

LDH Transferring CCHC Training to LDOE

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Credit: Rawpixel

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Abbreviations

CCHC	Child Care Health Consultant
LDH	Louisiana Department of Health
CCDF	Child Care Development Fund Block Grant
CDC	Centers for Disease Control and Prevention
CCC	Center Child Care
BFH	Bureau of Family Health
DOH	Department of Health
ECE	Early Care and Education
ECLKC	Early Childhood Learning and Knowledge Center
Hh	Hard of Hearing
LACCHC	Louisiana Child Care Health Consultant
LDOE	Louisiana Department of Education
LPN	Licensed Practical Nurse
OPH	Office of Public Health
RN	Registered Nurse
SIDS	Sudden Infant Death Syndrome



Definitions

Child Care Health Consultant - §103 qualified health and safety professional approved by LDH to provide training, consultation, and technical assistance to in- and out-of-home child care facilities and early childhood education staff (and parents) on health and safety topics.

Louisiana Department of Health - The mission of the Louisiana Department of Health is to protect and promote health and to ensure access to medical, preventive, and rehabilitative services for all citizens of the State of Louisiana.

Child Care Development Fund Block Grant - The Child Care and Development Block Grant (CCDBG) provides subsidies to assist low-income families in obtaining child care so parents can work or participate in education or training activities.

Centers for Disease Control and Prevention - CDC is the nation's leading science-based, data-driven, service organization that protects the public's health.

Center Child Care - provides care for groups of children, often placed in classrooms by age. They typically have many staff members who care for children. A child care center is managed by a center director, who oversees the program and its staff.

The Bureau of Family Health - works to promote optimal health for all Louisiana women, children, teens, and families.

Department of Health – Term used to generally identify a state governed Health Department whether or not that is the specific name of the agency in a prospective state.

Early Care and Education - Early care and education providers are teaching professionals who use age-appropriate learning materials and curricula in their classrooms, support positive interpersonal interactions, and foster a safe and secure learning environment for young children.

Early Childhood Learning and Knowledge Center - Provides programs promoting the school readiness of children ages birth to 5 from low-income families so they are prepared to succeed in school. Head Start and Early Head Start programs promote children's development through services that support early learning, health, and family well-being.

Hard of Hearing - 'Hard of hearing' refers to people with hearing loss ranging from mild to severe. People who are hard of hearing usually communicate through spoken language and can benefit from hearing aids, cochlear implants, and other assistive devices as well as captioning.

Louisiana Department of Education - The Louisiana Department of Education's primary goal is to improve the achievement of all students by improving teaching and learning in Louisiana Schools.

Licensed Practical Nurse - An individual who has completed a state-approved practical or vocational nursing program, passed the NCLEX-PN Examination and is licensed by a state board of nursing to provide patient care. Normally works under the supervision of a registered nurse, advanced practice registered nurse, or physician.



Office of Public Health - protects and promotes the health and wellness of all individuals and communities in Louisiana.

Registered Nurse -An individual who has graduated from a state-approved school of nursing, passed the NCLEX-RN Examination, and is licensed by a state board of nursing to provide patient care.

Sudden Infant Death Syndrome - Sudden infant death syndrome (SIDS) is the unexplained death, usually during sleep, of a seemingly healthy baby less than a year old. SIDS is sometimes known as crib death because infants often die in their cribs.



Credit: lacchc.org

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Project Topic: Child Care Health Consultant Training Transitioning to Louisiana Department of Education

Project Description: Providing options for CCHC training to transfer responsibility from the Louisiana Department of Health (LDH) to the Louisiana Department of Education (LDOE) to assume responsibility for the Child Care Health Consultant Program (CCHC) training and certification. The options recommended will focus on the proper training of the Child Care Health Consultant so that they have the skills to offer appropriate training to early learning programs.

The Problem: The process of credentialing CCHCs and coordinating the operations of a CCHC program is not aligned with the current priorities of the Office of Public Health (OPH), Bureau of Family Health (BFH), and business planning of the Louisiana Department of Health (LDH).

Because LDOE credentials and licenses early learning centers across the state through Title 28-Education, Part CLXI. [Bulletin 137-](#)

Louisiana Early Learning Center Licensing Regulations, and because LDOE mandates that early care and education centers have certain health and safety training in order for a center to be licensed, it is reasonable for LDOE to manage all training required for early learning centers. Assuming ownership of the training would help ensure uniformity in the regulatory direction of licensed facilities. If LDOE continues to authorize local CCHCs to provide the required health and safety training, LDOE’s management of CCHC credentialing will provide succinct direction in alignment with licensing requirements. Currently, providing training through CCHCs credentialed under LDH can create discontinuity between licensing regulations and public health direction. Caring for Our Children states that a CCHC should have knowledge of “State child care licensing requirements.”¹ Alignment of the CCHC with LDOE will help ensure quality health and outcomes for children in state-regulated childcare programs.

Evidence:



Credit: ffyf.org

Child Care Development Fund Block Grant (CCDF)

The Child Care Development Fund Block Grant (CCDF) identifies its administrator as the Deputy Assistant Superintendent of Early Childhood Operations and the lead agency as the Louisiana Department of Education. As it is with most states and the CCDF that the agency and administrator that are responsible for the block grant both fall under the same agency that regulates childcare facilities. The CCDF Plan For Louisiana FFY 2022-2024 provides no specific description under the “Child Care Health Consultation ” section of the narrative of what or who is responsible for training. In section 5.3 of the CCDF 2022-2024 titled “Health and Safety Standards and Training for CCDF Providers' ' in all sections where health and safety are addressed the block grant identifies that training is offered through

licensing with online classes. Additionally, it states that guidance is supported by Licensing Consultants and Licensing Specialists.⁴ Although there is no narrative regarding who is responsible for training Child Care Health Consultants there are health and safety requirements for all providers that receive payments from the CCDF subsidy program. The following training is required for programs receiving subsidy payments:

- Brief #1: Prevention and Control of Infectious Diseases
- Brief #2: Administering Medications
- Brief #3: Prevention of and Response to Emergencies Due to Food and Allergic Reactions
- Brief #4: Reducing the Risk of Sudden Infant Death Syndrome and Using Safe Sleeping Practices
- Brief #5: Building and Physical Premises Safety
- Brief #6: Emergency Preparedness and Response Planning
- Brief #7: Handling, Storing, and Disposing of Hazardous Materials and Biological Contaminants
- Brief #8: Transportation of Children

Definitions and standards required for CCDF subsidy based on Louisiana’s agreement with the Child Care Development Fund Block Grant can be located here:

<https://www.louisianabelieves.com/docs/default-source/early-childhood/2022-2024-ccdf-approved-state-plan.pdf?sfvrsn=5306518>

State Regulation

LDOE is the lead agency operationalizing [Bulletin 137](#), which was the result of the passage of Act 3 of the 2022 Regular Session of the Louisiana Legislature. The Bulletin and the ensuing operations require credentialed centers to have evidence of initial and ongoing staff training that includes a myriad of health and safety topics. The following regulations and definitions are required according to [Bulletin 137](#) regarding Child Care Health Consultants and what training they should be able to provide to early learning centers:

- **§103** LDH is currently approved to designate who qualifies as a CCHC, “*Child Care Health Consultant – qualified health and safety professional approved by LDH to provide training, consultation, and technical assistance to in- and out-of-home child care facilities and early childhood education staff (and parents) on health and safety topics*”.
- **§1721 1 E** “three hours of training by a child care health consultant on infectious diseases, health and safety, and/or food service preparation”.
- **§1725 A-C** All staff that administers medication are required to have medication administration training every two years with an approved CCHC or a minimum of two staff on duty with approved training for centers that do not administer medication.

Based on state regulations for training that a CCHC should be able to provide to a center it is recommended that CCHCs have the following training:

- Infectious Disease
- Health and Safety
- Food Service Preparation
- Medication Administration



Credit: naeyc.org

National Best Practices

According to the US Department of Health and Human Services, Early Childhood Learning and Knowledge Center “Child care health consultants (CCHCs) support the health, safety, and wellness of young children, families, and staff in early care and education (ECE) settings. They foster quality care by observing for recommended practices and identifying hazards in the facility or family child care home. CCHCs collaborate with directors, teachers, and family child care providers to help them comply with regulations, standards, and promote best practices to ensure children’s safe and healthy development.”⁷ Although state requirements may be less restrictive and because Louisiana is obligated by the Block Grant it is recommended that all CCHCs have the training described by the US Department of Health and Human Services, Early Childhood Learning and Knowledge Center. The following training is included:

- Prevention and Control of Infectious Diseases
- Administering Medication
- Prevention of and Response to Emergencies Due to Food and Allergic Reactions
- Building and Physical Premises Safety
- Emergency Preparedness and Response Planning
- Handling, Storing, and Disposing of Hazardous Materials and Biological Contaminants

- Transportation of Children
- Reducing the Risk of Sudden Infant Death Syndrome and Using Safe Sleeping Practices

National standards and resources for training and developing state practices for CCHCs can be located here:

<https://eclkc.ohs.acf.hhs.gov/health-services-management/article/resources-child-care-health-consultants>

There are also resources recognized by the US Department of Health and Human Services for their national education that include the National Child and Health Education Program (NCMHEP). The NCMHEP has resources and toolkits available that were previously sourced from the now-dissolved National Training Institute for Child Care Health Consultants which was a federally funded program from 1997-2013.¹² Training toolkits can be located here: <https://www.ncemch.org/child-care-health-consultants/index.php>



Credit: gradcoach.com

Data

Qualitative and quantitative data reflect higher rates of regulatory compliance with licensing bodies with medication administration, training, and storage when inspections are completed by the licensing body.³ Thus, it is reasonable to conclude that if the same department that

licenses the facility also trains the Child Care Health Consultant, facilities will have greater compliance with regulations and children’s medication will be effectively handled. “Among 214 CCC (Center Child Care) including children under 3 years old, half of CCC with a trained CCHC were classified as Low Non-compliance with medication administration while only 39.5% of CCC which did not have a trained CCHC were in the Low Non-compliance group. This finding reveals that CCHC (child care health consultant) trained may reduce non-compliance with medication administration, but statistical significance was marginal with a p-value of 0.08”.³

Cultural Demographic Consideration



Credit: Savon Kreol

6.9 percent of Louisianans are Hispanic or Latino, and 368,300 speak a language other than English at home with 119,591 reportedly speaking English less than very well. 150,424 of that number speak Spanish with 65,395 reportedly speaking English less than very well. The second most common language is Indo-European, including French, Patios, and Cajun, reflecting 154,092 of Louisiana’s population and 25,649 speaking English very well.⁵ Because the second and third most common languages spoken are Spanish and French with French



being more common and since the LDOE offers its orientation training in English and Spanish it is reasonable to consider and offer training not only in English but in Spanish and French.

According to the CDC, 8 percent of Louisianans are Hh Hard of Hearing so training should also be offered in closed captioning.

Recommendations for Transferring CCHC Training

What LDH will do for LDOE:

- Public Health to provide LDOE a way to reach out to nurses interested in CCHC
- Public Health to include the “sunset” date on lacchc.org, Facebook, and Twitter page and include a link to LDOE’s page and/or handover page
- Public Health to provide above-stated training in PowerPoint format may include audio recording
- Public Health to assist in changing the definition of Child Care Health Consultant to state “approved by LDOE”

What LDH will do for CCHC:

- Public Health to provide recorded training in medication management, medication administration, anaphylaxis, infectious diseases, epinephrine, Sudden Infant Death Syndrome, and Shaken Baby Syndrome by a Registered Nurse

- Public Health to provide food safety training to include storage and preparation of breast milk (or RN) by a Sanitarian

Recommended actions for LDOE

- LDOE to provide bilingual training through transcripts or another platform
- LDOE to provide online training and certification for CCHC training

Key Resources:

- Access to Registered Nurses
- Online training and certification issuance capacity by LDOE
- Access to lacchc.org and CDC health information by LDH
- Agency leadership support for shared learning and collaboration
- LDOE currently uses <https://www.udemy.com/course/bulletin-137-louisianas-elc-licensing-regulations-4>
- Analytic and policy development

Options	Complexity of Analytic Tasks	Requires Continuity of Effort	Requires Understanding of Other's Context (Vocabulary, priorities, pressures)	Potential to Generate Policy and/or System Change to Address Inequities
Public health to provide access to website and resources available on lacchc.org	LOW when transferring access and resources	N	N	+
Public Health to assist in updating the policy to reflect LDOE is responsible for training	MEDIUM when rewriting policy and going before legislation LOW when becomes routine	N	N	++
Public Health to provide LDOE a way to reach out to nurses interested in CCHC	INTENSIVE to establish (?) LOW when becomes routine	Y (Long-term)	N	+++
LDOE to offer online training and certification of the CCHC program	INTENSIVE to establish LOW when becomes routine	Y (Short-term/ project-specific)	Y (at targeted levels; stronger if at leadership levels too)	+++



Training for CCHCs to use with Centers

Infant Feeding in Child Care Centers Training	Date Last Updated
Infant Feeding Best Practice in Child Care Centers	September 16, 2022
Presenter's Guide-It Takes a Village	September 16, 2022
Child Care Center Infant Feeding Checklist	September 16, 2022
Sample Center Infant Feeding Plan	September 16, 2022
Human Milk Errors and Mix Ups	September 16, 2022
CDC Human Milk Storage Guidelines	September 16, 2022
CDC Tips for Safe Infant Feeding in a Disaster	September 16, 2022

Outdoor Play and Learning Training	Date Last Updated
Training Manual	February 25, 2022
Outdoor Play Slide Presentation	February 25, 2022
Review and Reflect Sheet	February 25, 2022
Pre-Assessment	February 25, 2022
Post-Assessment	February 25, 2022



Answer Key Post-Assessment	February 25, 2022
Action Plan	February 25, 2022
Outdoor Play Policy Handout	February 25, 2022
Let's Go Outside Handout	February 25, 2022
Let's Get Active Handout	February 25, 2022

Training to Certify CCHCs

LACCHC Training Slides	Date Last Updated
Module 1: What a LACCHC Should Know	July 1, 2020
Module 2: The LACCHC Program	July 1, 2020
Module 3: Sanitary Code	July 1, 2020
Module 4: Food Safety	July 1, 2020
Module 5: Medication Administration	July 1, 2020



Description of Training

This section will include a description of the most current training available on the LACCHC website dated 2020 and going forward.

Module 1: What a LACCHC Should Know: Training includes audio detailing the history of the CCHC in Louisiana, skill sets a CCHC should have, consultation skills, assessment skills, and the intervention process. Slide 8 is recommended for update if using as it references the 3rd edition of CFCO and currently the 4th edition is utilized.

Module 2: The LACCHC Program: Training includes audio detailing the CCHC training in Louisiana as well as responsibilities and the role of the CCHC.

Module 3: Sanitary Code: Training includes audio detailing the sanitizing process, water borne illnesses, surfaces that become contaminated, policies, types of sinks and use, bottle handling, diaper changing areas, handwashing. Additionally, this module covers the outdoor play area which includes equipment regulation and gate requirements. LDOE may consider separating the outdoor play training into a separate module for ease of access.

Module 4: Food Safety: Training includes audio detailing food borne illnesses (bacterial, parasites, fungal, and viral), food borne illness classification, conditions for bacteria growth, personal hygiene, guidelines for receiving food (ensuring food was handled properly during transportation), FIFO (first in first out), storing raw foods below ready to eat, and preventing cross-contamination.

Module 5: Medication Administration: Training includes audio detailing the medication form, types of medication, side effects, adverse reactions, preventing medication errors, medication storage, and maintaining the confidentiality of child files.

Food Allergies & Healthy Nutrition for Children in Child Care: No audio in training includes details of food allergies, symptoms, treatment, prevention, child obesity rates, health issues from obesity, breast milk storage and benefits, nutritional needs by age, and physical activity for children.

Safe Sleep Presentation: Includes information intended to be used by a CCHC with early learning facilities that includes causes of Sudden Infant Death Syndrome as well as appropriate sleeping equipment and positioning. Slide 20 and 31 contain outdated information. The presentation could be edited and made into audio training for CCHCs in addition to early learning programs. This presentation was developed by the National Training Institute for Child Care Health Consultants.



Description of Training for Centers

Infant Feeding Best Practices in Child Care Centers: Includes activities and data on breastfeeding in Louisiana to be used for centers. Also discusses benefits to the baby, toddler, and parent, as well as formula feeding, pumping, and how to prepare. There is no audio with this training and it is intended to be instructor led but can have audio included to be fully automated.

Outdoor Play Slide Presentation: A presentation developed by Well Ahead (a disease prevention and health care arm of the Department of Health) in connection with Pennington Biomedical (Louisiana State Universities biomedical research center). The presentation includes references to assessments available on the LACCHC website to be used as a tool alongside the presentation. The presentation includes questions about outdoor play frequency, professional development, outdoor policies, outdoor learning, studies that show the benefit of outdoor play, and interactive activities regarding outdoor play time.



