2ND REPORT OF THE

CHILDCARE ADVISORY COMMITTEE

Meeting held on April 29, 2015, commencing at 1:00 PM, Committee Room #4, Second Floor, London City Hall.

PRESENT: D. Gordon (Chair), T. Blaney, N. Elhayek, B. Jackson, J. Keens, S. McKee, J. Rinker, A. Ryan, K. Wated and J. Martin (Committee Secretary).

ABSENT: S. Carter and C. Wagg.

ALSO PRESENT: E. De Freitas, I. Gibb, J. Haveman and A. Rae.

I. CALL TO ORDER

1. Disclosures of Pecuniary Interest

Recommendation: That it **BE NOTED** that J. Rinker declared a pecuniary interest in clause 11 of this Report, having to do with the Notice with respect to the property located at 165 Elmwood Avenue East, by indicating that she is employed by the YMCA.

II. ORGANIZATIONAL MATTERS

2. Election of Chair and Vice-Chair

Recommendation: That D. Gordon and J. Keen BE APPOINTED Chair and Vice Chair, respectively, for the term ending November 30, 2015.

3. Committee Orientation

Recommendation: That it **BE NOTED** that the Childcare Advisory Committee (CCAC) orientation from J. Martin, Secretary, was received.

III. SCHEDULED ITEMS

4. Urban Design and GIS and Downtown Design Manual

Recommendation: That it **BE NOTED** that the Childcare Advisory Committee (CCAC) received a presentation from B. O'Hagan, Urban Designer, with respect to the draft Urban Design and GIS and Downtown Design Manuals; it being noted that CCAC established a working group to develop comments for consideration with respect to this matter.

5. Licensed Child Care

Recommendation: That it **BE NOTED** that the Child Care Advisory Committee received the <u>attached</u> presentation from S. Ingram, London Middlesex Health Unit, with respect to Licensed Child Care.

6. Child Care Update – Wage Subsidy

Recommendation: That it **BE NOTED** that the Child Care Advisory Committee received a verbal update from A. Rae, Manager, Children's Services, with respect to the child care service plan and the wage enhancement grant.

IV. CONSENT ITEMS

7. 1st Report of the Childcare Advisory Committee

Recommendation: That it **BE NOTED** that the 1st Report of the Child Care Advisory Committee, from its meeting held on January 29, 2015, was received.

8. Appointments of Members to the Child Care Advisory Committee

Recommendation: That it **BE NOTED** that the Municipal Council resolution from its meeting held on February 24, 2015 with respect to appointments to Child Care Advisory Committee, was received.

9. Child Subsidy Application and Placement Statistics

Recommendation: That it **BE NOTED** that the Child Care Advisory Committee (CCAC) received the <u>attached</u> Child Subsidy Application and Placement Statistics for the period ending March 2015.

10. Childcare Occupancy Data Report

Recommendation: That it **BE NOTED** that the Child Care Advisory Committee (CCAC) received the <u>attached</u> Childcare Occupancy Data Report for the period ending March 2015.

11. 165 Elmwood Avenue East

Recommendation: That it **BE NOTED** that the Notice dated March 13, 2015, from B. Debbert, Senior Planner, with respect to the property located at 165 Elmwood Avenue East, was received.

V. SUB-COMMITTEES & WORKING GROUPS

None

VI. ITEMS FOR DISCUSSION

12. Adopt a Councillor

Recommendation: That it **BE NOTED** that the Child Care Advisory Committee (CCAC) established a working group to develop the "Adopt a Councillor Initiative"; it being noted that the CCAC will extend an invitation to the Mayor and the Chair of the Community and Protective Services Committee to a future meeting of the CCAC.

VII. DEFERRED MATTERS/ADDITIONAL BUSINESS

None

VIII. ADJOURNMENT

The meeting adjourned at 2:55 PM.

Next Meeting Date – T.B.D.





Importance of Healthy Child Development and Early Intervention





Brooke Clark, RN, PHN
Middlesex-London Health Unit







Presentation Outline

- Licensed Childcare Outreach Initiative
- Child Development and the Importance of Developmental screening
- Enhanced 18 month Well Baby Visit
- Community Resources
- Next Steps





Licensed Childcare Outreach

- Professional Education Presentations
- Screening Binder
- Newsletters 2x per year- changing to 4x per year in 2015
- Website- <u>www.healthunit.com/educators</u>
- Responding to childcare questions
- Responding to resource requests
- Resource Development







Why this focus
On Child
Development?





Why invest in kids?

