

CERTIFIED HEALTHY EARLY CHILDHOOD PROGRAM RESOURCE GUIDE

Criterion	Resource
Foundational Resources*	
<p>Caring for Our Children (CFOC): National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs, Third Edition (American Academy of Pediatrics, American Public Health Association, National Resource Center for Health and Safety in Child Care and Early Education)</p>	<p>https://nrckids.org/files/CFOC4%20pdf-%20FINAL.pdf</p>  <p>CFOC4 pdf-FINAL.pdf</p>
<p>Early Childhood Obesity Prevention Policies; Goals, Recommendations, and Potential Actions (Institute of Medicine [IOM])</p>	 <p>Early Childhood Obesity Prevention I</p>
<p>Inventory of Partnership Assessment Worksheets: This is a collective document of all the stakeholder Partnership Assessment Worksheets identifying what is being done in each agency in regards to obesity prevention for young children.</p>	 <p>Inventory of Partnership Assessm</p>
<p>Executive Summary: This summary describes the background and aims of the project, as well as illustrates the process and findings thus far. It then explains what is occurring in Oklahoma and where the ECE obesity prevention focus should be.</p>	 <p>Executive Summary_5-11.pdf</p>
<p>State Action Plan Report: This is a 5-page report of 19 ideas compiled from stakeholders that attended the State Action Plan Meeting with prioritized areas of focus and descriptions for each. This document also provides links for additional information, as well as recommendations for the future and resources to meet ECE obesity prevention best practices.</p>	 <p>State Action Plan Report_5-11.pdf</p>
<p>Additional Information: This document contains additional information about the curricula, resources, programs, projects and initiatives described within the Partnership Assessment Worksheets.</p>	 <p>Additional Information_5-11.pdf</p>
<p>Stakeholder Directory: The stakeholder directory lists the people's names, agency, job title, and contact information of the individuals that have been invested in this project. This</p>	 <p>Stakeholder Directory_5-11.pdf</p>

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was created to foster easier communication among stakeholders.

****This only includes the names of individuals who participated in this project**

Other States Obesity Prevention Initiatives

This document describes obesity prevention initiatives that are utilized in other states and includes links for further information.



Other States Obesity Prevention Initiatives

***Foundational resources apply to all criteria, and applicants should use these as guidance documents. Other resources are supplementary and may also be useful to applicants.**

1. Nutrition

USDA Child and Adult Care Food Program (CACFP): Exceed the current USDA Child and Adult Care Food Program (CACFP) beverage, meal, and snack patterns by following [recommended best practices](#); ensuring a healthy variety of beverages and foods are available for meals and snacks that meet the nutritional needs of the children in the age group served.

Child and Adult Care Food Program: Meal Pattern Revisions Related to the Healthy, Hunger-Free Kids Act of 2010: Guidelines start on page 20.



CACFP guidelines.pdf

Support breastfeeding families by providing private space with an outlet (not a bathroom) and comfortable chair for mothers to pump or express their milk, feed infant, and by safely storing and serving breast milk in bottles that are clearly labeled with child's name and date of collection.

Centers for Disease Control and Prevention (CDC): <http://www.cdc.gov/breastfeeding/pdf/stategy6-support-breastfeeding-early-care.pdf>

Coalition of Oklahoma Breastfeeding Advocates: <http://okbreastfeeding.org/>


Providers are educated in infant nutritional needs and proper storing and serving of breastmilk.

Centers for Disease Control and Prevention (CDC): <http://www.cdc.gov/breastfeeding/pdf/stategy6-support-breastfeeding-early-care.pdf>

Coalition of Oklahoma Breastfeeding Advocates: <http://okbreastfeeding.org/>

OSDH: <https://oklahoma.gov/health/health-education/children---family-health/breastfeeding.html>

