INTRODUCTION

Every day millions of children attend early care and education programs. It is critical that they have the opportunity to grow and learn in healthy and safe environments with caring and professional caregivers/teachers. Following health and safety best practices is an important way to provide quality early care and education for young children. The American Academy of Pediatrics (AAP), the American Public Health Association (APHA), and the National Resource Center for Health and Safety in Child Care and Early Education (NRC) are pleased to release the 3rd edition of Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs. These national standards represent the best evidence, expertise, and experience in the country on quality health and safety practices and policies that should be followed in today’s early care and education settings.

History

In 1992, the American Public Health Association (APHA) and the American Academy of Pediatrics (AAP) jointly published Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Out-of-Home Child Care Programs (1). The publication was the product of a five year national project funded by the U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau (MCHB). This comprehensive set of health and safety standards was a response to many years of effort by advocates for quality child care. In 1976, Aronson and Pizzo recommended development and use of national health and safety standards as part of a report to Congress in association with the Federal Interagency Day Care Requirements (FIDCR) Appropriateness Study (2). In the years that followed, experts repeatedly reaffirmed the need for these standards. For example, while the work to prepare Caring for Our Children was underway, the National Research Council’s report, Who Cares for America’s Children? Child Care Policy for the 1990s, called for uniform national child care standards (3). Subsequently a second edition of Caring for Our Children was published in 2002 addressing new knowledge generated by increasing research into health and safety in early care and education programs. The increased use of the standards both in practical onsite applications and in research documents the value of the standards and validates the importance of keeping the standards up-to-date (4). Caring for Our Children has been a yardstick for measuring what has been done and what still needs to be done, as well as a technical manual on how to do it.

Review Process

The Maternal and Child Health Bureau’s continuing funding since 1995 of a National Resource Center for Health and Safety in Child Care and Early Education (NRC) at the University of Colorado, College of Nursing supported the work to coordinate the development of the second and third editions.

The revision of the standards for the third edition of Caring for Our Children was an extensive process. The third edition benefited from the contribution of eighty-six technical experts in the field of health and safety in early care and education. Reviews and recommendations were received from 184 stakeholder individuals - those representing consumers of the information and organizations representing major constituents of the early care and education community. Caregivers/teachers, parents/guardians, families, health care professionals, safety specialists, early childhood educators, early care and education advocates, regulators, and federal, military, and state agencies all brought their expertise and experience to the revision process. A complete listing of the Steering Committee, Lead Organizations’ reviewers, Technical Panel members, and Stakeholder contributors appears on the Acknowledgment pages.

The process of revising the standards and the consensus building was organized in stages:

1) Technical panel chairs recruited members to their panels and reviewed the standards from the second edition. Using the best evidence available (peer reviewed scientific studies, published reports, and best practice information) they removed standards that were no longer applicable or out-of-date, identified those that were still applicable (in their original or in a revised form), and formulated many new standards that were deemed appropriate and necessary.

2) Telephone conference calls were convened among technical panel chairs to bring consensus on standards that bridge several technical areas.

3) A draft of these revised standards was sent to a national and state constituency of stakeholders for their comments and suggestions.

4) This feedback was subsequently reviewed and considered by the technical panels and a decision was made to further revise or not to revise a standard. It should be noted that the national review called attention to many important points of view and new information for additional discussion and debate.

5) The edited standards were then sent to review teams of the AAP, the APHA and the MCHB. Final copy was approved by the Steering Committee representing the four organizations (AAP, APHA, NRC and MCHB).

In projects of this scope and magnitude, the end product is only as good as the persons who participate in the effort. It is hard to enumerate in this introduction the countless hours of dedication and effort from contributors and reviewers. The project owes each of them a huge debt of gratitude. Their reward will come when high-quality early care and education services become available to all children and their families!

Overview of Content and Format Changes

Caring for Our Children, 3rd Edition contains ten chapters of 686 Standards and thirty-nine Appendices. We have made the following significant content and format changes in the third edition:
• Total of fifty-eight new standards and fifteen new appendices.
• Developed new and revised standards in all areas. Some key areas of change include:
  o Use of early childhood mental health consultants and early education consultants;
  o Monitoring children’s development and obtaining consent for screening;
  o Positive behavior management;
  o Limiting screen time;
  o Promoting physical activity;
  o Swaddling;
  o Healthy eating (including MyPlate, the United States Department of Agriculture (USDA) new primary food icon);
  o Encouraging breastfeeding;
  o Hand sanitizers;
  o Sun safety and sunscreen;
  o Integrated pest management;
  o Influenza control; and
  o Environmentally friendly settings and use of least toxic products.
• Updated and added new appendices including:
  o Care plan for children with special health care needs;
  o Helmet safety;
  o Helping children in foster care make successful transitions;
  o Medication administration forms;
  o A poster on encouraging breastfeeding in early care and education settings;
  o Authorization for emergency medical/dental care.
  o Healthier eating as shown in the USDA MyPlate, which replaces MyPyramid to support healthier food choices.

For the list of new and significantly revised standards and appendices, see pages xxiv-xxix. See the Table of Contents for a list of all Appendices.

• Created new numbering system to differentiate third edition standards from the second edition. See Appendices LL and MM for conversion charts of the numbering system;
• Updated references for the rationale and comment sections and moved the references to be placed with the standard instead of at the back of the chapter;
• Added related standards at the bottom of each standard for easy referral.

Requirements of Other Organizations
We recognize that many organizations have requirements and recommendations that apply to out-of-home early care and education. For example, the National Association for the Education of Young Children (NAEYC) publishes requirements for developmentally appropriate practice and accreditation of child care centers; Head Start follows Performance Standards; the AAP has many standards related to child health; the U.S. Department of Defense has standards for military child care; the Office of Child Care (OCC) produces health and safety standards for tribal child care; the National Fire Protection Association has standards for fire safety in child care settings. The Office of Child Care administers the Child Care and Development Fund (CCDF) which provides funds to states, territories, and tribes to assist low-income families, families receiving temporary public assistance, and those transitioning from public assistance in obtaining child care so that they can work or attend training/education. Caregivers/teachers serving children funded by CCDF must meet basic health and safety requirements set by states and tribes. All of these are valuable resources, as are many excellent state publications. By addressing health and safety as an integrated component of early care and education, contributors to Caring for Our Children have made every effort to ensure that these standards are consistent with and complement other child care requirements and recommendations.

Continuing Improvement
Standards are never static. Each year the knowledge base increases, and new scientific findings become available. New areas of concern and interest arise. These standards will assist individuals and organizations who are involved in the continuing work of standards improvement at every level: in early care and education practice, in regulatory administration, in research in early childhood systems building, in academic curricula, and in the professional performance of the relevant disciplines.

Each of these areas affects the others in the ongoing process of improving the way we meet the needs of children. Possibly the most important use of these standards will be to raise the level of understanding about what those needs are, and to contribute to a greater willingness to commit more resources to achieve quality early care and education where children can grow and develop in a healthy and safe environment.

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REFERENCES: