>Child Health Record Check-up continued...</p>	<p>Record Check-up Referral form for medical/dental/developmental/other referrals needed. The Referral form is attached to the Family Report form.</p> <ol style="list-style-type: none"> 6. The CCNC completes the Child Health Record Check-up ECE Provider Information form and gives it to the provider along with the Assessment Tool, the Family Report forms and a verbal report of the assessment. 7. The CCNC may ask for a copy of the Assessment Tool for the CCNC record, however, since this form includes Protected Health Information (PHI) the CCNC must ensure that the information is kept secure and confidential per their agency's policy. 8. The CCNC and ECE provider determine a timeline if a follow-up visit is requested by the provider. It is recommended that the follow-up visit be within 2-4 weeks. 9. A follow-up visit(s) may be suggested if the provider's child health records are not meeting HHS regulatory requirements; to assist with challenges the provider may have obtaining the HHS required health information from parents/guardians; to provide resources/brochures; and/or to provide consultation on medication records, illness tracking or other health policies. 10. Additional visits may be needed depending on the needs of the ECE program. 11. The CCNC shall maintain copies of correspondence and at minimum the ECE Provider Information form. 12. Complete the CCNC Site Visit Form or agency's documentation protocol. 13. Record as a site visit(s) for CCNC Performance Measure data reporting.
<p>Child with Special Health Needs Care Planning</p> <p><u>Purpose:</u> To ensure that children with special health needs have a care plan in place at the ECE program and</p>	<p><u>CCNC Process:</u></p> <ol style="list-style-type: none"> 1. The CCNC requests the ECE program to obtain a signed consent form by the parent/guardian for the CCNC to talk to the child's medical team. Sample consent form is available from California Childcare Health Program https://cchp.ucsf.edu/content/forms.

that provider/staff have knowledge and training in the care needed.

CCNC On-site Visit: Recommended 1 or more visits.

**Child with Special Health Needs
Care Planning continued...**

2. The CCNC meets with the parent/guardian and the provider to discuss the care needs.
3. The CCNC and ECE provider determine if CCNC Coaching for Professional Development credit is appropriate. Refer to the CCNC Coaching for PD process pages 54-55.
4. The CCNC may help develop the care plan (if needed) with specific info needed for child care (i.e.: what to do in an emergency, universal precautions by staff, etc.). The care plan is to be signed by the physician/medical team and the parent/guardian.
5. Any Protected Health Information (PHI) the CCNC may obtain during the care planning process must be kept secure and confidential per their agency's policy and Iowa HHS Section 2 General Terms for Service Contracts.
6. The ECE provider maintains a copy of the signed care plan in the child's health record as well as in the classroom. The parent/guardian should also have a copy of the care plan.
7. If the care plan includes emergency medication, a copy of the care plan and medication authorization/record should be stored with the emergency medication.
8. Schedule a visit where the parent, child, CCNC and the ECE provider can review the care plan. The parent may demonstrate to the provider/staff the care needed and the CCNC is present to help go over the care plan, reinforce Universal Precautions, review documentation, provide training, and answer questions.
9. For school-age children, there should already be a care plan that the school nurse would have completed for the child. The ECE provider should request that the parent/guardian provide a copy of the school plan.
10. Multiple diagnoses may need several care plans.

<p>Child with Special Health Needs Care Planning continued...</p>	<ol style="list-style-type: none"> 11. The American Diabetes Association has a school training curriculum https://www.schoolhealth.com/diabetes-skills-training-kits that has a child care section. Resources at https://diabetes.org/tools-support/know-your-rights/safe-at-school-state-laws/training-resources-school-staff/diabetes-care-tasks-school 12. For DE before/after school programs, diabetic training is available on the AEA Online learning website. 13. Children’s Hospital Colorado - resources for care planning https://www.childrenscolorado.org/community/community-health/school-health/school-nurse-resources/ 14. Video Life with a Child with a Food Allergy https://www.youtube.com/watch?v=aYNQPBtOjiE 15. <i>Type 1 Diabetes Care for Children and Adolescents -Pediatric Diabetes Education Handbook</i> (01/2024) University of Iowa Stead Family Children’s Hospital Pediatric Endocrinology and Diabetes https://www.healthcare.uiowa.edu/marcom/uichildrens/diabetes/Type-1-Diabetes-Care-for-Children-and-Adolescents.pdf 16. The CCNC role in assisting with care planning is to provide collaboration, TA, and training for the ECE provider/staff on the specifics of the plan for full and safe inclusion in the ECE program. The CCNC role is not a delegation of duties. 17. Complete the CCNC Site Visit Form or agency’s documentation protocol. 18. Record as a site visit(s) for CCNC Performance Measure data reporting.
<p>CCNC Coaching for Professional Development (PD)</p> <p><u>Purpose:</u> To ensure that children with special health needs have a care plan in place at the ECE program and that provider/staff obtain professional development credit hours when</p>	<p><u>CCNC Process:</u></p> <ol style="list-style-type: none"> 1. Refer to the CCNC Role Guidance Child with Special Health Needs Care Planning Process pages 52-54. 2. The CCNC and the director or home provider assesses if coaching PD is appropriate for child with special needs care planning