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All adults (staff and parents) model proper nutritional habits by following (or exceeding) CACFP guidelines whenever eating or drinking in view of children.	<p>Child and Adult Care Food Program: Meal Pattern Revisions Related to the Healthy, Hunger-Free Kids Act of 2010:</p> <p style="text-align: center;">  CACFP guidelines.pdf </p>
Food and beverages (including candy) are not used to obtain or reward desired behaviors or withdrawn or denied as a punishment.	<p>Public Health Law Center. https://www.publichealthlawcenter.org/topic/s/food-justice</p>
Post and follow weekly menus (including dates and dietary substitutions) in a prominent location for families and public to view and retain menu records for at least six months. The menu can also be made available online. Any changes to the menu are communicated to all parents and guardians. NOTE: You must upload a copy of a menu!	<p>Child and Adult Care Food Program: Meal Pattern Revisions Related to the Healthy, Hunger-Free Kids Act of 2010:</p> <p style="text-align: center;">  CACFP guidelines.pdf </p>
Children remain seated while eating and the environment is pleasant, relaxed, socially engaging, and provides opportunities to teach (including infants and toddlers if applicable).	See Foundational Resources
Teaching personnel sit and eat with the children when food is served and eaten.	See Foundational Resources
Children determine how much they eat within appropriate nutritional guidelines, teaching them to notice hunger and fullness cues in a family style dining setting.	See Foundational Resources
Providers are trained in recognizing fullness cues and identifying nutritional needs.	See Foundational Resources
A notification is sent to parents before serving foods and/or beverages that do not meet CACFP guidelines	
Children always have access to adequate, safe, and freely available drinking water.	<p>Environmental Protection Agency (EPA): http://water.epa.gov/lawsregs/rulesregs/sdwa/index.cfm</p>
2. Physical Activity	
Preschoolers are allowed 90 to 120 minutes of moderate to vigorous physical activity per full (eight hour) day, including running (CFOC Standard 3.1.3.1).	<p>Centers for Disease Control and Prevention (CDC): https://health.gov/sites/default/files/2019- </p>

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	<p>09/Physical Activity Guidelines 2nd edition.pdf#page=46</p> <p>SPARK: https://sparkpe.org/free-lesson-downloads</p> <p>United States Department of Agriculture (USDA) ChooseMyPlate: https://www.myplate.gov/life-stages/preschoolers</p>
Toddlers are allowed 60 to 90 minutes of moderate to vigorous physical activity per full (eight hour) day, including running (CFOC Standard 3.1.3.1).	<p>5210 Let's Go!: https://www.mainehealth.org/Lets-Go/Community/Early-Care-and-Education-Programs/Tools</p> <p>SPARK: https://sparkpe.org/free-lesson-downloads</p>
Physical activity is provided throughout the day via the following for all children birth to 12 (CFOC Standard 3.1.3.1): at least two to three occasions of active play outdoors (weather permitting), two or more structured or teacher led activities or games that promote movement, continuous opportunities to develop and practice age-appropriate gross motor and movement skills.	<p>SHAPE America: https://www.shapeamerica.org//standards/guidelines/upload/JusttheFacts_EarlyChildhoodSettings.pdf</p>
Infants are provided with short periods (3-5 minutes) of supervised tummy time (including those with special needs) if appropriate, taking relationship between caregiver, parent, and healthcare provider into account.	<p>March of Dimes: http://www.marchofdimes.org/baby/tummy-time.aspx#</p>
Infants and/or toddlers are never left in constraining equipment (e.g., high chair, car seat, crib, etc.) for longer than 15 minutes at a time and not used as discipline or punishment.	See Foundational Resources
Physical activity is provided via a schedule that allows for some form of movement at least every hour, such as basic movement skills, physical fitness, rhythms and dance, games, sports, tumbling, outdoor learning and gymnastics.	See Foundational Resources
Withholding or using <i>any</i> physical activity for the purpose of punishment is prohibited.	<p>SHAPE America: http://www.shapeamerica.org/advocacy/positionstatements/pa/upload/Using-Physical-Activity-as-Punishment-2009.pdf</p>
Reasonable accommodations are made for children and infants (if applicable) with special needs in order to meet the required amounts of safe, daily physical activity/opportunities for movement.	<p>Heartland Area Education Agency: https://www.heartlandaea.org/families/sped/services-supports/</p>