- Over the last few years we have been learning more about the importance of brain development in the early years.
- We now know that 80% of child development is influenced by the environment and 20% is from genetics.
- 70% of parents have concerns about their child's development, but only 28% of parents actually speak to their health care provider about their concerns.
- Early Intervention makes a difference





Why invest in kids?

 In Middlesex- London, how many children are not developmentally ready to start school?







Why Licensed Childcare Centres are so important!!

- In London-Middlesex 68-70% of mothers work (full or part time) and their children are in a childcare setting.
- Childcare providers are usually spending more time with a child than their parent does during the day.
- Childcare providers provide a nurturing, stimulating, creative, fun, safe, environment the promotes early learning.



The Influence of Environment

The influence of the early environment is long lasting...

...a child's
experience during
the 'early years'
affects their health,
learning, and
behaviour for their
lifetime.





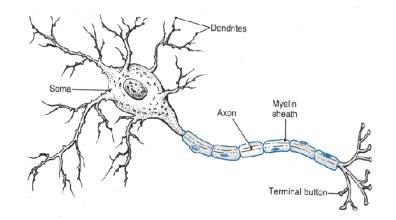






Critical Growth Periods

- Stimulation in early life enhances on genetic neural pathways in the brain required for optimal development.
- Many of these periods are over or waning by the time a child is six years old.



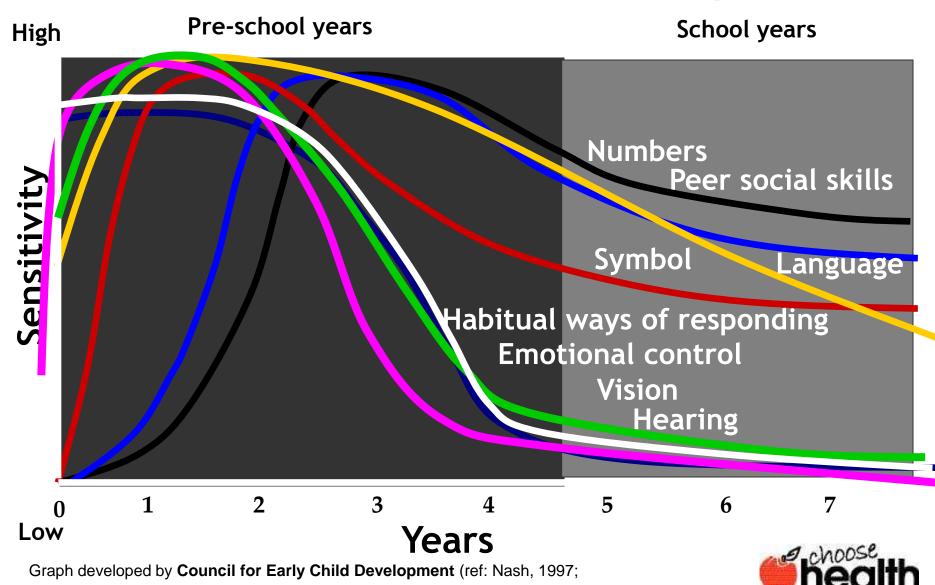
Founders Network



MIDDLESEX-LONDON HEALTH UNIT

Early Years Study, 1999; Shonkoff, 2000.)

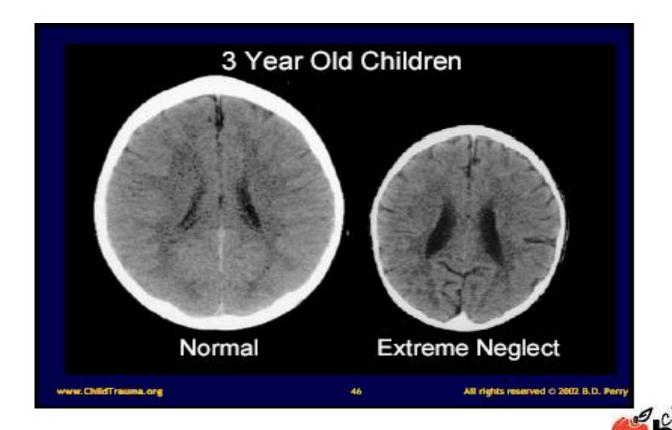
Sensitive Periods of Brain Development





USE IT OR LOSE IT!

The more a system, or set of brain cells is activated, the more that system changes in response. The stronger the repetitions the stronger the memory.



MIDDLESEX-LONDON HEALTH UNIT

Life Course Problems Related to Early Life

2nd Decade 3rd/4th

Decade

5th/6th

Decade

Old Age

- School Failure
- Obesity

- Coronary Heart Disease
- Premature Aging

- Teen
- Pregnancy

Criminality

- Elevated Blood Diabetes
 - Pressure

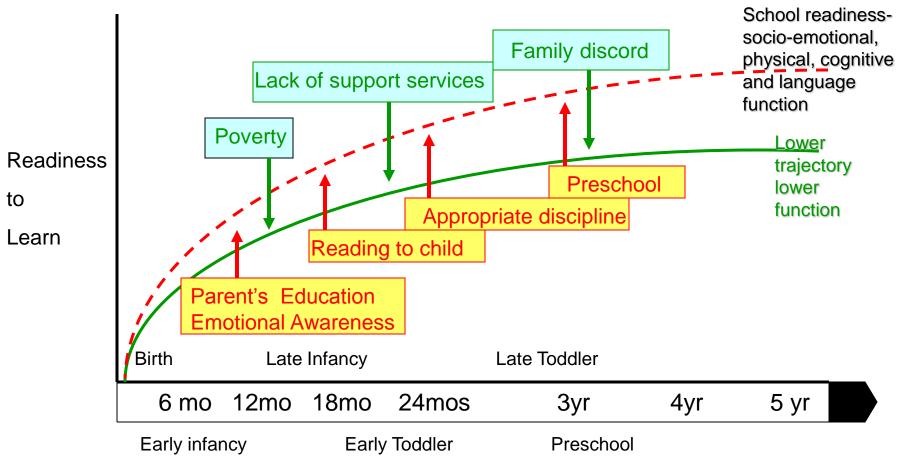
Memory Loss

Depression



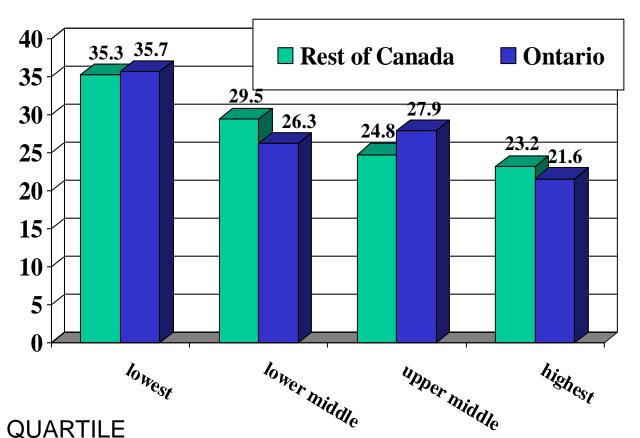


Strategies to improve healthy development and improve school readiness trajectories





The Prevalence of Children with Difficulties by Family Income



The Founder's Network







Enhanced 18-Month Well-Baby Visit







Why focus on the 18 months?

- A critical "check point" for an array of developmental milestones
- Last scheduled immunization until age 5
- Developmental issues
 - Speech and language literacy
- Parenting/Behaviour issues
- Family /Social issues







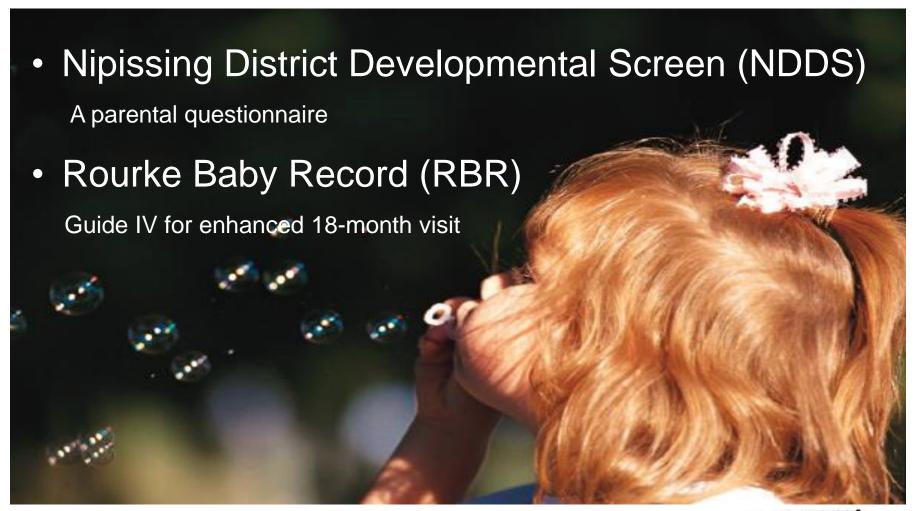
Why Promote the 18 m EWBV?

