

Tips for Engaging in a Health Consultation Relationship ***For Early Education and Child Care Professionals and*** ***Pediatricians Who Want to Partner***

The [National Association for the Education of Young Children \(NAEYC\)](#), the foremost professional association for the early childhood field promoting high-quality early learning for all children, birth through age 8, has revised its criteria for accrediting licensed early learning programs, and now recommends that early learning programs contract and form an ongoing relationship with a health care professional to improve the health and safety of the children enrolled in that program.

To learn how best to support all programs to achieve the health-related criteria, the American Academy of Pediatrics (AAP) coordinated the 6-month pilot program *Increasing Health Professional Involvement in Child Care Programs to Improve Quality Care and Outcomes for Children* to offer pediatric health professional consultation services to child care centers.

The following tips and resources may help other early education and child care professionals and health care professionals who engage in similar partnerships.

Tips for Early Education and Child Care Professionals who want to partner with a child care health consultant:

- ❑ Determine who from the program will be responsible for interacting with the child care health consultant. Will this be the director, a designated health coordinator or advocate, or another person?
- ❑ Create a written agreement with your child care health consultant. The agreement should include the details of the relationship, specify the qualifications of the consultant, and serve as an outline for ongoing consultation activities including a program follow-up plan based on consultant recommendations. Place the agreement in your program portfolio as evidence for meeting the NAEYC accreditation criteria, and use it as a reference when describing the consultation process and purpose with staff and families.
- ❑ Be prepared. Determine what health and safety issues your program faces. Have a list of questions available and any program practices or policies for which you would like help. Organize a staff meeting to discuss health and safety issues, and identify opportunities for the child care health consultant to provide professional development for staff or provide educational sessions for parents.
- ❑ Know how the child care health consultant prefers to be contacted. Many child care health consultants are comfortable with responding to E-mails or

“Both of us had a respect for each other’s expertise in our fields of professionalism. We discussed matters as partners in the project, and I was able to get what I felt was a need for my

phone calls once a relationship has been established.

program.”

– Early education and child care professional

- Be patient as health care professionals become familiar with the world of early education and child care. Interdisciplinary work requires educating one another about the concepts, terms, and operations in each other’s usual area of function.
- Be open to change. Do what you can now, and then schedule other needed improvements. Sometimes it can seem overwhelming and difficult if the result of the child care health consultation is a long list of suggestions. Through collaboration with the child care health consultant and program staff, discussion regarding the rationale, and compromise, you can set priorities. Establish an action plan that will make steady progress to improve the safety and health of the children and staff in your program.
- Understand the child care health consultant’s purpose. A child care health consultant reviews and advises on the needs of the child care program as a whole. It is not appropriate for the child care health consultant to give specific advice on an individual child. For such advice, you need to contact that child’s health care professional in that child’s medical home.

Tips for Pediatricians who want to partner with an early education and child care program by working as a child care health consultant:

- Establish some practical guidelines for the early education and child care program.
 - Who is the responsible person with whom you will work at the program? Does this person have the authority or a direct line to a person with the authority to address the health and safety issues involved in your consultation?
 - How do you want the program to contact you for specific situations –by telephone, E-mail, fax, or letter?
 - When do you prefer the program to contact you –on a spontaneous basis, only during specific office hours, or on a regularly scheduled basis (ie, 1st Monday of each month)?
 - What is the most effective way for early education and child care professionals to present you with observations, questions, and concerns?
- Become familiar with [licensing rules and regulations](#) for the child care program. In time, you will develop ideas that you can use to advocate for better licensing rules and regulations.
- Visit the program to personally meet the staff, and familiarize yourself with the setting. Take

“It was a fascinating opportunity to be an official consultant to a day [child] care

time to observe what occurs in an early education and child care setting, gaining a perspective of a “day in the life of an early education and child care professional” as well as what children experience in a group setting.

center, and to really understand the real-world health problems they face on a daily basis. I liked visiting because it was great to get out of the office setting and practice the way general pediatrics was meant to be.”
– Pediatrician

- Demonstrate an appreciation for the particular circumstances of the early education and child care program, its challenges and its strengths.
- Understand that you are an “outside expert” and have no authority within the program to make decisions and ensure that the program follows the recommendations.
- Create a trusting and consistent relationship with the educators at the program.
- Listen carefully, ask questions, and clarify the issues involved.
- Recognize and respect each other’s unique knowledge, experience, and feelings (ie, early education and child care professionals, families, and child care health consultants).
- Show empathy and understanding of the constraints of operation of the early education and child care program. Provide the rationale for following certain recommendations. Knowing what harm is being avoided makes it more likely that the recommendations will be followed.
- Understand that illnesses in an early education and child care setting may be treated differently than in the child’s home. For example, even if a particular child's diarrhea is not considered particularly infectious, changing diapers containing diarrhea or soiled clothing poses an increased sanitation risk and strains the ability of the early education and child care professional to supervise and care for a group of children.
- Make recommendations that reinforce and build on the positive things already being done, that are cost-effective, and are easily implemented.
- Prioritize the concerns you identify from your observations and what you hear from staff and parents. Avoid overwhelming the program with too many recommendations at one time.
- Promote, but do not interfere with existing relationships between families and their children’s medical homes.

- Give clear and simple advice, verbally. Then, after discussing your recommendations and incorporating the results of a collaborative discussion, follow-up by providing an outline of the resulting suggested actions in writing with your signature and title. Written advice gives early education and child care professionals something to refer back to and share with staff. Documenting the results of the collaborative discussion and intended actions prevents errors. It also gives the early educators something they can show to parents if their credibility is questioned when implementing changes.
- Pursue a long-term consulting relationship to allow the opportunity to follow-up and evaluate progress, to develop and revise action plans, and to establish a continuous process in pursuit of quality.
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“I enjoyed learning that the pediatric community is looking to build bridges with child care centers. Most young children are in child care most of the day. Being in a group setting while their immune systems are just being developed lends its way to many, many opportunities for training, and education from the pediatric community. Many times when we follow licensing guidelines their protocols are out dated and geared for the lowest performing group of child care workers. To have someone to provide education, support and training could be a huge asset to the EC [early childhood] community.”

– Early education and child care professional

July 2017