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Adults (including teachers and caregivers) participate in physical activity with the children whenever possible, taking movement limitations into account, and ONLY if supervision ratios are maintained at all times.	See Foundational Resources
Consult yearly with a physical activity expert or technical assistance provider (e.g., Child Care Resource and Referral Specialist) to inform physical activity components of program development.	Oklahoma Department of Human Services (OKDHS)(CATSS): http://www.okdhs.org/services/cc/Pages/catsscontacts.aspx
3. Health Promotion	
Incorporate health and safety education for children (including infants and toddlers if applicable) that includes physical, mental, oral, nutritional, emotional, and social health and integrate into daily curriculum and activities.	See Foundational Resources
<i>Prior to enrollment</i> , all children must be current on immunizations as prescribed by CDC and provide documentation (except for legally allowable exemptions, e.g., medical, religious or personal reasons) With the exception of the homeless, who are exempt from documentation.	Centers for Disease Control and Prevention (CDC): http://www.cdc.gov/vaccines/schedules/index.html
Oral Health: All children with teeth should brush or have their teeth brushed with a soft toothbrush of age-appropriate size at least once during the hours the child is in the program.	Centers for Disease Control and Prevention (CDC): https://www.cdc.gov/oralhealth/basics/childrens-oral-health/index.html
Provide an area to store toothbrushes that allows space for them to air dry without touching and with nominal exposure to contaminants.	Centers for Disease Control and Prevention (CDC): https://www.cdc.gov/oralhealth/basics/childrens-oral-health/index.html
Screen time (time spent using a device such as a computer, television, phone, or game console) is not permitted for children under the age of two (2).	National Institutes of Health: http://www.nhlbi.nih.gov/health/educational/wecan/reduce-screen-time/tips-to-reduce-screen-time.htm
Screen time is not permitted for children above age two, OR if permitted, electronic media are age-appropriate, only used for educational or physical activity purposes, and are used with discretion and selectivity, including input from parents/guardians as appropriate (≤30 minutes per week).	National Institutes of Health: http://www.nhlbi.nih.gov/health/educational/wecan/reduce-screen-time/tips-to-reduce-screen-time.htm
Programs refer children and families to appropriate resources as needed and requested (medical, psychological, educational, etc.) beyond state mandated reporting, which includes access to crisis intervention services or specialists at the closest available location.	2-1-1 Oklahoma: http://www.211oklahoma.org/


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A staff member performs a general health check of every child at the beginning of each day to identify possible illness, injury, behavior changes, rashes, itching or scratching (including lice), and temperature; staff contacts the Warmline for follow up guidance as needed.	Oklahoma State Department of Health (OSDH): https://oklahoma.gov/health/services/children-family-health/child-guidance-program.html
Referrals available for routine health supervision (e.g., primary care provider) as needed.	2-1-1 Oklahoma: http://www.211oklahoma.org/
Age-appropriate protection (including appropriate clothing) from the elements (e.g., sun, wind, temperature, rain, snow, etc.) when children are outside is provided.	Centers for Disease Control and Prevention (CDC) (Sun Safety): https://www.cdc.gov/healthequity/features/kidsafety/index.html#:~:text=Use%20a%20sunscreen%20with%20at,and%20the%20tops%20of%20feet https://www.cdc.gov/cancer/skin/basic_info/sun-safety.htm Centers for Disease Control and Prevention (CDC) (Winter Weather): http://emergency.cdc.gov/disasters/winter/duringstorm/outdoorsafety.asp
Program actively focuses on social emotional health of children and integrates social emotional development for all ages into curriculum.	California Department of Education (CDE): http://www.cde.ca.gov/sp/cd/re/itf09socemoddev.asp Zero to Three: https://www.zerotothree.org/early-development/social-and-emotional-development
Program offers the following through pamphlets and/or curriculum (check all that apply-one point each):	
<ul style="list-style-type: none"> ○ Evidence-based, age-appropriate substance abuse prevention strategy 	Tier 1: Appears on a national registry of evidence-based practices Tier 2: Appears in a peer-reviewed publication with positive effects Tier 3: Documented effectiveness supported by other sources of information
<ul style="list-style-type: none"> ○ Evidence-based, age-appropriate mental health promotion strategy 	Tier 1: Appears on a national registry of evidence-based practices Tier 2: Appears in a peer-reviewed publication with positive effects

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	Tier 3: Documented effectiveness supported by other sources of information
<ul style="list-style-type: none"> ○ Evidence-based/best practice, age-appropriate child abuse prevention strategy 	Tier 1: Appears on a national registry of evidence-based practices Tier 2: Appears in a peer-reviewed publication with positive effects Tier 3: Documented effectiveness supported by other sources of information
<ul style="list-style-type: none"> ● Conducted an online, evidence based nutrition and physical activity assessment in the last year (Go NAP SACC) 	<ul style="list-style-type: none"> ● Please e-mail: OKGoNAPSACC@health.ok.gov to learn more about the Go NAPSACC Program in Oklahoma.

