



Questions to Ask a Child Care Center

You can make visits to daycare centers and talk to their staff before you make a final decision on which center is best for your child. Below is a list of questions you can use to begin a conversation. Think about the other things that are important to you.

Make a list of your questions. Plan what you want to ask before you go.

- ✓How many of your staff are trained in CPR and first aid?
- ✓Is the center licensed? Is the staff licensed? By whom?
- ✓How are substitutes hired and used in case of staff illness? Do they have the same type and amount of training as your regular staff?
- ✓Do you have experience in working with children with health issues? What types of health issues do you have experience with?
- ✓What ages do you serve? What ages are placed together?
- ✓What is the procedure for dealing with illness or accidents involving children?
- ✓Is your facility handicap accessible? What do you do if my child needs to use crutches, a wheelchair, or has mobility issues?
- ✓What is the procedure for reporting unusual marks on my child?
- ✓Does your staff carry emergency phones when taking children to activities outside the center's facilities?
- ✓Do you have a regular schedule for each day?
- ✓What is the napping policy/procedure?
- ✓What regular communication plan is in place for your reporting on my child's day-to-day activities? Does it include health and diet related information?
- ✓What kinds of meals are served? What provisions are made for special dietary needs, including allergies? Is there a menu?
- ✓Do you have a parent handbook?
- ✓What is your policy on parent visits?
- ✓Does your center hold meetings for parents?
- ✓What are the hours of operation? For what holidays is the center closed? What is the policy on late or early pick up or drop off?
- ✓What are the emergency preparedness plans in case the facility needs to be evacuated? How will you contact parents? Where does the center evacuate in an emergency?
- ✓Are you willing to keep my child's medication in the refrigerator for use in an emergency?



Questions Courtesy: STEPSforLIVING.hemophilia.org



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Language assistance services are available free of charge. Call: 1-800-996-2575.
ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-996-2575.
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Cascade... A Trusted Partner in Your Circle of Care

Cascade Hemophilia Consortium

Chelsea Seal, Director of Operations



Chelsea

Dear Readers,

"It takes a village to raise a child..." When my husband and I became parents, one of the first important decisions we had to make was where our son, Brekin, would spend his day while we were at work. The thought of being away from your child can be anxiety-inducing for any parent, not to mention the added layer of complexity for our parents who have a child with a bleeding disorder. However, the good news is that you are not in this alone! As with all aspects of your child's care, your HTC and Cascade are here to partner with you so you can be confident in your childcare decisions. Throughout this newsletter you will find ideas and resources that we sincerely hope will help ease at least one of the uncertainties you may be experiencing in the beautifully messy journey of parenthood.

Cascade News Pharmacy Director & Avid Runner, Mike Altese, Makes Cascade Proud!

On March 17, Mike put his love of running to good use with Team NHF in the 2019 NYC Half Marathon. Mike was one of 13 athletes to raise funds for the bleeding disorder community and the only team member from Michigan to participate. As always, his goal is to support the whole bleeding disorder community.



The National Hemophilia Foundation uses the money raised from the run to benefit:

- Education and Training
- Research and Medical Education
- Advocacy and Public Policy
- Chapter Services

This was Mike's first NYC Half Marathon, but it may become a tradition.

Kudos Mike! Great Job!

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It Takes a Village: Locating Safe and Appropriate Childcare Perspectives from the Community



Diane Sassak, Ed.S., CSP, husband, Jason, and sons, Nolan, Gavin, Alec

Diane and Jason Sassak are the parents of three active boys Nolan, 11, Alec, 9, and Gavin, 5, all of whom have severe Hemophilia A. When we approached Diane about being interviewed for the newsletter, she was more than happy to share her experiences with childcare. Diane's first career was as an Early Childcare Certified Teacher. She is now the Certified School Psychologist for the Plymouth/Canton School District.



Laura McGinity, LMSW

Laura McGinity, LMSW has over 30 years of experience as the Clinical Social Worker at the University of Michigan Hemophilia Treatment Center. As a part of her position, she provides educational information to families, daycare facilities, babysitters and other care-givers within the family.

Cascade: *When your first child, Nolan, was born did you feel any anxiety about finding an appropriate childcare program for him? Did his having a bleeding disorder make it any different for you?*

Diane: I didn't have a great deal of anxiety only because my background is in Early Childhood Development and I have knowledge in that area. But I understand it can be initially anxiety-producing whenever any parent is leaving their child in the care of others.

Regarding the bleeding disorder, we were initially deciding between an at-home daycare and a daycare facility. I was concerned with multi-aged children in one particular home I visited; infants, small kids and big kids were all in one area. It seemed like a lot of rough playing with only one care giver. What if she was changing a diaper and an older child pushed my younger child? Because of this, we chose a daycare center with larger classrooms and a lot more eyes.

I also chose a larger facility because I thought if one teacher was out sick, the other teachers would know my child.

Cascade: *It sounds like Diane had some good personal preferences and characteristics she looked for in a daycare center. Are there any other options to consider?*

Laura: There are many great options for childcare, and it is very much a personal choice. Some people prefer the smaller environment of a home and some a bigger program. Many at-home daycare programs are licensed and you should evaluate them in the same manner you would a preschool or facility. You want to be sure their license is in order and the caregiver-to-child ratio is small and appropriate. They should also offer you a firm back-up plan if the primary caregiver is ill.

Cascade: *What other qualities did you look for in a childcare facility?*

Diane: There were two important decision points for us. The most important was to be sure the facility was a licensed daycare.

A licensed daycare has to follow State regulations, and the facility receives annual site visits. I thought that was the best way to ensure the facility was following a good protocol.

Equally important to me was how the center communicated with us. I think every parent should evaluate how well they communicate with you. Are they sharing the events of the day? Are they telling you how your child is interacting with the other kids?

Some centers even have cameras in their rooms so that the parents can check in. I feel ambivalent about this because it may not allow you to release the child emotionally, which is something you both need.

Parent Responsibilities

- ✓ Work with your HTC on how to educate caregivers about the bleeding disorder.
- ✓ Teach caregivers to call parents if they think there is a bleed, even texting a picture of the bleed.
- ✓ Be sure caregivers have all treatment center contacts in case they are unable to reach mom or dad.
- ✓ List the HTC phone number on the daycare's emergency contact list and be sure the HTC has a release to talk to the daycare staff.

Cascade: *How much bleeding disorder training should a daycare facility or caregiver receive? I understand the HTC occasionally visits a daycare with the parents for training. What is discussed?*

Laura: We might see situations when it's appropriate for a staff person to provide an educational visit with the childcare provider. At the visit we educate the staff about the bleeding disorder, how to recognize a bleed and how to distinguish a small bleed from a life-threatening one.

We assist the family and care-provider in establishing an emergency plan. The plan includes when and who to call and if factor will be kept at the daycare to go with the child to the hospital. The parents should list the preferred hospital in the child's file.

The discussion definitely needs to be balanced. We want to be sure that the teachers don't over-protect the child so much that he or she can't have a 'normal' and safe experience that all children would have at a daycare or pre-school.

Diane: Our youngest son, Gavin, had a teacher who was not comfortable with his bleeding disorder. Although well meaning, we realized that she was keeping Gavin with the younger kids. He couldn't develop his confidence, independence and social skills and this was not acceptable to us. We wanted a larger facility instead of a nanny at home so that he would have age appropriate social interactions. It just wasn't working for us, and we had to move him.

In preschool, the HTC provided training to Nolan's teachers. The teachers were concerned that they would have to administer the factor. I explained to them that in a real emergency if they couldn't get a hold of me or my husband or our HTC right away, call an ambulance and the emergency room staff will administer the factor. The HTC was a great help.

Cascade: *What advice would you give to newer parents who are looking for a safe and appropriate childcare provider? What are your final thoughts?*

Diane: First, I would recommend talking to the director and teachers face-to-face to assess how openly they communicate. Also, evaluate whether they ask questions and seem interested in learning about the bleeding disorder. You need to be able to trust each other.

Ultimately, parents should follow their gut and be extra vigilant. Fortunately, my boys have never been hurt at daycare, but we felt confident it would have been fine if they were, because we had a solid plan.

As a bonus tip, remember that 1-2 year old kids want to bite! That stage will pass quickly.

Observations and Gut Feelings

- ✓ How did the people and place make you feel?
- ✓ Was staff open to questions in general?
- ✓ Was staff available when they said they would be?
- ✓ How does it look and smell? (including bathrooms and eating area)
- ✓ Are there sufficient toys or equipment to keep kids busy indoors and out?
- ✓ Is there low staff turnover?
- ✓ Is the location safe and secure from unwanted visitors?

Suggestions

- Show up unexpectedly to see what a usual day looks like.
- Watch how staff is interacting with each other and with the Director. This could indicate the general mood of the daycare.
- Discern whether they offer unsolicited information about your child (how the day went, how the child slept or ate, etc.).



Cascade Mission Statement

To enhance the system of care for people with bleeding disorders and its related complications, including HIV and Hepatitis C disease, by assuring the lowest possible price for the full range of clotting factor concentrates, HIV related therapies and other medications available to treat their disease; to provide access to these medications for those who have inadequate insurance coverage; to support the comprehensive hemophilia treatment centers in treating and educating consumers and their families so they may become knowledgeable and proactive in managing their own care; to fund research to find a cure.