<p>receiving coaching for PD by the CCNC.</p> <p><u>CCNC On-site Visit:</u> Required minimum of 2 on-site visits. More visits may be needed.</p> <p>Coaching PD hours will be either:</p> <ul style="list-style-type: none"> • 2 hours • 3 hours <p>If the classroom staff that are being coached are not involved in the planning visit, then don't consider that time when deciding if the coaching should be awarded 2 hours or 3 hours.</p> <p>CCNC Coaching for Professional Development (PD) continued...</p>	<ol style="list-style-type: none"> 3. The CCNC will utilize the nursing process and complete the Coaching for PD Action Steps form with the director/site director/lead staff or home provider <ul style="list-style-type: none"> • Assessment: information collection related to care plan/action plan • Diagnosis: determine which coaching for PD is needed • Planning: Visit #1 with director/site director/lead staff or home provider goal setting and determining action steps to meet goal. Determine appropriate staff for coaching (maximum group size for Coaching PD is 8 participants) • Implementation: Visit #2 Provide coaching of care plan/action plan overview, training content (PPT, handouts, etc.), demonstration/return demonstration of skill (i.e.: administration of medication, checking blood glucose, etc.) • Evaluation: reflection and feedback. Determine if the goals are met or if additional visit is needed. 4. Coaching for PD Action Steps page three is the required sign-in sheet for credit hours 5. Complete the CCNC Site Visit Form or agency's documentation protocol. 6. Complete the Coaching for PD I-PoWeR CCNC Documentation survey https://www.surveymonkey.com/r/CCNCCoachingPD 7. Email the HCCI Program Coordinator the completed Coaching for PD Action Steps form (for review & fidelity) 8. Record as a site visit(s) for CCNC Performance Measure data reporting.
<p>HHS Serious Health or Safety Concern Referral</p> <p><u>Purpose:</u> To provide follow-up assessment and provide consultation to an ECE provider whose HHS licensing or registration staff have</p>	<p><u>CCNC Process:</u></p> <ol style="list-style-type: none"> 1. HHS will use information from the CCNC to write an addendum to the identified health and safety issue and will include what steps were taken to alleviate the concern. 2. Appointments for HHS regulatory referrals must be scheduled ASAP. 3. The CCNC schedules an appointment for the on-site visit.

identified a serious health or safety concern and has made a referral to the CCNC.

CCNC On-site Visit: Required minimum of 1 on-site visit. More visits may be needed.

4. The CCNC informs the provider about the HHS referral and need for an on-site visit to provide assessment, consultation and resources related to the health and safety issue.
5. The following CCNC documentation and follow-up email with HHS licensing and registration staff is required.
 - CCNC Site Visit form (include in the email)
 - Assessment Tool depending on the referral (include in the email):
 - Fencing Checklist
 - Medication Safety Checklist
 - Playground Checklist
 - Safe sleep Checklist
 - Toxic Substances Checklist
6. The CCNC Site Visit form is not optional for HHS referral visits.
7. The CCNC Site Visit form is completed during the visit - including documentation of the CCNC consultation/resources given, provider's signature and date.
8. If possible, the CCNC obtains a signed Business Partnership Agreement (BPA).
9. If unable to obtain a signed BPA, the CCNC is unable to count the provider data as a "participating provider".
10. Record as site visit/visits for CCNC Performance Measure data reporting.

Optional Forms

The CCNC may use these documents to assist in the nursing assessment and consultation process. For HHS regulatory health and safety referrals checklists are required.

- Child Health Record Check-up Referral form may be used for medical, dental, developmental or other referrals. Attach the Referral form to the Family Report with a note to the family that they should give it to their primary medical or dental provider.
- Infant Safe Sleep Checklist may be used to assess infant sleeping environments.
- Fencing Checklist may be used to assess outdoor playground fences.
- Medication Safety Checklist may be used to assess medication safety.
- Playground Checklist may be used to assess the program's outdoor play area.

- Toxic Substances Checklist may be used to assess toxic substances.
- Notice of Urgent Need is used when an issue of immediate importance is identified that impacts child morbidity or mortality. The Notice of Urgent Need should be shared with HHS regulatory personnel (homes and centers).