4. Safe and Healthy Environment

Established smoking/tobacco policy (Check one):	Sample Wellness Policy:  Sample-Child-Care-Facility-Wellness-Po ChangeLab Solutions: https://www.changelabsolutions.org/search Public Health Law Center: http://publichealthlawcenter.org/sites/default/files/resources/phlc-fs-smokefreechildcare-2011.pdf
<ul style="list-style-type: none"> ○ Required for Basic/Merit: Develop written policies and enforcement of smokefree facilities and worksite vehicles for all staff, volunteers, and parents/guardians AT ALL TIMES including smokefree signage. 	See Sample Wellness Policy Above
<ul style="list-style-type: none"> ○ Required for Excellence: Develop written policies and enforcement of tobacco-free (including vapor products) facilities and worksite vehicles for all staff, volunteers, and parents/guardians AT ALL TIMES including tobacco-free signage. NOTE: You must upload a copy of the tobacco-free policy! 	See Sample Wellness Policy Above

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OKDHS Quality Assurance (Check one) [NOTE: Any incidence of serious, uncorrected noncompliance on the last monitoring report will automatically disqualify applicant.]:	Oklahoma Department of Human Services (OKDHS) Licensing: https://oklahoma.gov/okdhs/services/child-care-services/child-care-licensing.html
<ul style="list-style-type: none"> ○ Required for Basic: No more than three incidences of noncompliance on last monitoring report 	
<ul style="list-style-type: none"> ○ Required for Merit: No more than two incidences of noncompliance on last monitoring report 	
<ul style="list-style-type: none"> ○ Required for Excellence: No more than one noncompliance on last monitoring report 	
Program adheres to best practice maximum child:staff ratio and group size guidelines, as outlined in Caring for Our Children: Third Edition (CFOC3) .	See Foundational Resources
Develop and implement written safety and health policies including, but not limited to: crisis management (environmental, mental, and physical), fire safety, weather safety, intruder safety, bullying (only for children over four), traveling and field trips, transportation of children/child passenger safety, and child abuse reporting.	Child Care Aware: http://childcareaware.org/child-care-providers/management-plan/policies-and-procedures
Individual children’s food allergies are posted where they can be seen by staff (but not by other children, parents/guardians, or the public), in addition to where food is served.	Food Allergy Research and Education (FARE): http://www.foodallergy.org/
Program must have a disaster kit prepared following OKDHS kit suggestions.	Oklahoma Department of Human Services (OKDHS) Licensing: https://oklahoma.gov/okdhs/services/child-care-services/child-care-licensing.html
Program must have a 72 hour supply of food and water at all times for all individuals on the premises in case of emergency.	See Foundational Resources
Water served for drinking or used with cooking is filtered to remove heavy metals before serving (ex. Filtered water pitchers, filter attached to faucet, etc.)	Center for Disease Control and Prevention: https://www.cdc.gov/nceh/lead/leadinwater/default.htm
Facilities (including homes) built or containing paint produced prior to 1978 have passed a lead inspection.	Oklahoma State Department of Health (OSDH): https://oklahoma.gov/health/services/children-family-health/screening-and-special-services/oklahoma-childhood-lead-poisoning-prevention-program.html

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5. Community and Family Involvement

On site family education opportunities on various health and safety topics are provided by program staff or guest educators (including, but not limited to, nutrition/cooking, physical activity, bullying prevention, mental health, substance use, suicide prevention, tobacco cessation, literacy, job skills training, home safety planning, early childhood sleep, child passenger safety, etc.).

Administration for Children and Families:
<https://www.acf.hhs.gov/ecd/family-engagement>

Written policies pertaining to safety and health are available to parents/guardians in their language and communication channel of choice, as feasible.

Child Care Aware:
<http://childcareaware.org/child-care-providers/management-plan/policies-and-procedures>

Provide parent resource materials that are written in plain language or language of their home with minimized text. Utilize pictorials to communicate messages.

American Academy of Pediatrics:
<https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/HALF-Implementation-Guide/communicating-with-families/Pages/Plain-Language.aspx>

Promote dissemination and use of culturally sensitive and inclusive educational materials, including health and safety topics, among children (if applicable), personnel, and parents in order to enhance understanding of cultural diversity.

CLASP: http://www.clasp.org/resources-and-publications/files/qrs_cultural_competency.pdf

The program provides the following options (check all that apply-one point each):

Oklahoma Department of Human Services (OKDHS) Licensing:
<https://oklahoma.gov/okdhs/services/child-care-services/child-care-licensing.html>

- “Parents are welcome in the center at all times, such as to observe, eat lunch with a child, or volunteer in the classroom.
- Conferences are held at least once a year and at other times as needed to discuss children's progress, accomplishments, and difficulties.
- A parent resource area is available, with books, pamphlets, or articles on parenting.
- Parent meetings are held, with guest speakers or special events, such as open houses, family potluck dinners, or children's programs.
- Parents are informed of the center's program through a parent's bulletin board, handbook, or a regular newsletter.

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<ul style="list-style-type: none"> ○ Parents participate in program and policy development through board involvement, planning meetings, or questionnaires.” 	
<p>Program has a daily communication system between program and families, executed through a variety of means, ensuring all families, regardless of language, literacy level, or special needs, receive all programmatic communication.</p>	<p>Zero to Three: http://www.zerotothree.org/early-care-education/family-friend-neighbor-care/effective-communication-with-parents.html</p>
<p>Document both verbal and written key communication between staff and parents/guardians in writing.</p>	<p>Zero to Three: http://www.zerotothree.org/early-care-education/family-friend-neighbor-care/effective-communication-with-parents.html</p>

6. Professional Development

<p>All caregivers/teachers complete at least twenty-four hours of continuing education based on individual competency needs and any special needs of the children in their care, sixteen hours of which should be in child development programming and eight hours of which should be in child health, safety, and staff health.</p>	<p>Center for Early Childhood Professional Development (CECPD): https://www.cecpd.org/</p> <p>Oklahoma Child Care Resource and Referral Association: http://www.oklahomachildcare.org/</p>
<p>For childcare centers: program/center director is at least 21 years of age and holds, at a minimum, a baccalaureate degree (bachelor’s degree) from an accredited institution in relevant field (e.g., early childhood education, child development, etc.), and program/center lead teacher is at least 21 years of age and holds, at a minimum, an associate’s degree in relevant field (e.g., early childhood education, child development, etc.) from an accredited institution. For all others: program director/owner/primary caregiver is at least 21 years of age and holds, at a minimum, an associate’s degree in relevant field (e.g., early childhood education, child development, etc.) OR is currently accredited by NAFCC and has at least three credit hours in relevant field (e.g., early childhood education, child development, etc.).</p>	<p>See Foundational Resources</p>
<p>For all applicants: all other program/center employees including assistant teachers and assistants are at least 18 years of age and hold, at a minimum, a high school diploma from an accredited institution or its equivalent (i.e., GED). All volunteers are at least 16 years of age.</p>	<p>See Foundational Resources</p>
<p>For large and small family child care home caregivers: Teachers have active membership in a national, and/or</p>	<p>National Association for Family Child Care (NAFCC): https://www.nafcc.org/</p>

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state and local early care and education organization (e.g., family childcare home associations, National Association for Family Child Care (NAFCC), Oklahoma Association for the Education of Young Children (OKAEYC)).	Oklahoma Association for the Education of Young Children: https://okaeyc.org/
All staff members that provide direct care have up-to-date CPR/ First Aid training/certification.	Oklahoma Department of Human Services (OKDHS) Licensing: https://cecpd.org/en/training-info/cpr-and-first-aid-training/
Provision of crisis management training and educational resources, which can include emergency preparedness training, conflict resolution, harassment and bullying training, suicide prevention and intervention training, child abuse training, etc.	Center for Early Childhood Professional Development (CECPD): https://www.cecpd.org/ Oklahoma Child Care Resource and Referral Association: http://www.oklahomachildcare.org/
Provision of diversity (i.e., cultural competency) training, including a focus on children from different languages, cultures, and ethnic backgrounds, children and families who speak a language other than English, and children with special needs/disabilities or chronic medical conditions.	Center for Early Childhood Professional Development (CECPD): https://www.cecpd.org/ Oklahoma Child Care Resource and Referral Association: http://www.oklahomachildcare.org/
Trauma Informed Care training is offered to staff.	ODMHSAS: https://oklahoma.gov/odmhsas/learning-and-education/training-institute/share.html