Logic Model				
Inputs	Activities	Short-Term	Interim	Long-Term
Peer-reviewed studies Training on lacchc.org Caring for Our Children Previous work experience as a Child Care Licensor with DCYF	Meet with Jennifer Helseth DCYF Research peer-reviewed articles qualitative data, and policy brief	Sunset date of CCHC training with LDH on Twitter, Facebook, and lacchc.org	Updating the definition of CCHC found in §103 LDOE developing a training and certification platform for CCHC	Improved medication management Increased awareness of anaphylaxis Lower rates of communicable disease outbreaks

INPUT DETAILS

Peer-Reviewed Studies

Peer-reviewed studies and data were used as input from studies that informed a nationally-funded CCHC training program supported by the Maternal Child Health Bureau with the foundational values found in Caring for Our Children.

LACCHC.org

Trainings available on lacchc.org were used to reference the availability of trainings to provide the LDOE based on state and national requirements in conjunction with the CCDF requirements.

Caring for Our Children

Information regarding CCHC standards found in Caring for Our Children was used as a

benchmark of best practices and skills that CCHCs should have due to their national recognition.

Previous Work

The authors previous work experience as a Child Care Licensor was used to direct the focus and crafting of this policy brief. The author integrated and/or researched based on feedback that licensees provided when working as a licensor in the Early Learning field.



ACTIVITY DETAILS

DCYF

The author met with previous employer and staff member currently responsible for CCHC training in Washington State to learn about the agencies experience of transitioning CCHC training from the DOH to DCYF.

Research

The research was conducted on previously mentioned studies and qualitative and quantitative data was documented and included in the policy brief to inform the recommendation of transferring CCHC training.

SHORT-TERM DETAILS

Sunset Date

Immediate steps for transitioning the CCHC training will include providing a date on prospective platforms of when the LDH will no longer be the agency in charge of training and a link to the LDOEs platform where CCHC training can be found.

INTERIM DETAILS

Definition

LDH will work with LDOE to update the definition of CCHC from “qualified health and safety professional approved by LDH LDOE to provide training, consultation, and technical assistance to in- and out-of-home child care facilities and early childhood staff (and parents) on health and safety topics.”

Training Platform

LDOE to develop a platform for training and certification of CCHC training.

LONG-TERM DETAILS

Medication Management

Medication management will increase in the long term and violations of regulations related will decrease this is inclusive of documentation, appropriate dose, and in-date medication.

Anaphylaxis

Increased awareness of anaphylaxis warning signs and managing allergies will result from the training provided to centers by CCHCs with a better understanding of the knowledge of regulatory requirements.

Communicable Diseases Increased knowledge of prevention and health standards for Early Learning programs will result in lower rates of Communicable Disease outbreaks.

Appendix 1

Required Training According to State Regulation and CCDF on LACCHC Table 1

Training	Prevention and Control of Infectious Diseases	Administering Medication	Health and Safety	Food Service Preparation	Prevention and Response due to Food and Allergic Reactions	Reducing the Risk of SIDS and Safe Sleep	Building and Physical Premises Safety	Emergency Preparedness and Planning	Transportation of Children	Handling, storing, and disposing of hazardous and biological contaminants
State Requirement	✓	✓	✓	✓						
CCDF Requirement for Subsidy Payments		✓		✓	✓	✓	✓	✓	✓	✓
Training Currently on LACCHC and title	✓ Module 3: Sanitary Code	✓ Module 5: Medication Administration		✓ Module 4: Food Safety	✓ Food Allergies & Healthy Nutrition for Children in Child Care	✓ Safe Sleep Presentation	✓ Module 3: Sanitary Code			

Table 1 Reflects the name of the training topic and includes a check next to if the training is required based on State regulation or the Child Care Development Fund with the last row reflecting if training is available on LACCHC and what the name of the training is.



Appendix 2

Approved Programs that Qualify a CCHC Table 2

Organization	Website	Duration	Platform	Cost
UNC Gilling's School of Global Public Health	http://www.healthychildcare.unc.edu/	3 Month	Online/In Person	850\$ plus fee for in person session
UCSH California Childcare Health Program	https://cchp.ucsf.edu/resources/training-curricula/california-training-institute-curriculum-child-care-health-consultants	Self-Paced	Online	Free
Early Childhood Education Linkage System	http://ecels-healthychildcarepa.org/professional-development-training/self-learning-modules.html	Self-Paced	Online	15\$ per topic for review by a ECELS staff

Table 2 Reflects a recommendation of approved programs that qualify an individual as a Child Care Health Consultant. The programs align with National Best Practices and include a link to the training, the platform, the cost, and the duration of the programs.