- Less than half of all eligible children in Ontario have received this visit.
- Lower proportions of children who live in socially vulnerable families received an EWBV





Ontario's Standardized Screening Tools





L MIDDLESEX-LONDON HEALTH UNIT Nipissing District Developmental Screen

- The Nipissing District Developmental Screen (NDDS) is a screening tool not a diagnostic tool.
 - Any "NO" responses deserves clarification and possible action
 - Engages parents in the process of evaluation
 - Written at a Grade 5 literacy level
 - Provides specific age appropriate activity suggestion for parent





Nipissing District Developmental Screen (NDDS)



Child's Name:	
Birthdate:	Today's Date:

The Nipissing District Developmental Screen is a checklist designed to help monitor your child's development.

- Y N BY EIGHTEEN MONTHS OF AGE, DOES YOUR CHILD:
- O O 1 Identify pictures in a book? ("show me the baby")*
- O O 2 Use a variety of familiar gestures?

 (waving, pushing, giving, reaching up)*
- O O 3 Follow directions using "on" and "under"? ("put the cup on the table")*
- O O 4 Make at least four different consonant sounds? (b, n, d, h, g, w)*
- O 5 Point to at least three different body parts when asked?
 ("where is your nose?")*
- O O 6 Say 20 or more words? (words do not have to be clear)
- O O 7 Hold a cup to drink?**
- O O 8 Pick up and eat finger food?
- O O 9 Help with dressing by putting out arms and legs?**
- O O 10 Walk up a few stairs holding your hand?
- O O 11 Walk alone?
- O O 12 Squat to pick up a toy and stand back up without falling?
- O O 13 Push and pull toys or other objects while walking forward? A
- O O 14 Stack three or more blocks?
- O O 15 Show affection towards people, pets, or toys?
- O O 16 Point to show you something?
- O O 17 Look at you when you are talking or playing together?



- * Examples provided are only suggestions.
- ** Item may not be common to all cultures.
- lways talk to your healthcare or childrane professional if you have any questions about your childrs development or well being. See reverse for instructions, limitation of liability, and

- Filling in the questionnaire the parent:
- 1. Has time to reflect about the child
- 2. Is made aware of different aspects of development
- 3. May be prepared to discuss concerns with the assessor





Nipissing District Developmental Screen (NDDS)

The Other Side of the NDDS Screen provides

- Suggestions to help parents in their interaction with all children
- These suggestions may be particularly helpful to help a parent to feel enabled to help their child if delay is a possibility





The following activities for your child will help you play your part in your child's development.

I feel safe and secure when I know what is expected of me. You can help me with this by following routines and setting limits. Praise my good behaviour.

I like toys that I can pull apart and put back together-large building blocks, containers with lids, or plastic links. Talk to me about what I am doing using words like "push" and "pull".

I'm not too little to play with large crayons. Let's scribble and talk about our art work.

Don't be afraid to let me see what I can do with my body. I need to practise climbing. swinging, jumping, running, going up and down stairs, and going down slides. Stay close to me so I don't get hurt.

Play some of my favourite music. Encourage me to move to the music by swaying my arms, moving slowly, marching to the music, hopping, clapping my hands, tapping my legs. Let's have fun doing actions while listening to the music.

Let me play with balls of different sizes. Take some of the air out of a beach ball. Watch me kick, throw. and try to catch it.

I want to do things just like you. Let me have toys so I can pretend to have tea parties, dress up, and play mommy or daddy.

I like new toys, so find the local toy lending library or play groups in our community.

I am learning new words every day. Put pictures of people or objects in a bag and say "1, 2, 3, what do we see?" and pull a picture from the bag.

Pretend to talk to me on the phone or encourage me to call someone.

Help me to notice familiar

sounds such as birds chirping,

car or truck motors, airplanes,

I like simple puzzles with two to four pieces and shape-sorters with simple shapes. Encourage me to match the pieces by taking turns with me.

dogs barking, sirens, or splashing

by smiling and clapping.

water. Imitate the noise you hear and

see if I will imitate you. Encourage me

I enjoy exploring the world, but I need to know that you are close by. I may cry when you leave me with others, so give me a hug and tell me you will

I may get ear infections. Talk to my doctor about signs and symptoms.