7. Staff Health

Opportunities for caregivers/teachers to improve their own health status are provided through health assessments, health education, health-related fitness activities and time to be outdoors.	
Program has a comprehensive wellness policy for all staff.	Centers for Disease Control and Prevention (CDC): http://www.cdc.gov/nccdphp/dnpao/hwi/policy/index.htm ChangeLab Solutions: https://www.changelabsolutions.org/search
Program promotes relevant hotlines and corresponding resources (e.g., palm cards) to staff AND families: Oklahoma Tobacco Helpline (1-800-QUIT-NOW), Reach-Out Hotline (1-800-522-9054), National Domestic Violence Hotline (1-800-	Oklahoma State Department of Health (OSDH): https://oklahoma.gov/health/oklahoma-state-department-of-health-hotlines.html

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799-7233), Child Abuse Hotline (1-800-522-3577), Oklahoma Breastfeeding Hotline (1-877-271-6455).	<p>https://oklahoma.gov/okdhs/contact-us/dhshotlines.html</p> <p>https://www.okbreastfeeding.org/uploads/4/7/8/4/47842437/2015_breastfeeding_hotline_flyer-english_and_spanish.pdf</p> <p>Oklahoma Department of Mental Health and Substance Abuse Services (ODHMSAS): https://oklahoma.gov/odmhsas.html</p> <p>Oklahoma Tobacco Helpline: http://www.okhelpline.com/</p>
Program supports breastfeeding staff and families by providing private space with a comfortable chair and an outlet (not a bathroom) for mothers to express milk/feed their babies and by offering breastfeeding information to all staff and families.	<p>Centers for Disease Control and Prevention (CDC): http://www.cdc.gov/breastfeeding/</p> <p>Coalition of Oklahoma Breastfeeding Advocates: http://okbreastfeeding.org/</p>
Caregivers/teachers should be current with all immunizations routinely recommended for adults by the Advisory Committee on Immunization Practices (ACIP) of CDC.	<p>Centers for Disease Control and Prevention (CDC): http://www.cdc.gov/vaccines/schedules/index.html</p>
Program provides referral information for staff regarding a variety of safety, mental, and physical health needs.	<p>2-1-1 Oklahoma: http://www.211oklahoma.org/</p>
Caregivers/teachers are able to identify risks associated with stress and stressors specific to child caregiving and specific ways to manage stress in the child care environment.	<p>See Foundational Resources</p>
Mental Health First Aid Training is offered for Staff	<p>Oklahoma State Department of Mental Health and Substance Abuse Services: https://oklahoma.gov/odmhsas/prevention/business/mental-health-first-aid.html</p>
Appropriate staff breaks are built into supervision ratios, and staff members take allotted breaks throughout the day.	<p>US Department of Labor (DOL): http://www.dol.gov/whd/regs/compliance/whdfs46.pdf</p>
Staff members are provided paid time off (holiday and sick leave) as feasible.	<p>US Department of Labor (DOL): http://www.dol.gov/dol/topic/workhours/vacation_leave.htm</p>
Staff members are provided information regarding stress management (e.g., Warmline), and all staff participate in annual training on stress reduction and management (e.g., available resources, CECPD, guest speaker, etc.).	<p>Center for Early Childhood Professional Development (CECPD): https://www.cecpd.org/</p>

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	Oklahoma Child Care Resource and Referral Association: http://www.oklahomachildcare.org/
The program has a designated “health advocate” (administrator or staff person) responsible for policies and daily issues that are related to health, wellness, and safety of all children, parents, and staff.	See Foundational Resources

The following entities can be contacted for additional assistance regarding any of the criteria:

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- Community Analysis and Linkages - Community Development Services, OK State Dept. of Health. CenterTA@health.ok.gov
- County Health Department Health Educators – <https://oklahoma.gov/health-old/county-health-departments.html>
- Tobacco Settlement Endowment Trust Healthy Living Grantees – <https://tset.ok.gov/content/healthy-lifestyle-grants>