Appendix 3

Recommendations and Tasks by Agency Table 3

Agency	Training	Communication	Other Recommendations
LDH	Provide LDOE training and documents currently available on LACCHC	Announce the sunset date on lacchc.org, Facebook, and Twitter to include a redirect to the LDOE page Provide a method to reach RNs	Assist in changing the definition of Child Care Health Consultant found in §103
LDOE	Provide online training and certification	Provide bilingual training in Spanish and French Provide closed captions for training	Utilize training on https://www.ncemch.org/child-care-health-consultants/index.php due to national accreditation

Table 3 Reflects recommendations for LDH to support the transition of training to the LDOE as well as recommendations for the LDOE to implement training of CCHCs.



Appendix 4

National Comparison of CCHC Training Table 4

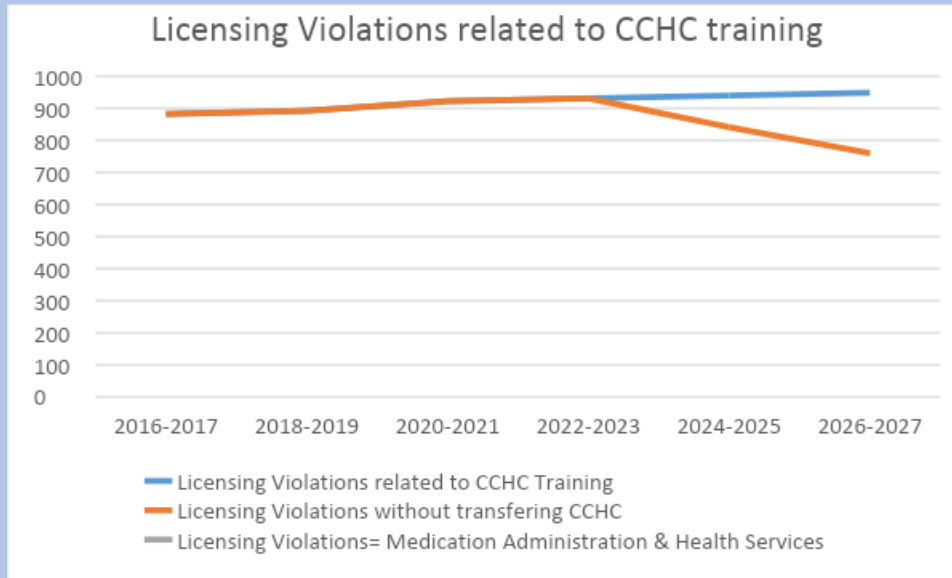
State	Training Requirement	Training Platform	CCHC Presence	Block Grant Requirements Managed By	Regulation Referenced
Mississippi	None	None	No	Department of Health	Title 15 Part 11 Subpart 55
Florida	None	None	Offered by the Department of Health as a walk-in by-appointment service	Florida Department of Education/Division of Early Learning (DEL)	Chapter 65C-22
Texas	Yes	Online through Texas A&M AgriLife	Online listed in a registry	Texas Workforce Commission	Title 40 Part 20 Chapter 809
Arkansas	None	None	No	Arkansas Department of Human Services	Title 16 Division 22 Chapter 20

Table 4 Reflects how neighboring states administer CCHC training and if there is a requirement for presence of CCHCs in the state.

Graph

Graph 1

Decrease in Licensing Violations with transferring CCHC training to LDOE



Graph 1 Reflects the licensing violations related to Medication Administration and Health Services. Health Services regulations according to [Bulletin 137 §1915](#) include temperatures over 100 degrees and provide parents with information related to influenza. The chart starts as a baseline detailing the years passed in which CCHC training has not been transferred to the LDOE bringing us to the current and future years. Data is based on information from the [Louisiana Legislative Auditor](#) which reported licensing violations for the years 2016-2017 and detailed licensing infractions. Data showed the department had 437 violations for Health Services and 446 violations for lack of Medication Management training respectively.⁸ Louisiana does not make publicly available data based on violations by regulation type so changes and increases in violation were based on the change in the capacity of licensed early learning centers in Louisiana.⁹ Data reflecting the increase in compliance with health



services and medication administration was based on a peer-reviewed article comparing compliance of state-funded programs to those who have trained with a Health Consultant.³

Acknowledgments

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