Two Categories of Delays

- Developmental delay: comprised of those children not meeting the normal developmental milestones.
- Experiential delay: consist of those children who had not yet experienced something considered typical for his/her age such as, colouring with crayons, cutting with scissors or riding a bike.

Nipissing District Developmental Screen Field Test, 2001







 You want to be sensitive when suggesting there may be concern with their child's development

 You want the parents/caregivers to feel capable and empowered to make decisions.



- Setting the stage for a successful conversation:
 - It is extremely helpful for parents to know from the binging that you will be monitoring their child's development
 - Meet in a private space
 - Allow for as much time as might be necessary without interruption
 - Develop a trusting relationship with the parents/ caregivers





- Setting the stage for a successful conversation:
 - Have ready documentation of your concerns and take minutes/notes of the meeting
 - Ensure a plan for follow-up (referrals and next meetings)
 - Begin discussion by presenting child's strengths
 - Explain that it is helpful to get as much information as possible regarding the child's skills and areas to work on, this will better support the child and explain that early intervention is beneficial for the child





- Sharing the information:
 - You may offer the information you have by asking the parents what they would like to know first or what they feel they need to know.
 - Empathize and put yourself in the parents' and caregivers' shoes.
 - Acknowledge they are the experts in knowing their child.
 - Ensure you listen carefully and acknowledge and reflect their responses
 - Avoid judging their responses
 - Use open ended questions





- Sharing the information:
 - Try not to give to much information all at once
 - Using a parent tool like the Nipissing or Ages and Stages can be helpful in opening up conversation.
 - Present information in a neutral way and avoid professional language
 - State that fact about the child's development without presenting your personal beliefs.
 - Approach getting extra help in a positive manner eg.
 "you can get extra help for your child so he will be ready of school."



- Planning the next steps:
 - Have the parents/caregivers participate fully in the final decision about what to do next.
 - Your role is to provide information, support, and guidance. Their role is to make the decisions.
 - At the end of the conversation, summarize the discussion, and agreed upon next steps eg. referrals, follow-up meeting, etc.
 - If the parents/caregivers suggest "wait and see" approach. Explain what you have learned during this presentation and the importance of early intervention!



What our community is doing





OUR CHILDREN
OUR FUTURE





AS WE GROW TOGETHER

MODEL FOR THE EARLY
IDENTIFICATION OF DEVELOPMENTAL
CONCERNS IN MIDDLESEX-LONDON

Enhanced 18month Well Baby Visit

Health Care Provider Champion Table

Community Early Years Partnership

Vision: All Children 0-3 years old will receive developmental screening

Health Care Provider Outreach Initiative

Specialized Children's Services

*Acknowledgement to Offord Centre for Child Studies for ongoing education and financial support.





Community Resources

- CYN referral Maps
- Red Flags
- www.healthunit.com/educators





Yes

Please see

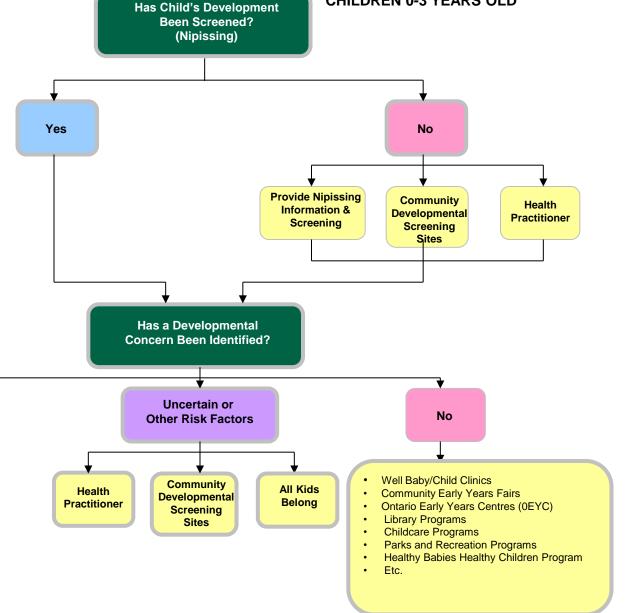
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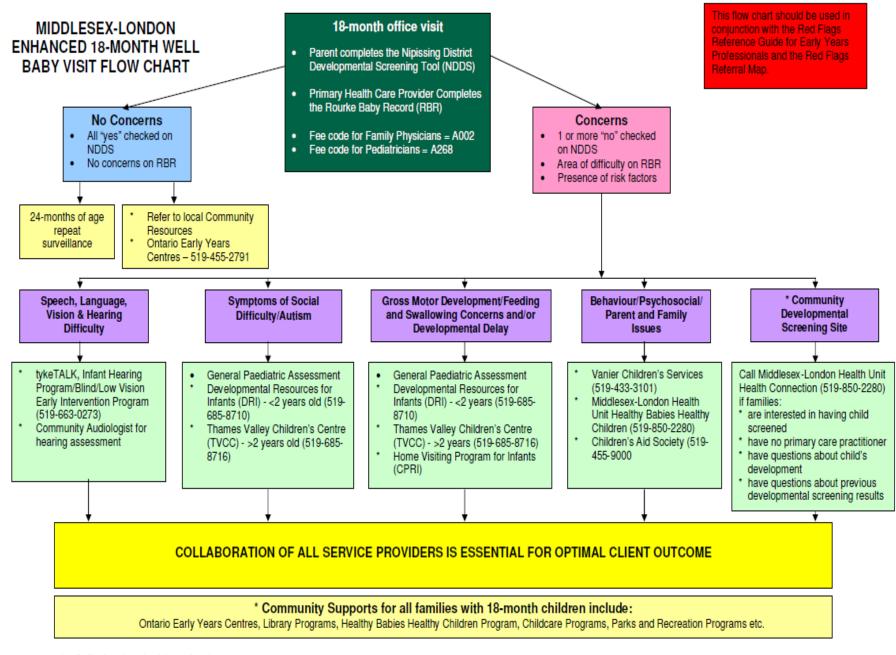
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DECISION TREE TO ENSURE DEVELOPMENTAL SCREENING FOR ALL CHILDREN 0-3 YEARS OLD

For more information call the Health Connection at 519-850-2280





^{* =} Self referral or physician referral



Resources



www.beststart.org/OnTrack

On Track

 provide professionals who work with young children and families with some indicators of healthy child development from birth to 6 years of age.





Resources www.18monthvisit.ca



The machealth.ca portal courtesy of the Division of e-Learning Innovation

Michael G DeGroote School of Medicine

McMaster University



Resources

www.healthybabyhealthybrain.ca

Healthy Baby, Healthy Brain

 Collection of short videos from prenatal to the early years that supports early brain development







What can we do?





What can we do?

- Continue providing supportive environments for early brain development.
- Correctly complete the age appropriate developmental screen on all children in child care and discuss findings with parents.
- Know the community resources to make early referrals or speak with All Kids Belong consultant about concerns.





Our job is To inquire To measure To be vigilant To invest in the future of our children

http://www.ounceofprevention.org/news/downloads.php

http://www.youtube.com/watch?v=GbSp88PBe9E&list=SP117DC4F496BCFE9 3&index=5&feature=plpp_video

Change The First Five Years and You Change Everything The Ounce Chicago, Illinois





Websites

- www.18monthvisit.ca
- www.healthunit.com
- www.ontarioearlyyears.ca
- www.zerotothree.org
- www.familyinfo.ca
- www.childtrauma.org
- http://teacher.scholastic.com/professional/bru ceperry/abuse_neglect.htm





Questions







Working Together We Know We Can Make a Difference!





Child Subsidy Application and Placement Stats	Stats		
	Jan-15	Jan-15 Feb-15 Mar-15	Mar-15
# paid child placements	2667	2634	2855
# of applications	132	118	141
# of ineligible applications	16	8	9
% ineligible	12.1%	%8.9	4.3%
# of children on wait listbeginning of month	180	163	89
# of wait list placements	101	62	69
OW Placements into DNA due to Earnings or OSAP	2	3	1
Emergency Placements due to Professional Referrals for immediate care	10	∞	15

	Totals	% Use	%9.06	88.4%	87.7%
Licensed Spaces and Vacancies as Reported - City of London Child Care Subsidy Sites	slatoT	^	824	1026	1144
	SistoT	٦	8799	8829	9286
	loodo2 9gA	% Use	87.5%	86.1%	84.8%
	loodo2 agA	^	399	443	515
	School	٦	3182	3182	3382
	K bge/jk/s	% Use	92.9%	88.9%	88.7%
	K bge/jk/s	۸	295	457	479
	K bbe/1k/8	٦	4135	4135	4232
	Toddler	% Use	%5'68	90.5%	89.9%
	Toddler	۸	104	26	117
	Toddler	7	886	1018	1163
	insini	esn %	94.7%	94.1%	93.5%
	Jusini	۸	26	29	33
	tnstnl	-	494	494	209
			January 2015	February 2015	March 2015