

# Use of Consultants

Section 19a-79-4a(h) of the Connecticut General Statutes require all licensed child day care centers and group day care homes to develop and implement a written plan that includes the services of an early childhood educational consultant, health consultant, dental consultant, social service and registered dietitian consultant if the program serves meals.

The Regulations for Connecticut State Agencies require each of the above consultants to provide, at a minimum, the following services to the program:

- annual review of written policies, plans and procedures;
- annual review of education programs;
- availability by telecommunication for advice regarding problems;
- availability, in person, of the consultant to the program;
- consulting with administration and staff about specific problems;
- acting as a resource person to staff and the parents; and
- documenting the activities and observations required in a consultation log that is kept on file at the facility for two years.

Furthermore, the regulations require additional services to be provided by the health consultant as listed below:

- making, at a minimum, quarterly site visits to facilities that serve children three years of age and older; or for group day care homes, facilities that operate no more than three hours per day, or facilities that enroll only school age children, semi-annual site visits. Facilities that are closed during the summer months may omit the summer quarterly visit. Site visits shall be made by the health consultant during customary business hours when the children are present at the facility;
- reviewing health and immunization records of children and staff;
- reviewing the contents, storage and plan for maintenance of first aid kits;
- observing the indoor and outdoor environments for health and safety;
- observing children's general health and development;
- observing diaper changing and toileting areas and diaper changing, toileting and hand washing procedures;
- reviewing the policies, procedures and required documentation for the administration of medications, including petitions for special medication authorizations needed for programs that administer medication; and
- assisting in the review of individual care plans for children with special health care needs or children with disabilities, as needed.

The selection of consultants for a program should be thoughtful and deliberate. First, a program should ensure that each individual being considered for a consultant role meets the education and experience requirements as defined in Section 19a-79-1a of the regulations. The licensure status of a person serving as a health or dental consultant may be verified by visiting [www.ct-clic.com](http://www.ct-clic.com), and the Department may be contacted to verify whether an individual has been approved as early childhood education consultant. The regulations prohibit a program staff from serving as the early childhood educational consultant at a program where they provide direct care or direct program supervision in a non-consultative role. Secondly, the education, experience and expertise of a potential consultant should be examined carefully, so that the person's qualifications match the unique needs of the program. It is also important that the program and consultant share with each other their philosophy and vision for the program. The arrangement should feel comfortable and there should be a feeling of mutual respect.

Next, a plan for consultative services that will be provided should be clearly documented and understood by both parties. This written plan will serve as the foundation for the consultative relationship. The agreement should address all of the services to be provided, including at a minimum, those services required by the regulations. The frequency and scope of the services, the roles and responsibilities, expectations, communication and documentation, etc should all be discussed and agreed upon. The written plan should be developed and signed annually by the consultant. A copy of each consultant agreement and any revisions is required to be provided to the Department within ten days after execution.

Finally, the program should closely monitor the performance of the consultants to ensure that all required duties are being performed in a manner that was agreed upon. All activities and observations should be documented in a consultation log maintained at the facility. It may be helpful to develop a checklist of duties the health consultant is expected to perform at each visit to assist with documentation. Over time, revisions to the written agreement may be needed and should be discussed between the program and consultant. Ongoing communication with all consultants is key to maintaining an effective relationship that positively impacts the experiences of children participating in the program.

Further information regarding consultation may be obtained by contacting the Connecticut Early Education Consultation Network at <http://ctconsultationnetwork.org> and the Connecticut Nurses Association at <http://ctnurses.org>.

Sample agreement letter for early childhood educational, dentist or dental hygienist, social service, and registered dietician consultant.

Consultant Services Agreement between Day Care and \_\_\_\_\_

Consultative service shall include:

- annual review of written policies, plans and procedures
- annual review of education programs
- availability by telecommunication for advice regarding problems
- availability, in person, of the consultant to the program
- consulting with administration and staff about specific problems
- acting as a resource person to staff and the parent(s)
- documenting the activities and observations required in this subsection in a consultation log that is kept on file at the facility for two (2) years

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Agreement shall be signed yearly

SAMPLE

Sample agreement letter for health consultant.

Health Consultant Services Agreement between Day Care and \_\_\_\_\_

Consultative service shall include:

- annual review of written policies, plans and procedures
- annual review of education programs
- availability by telecommunication for advice regarding problems
- availability, in person, of the consultant to the program
- consulting with administration and staff about specific problems
- acting as a resource person to staff and the parent(s)
- documenting the activities and observations required in this subsection in a consultation log that is kept on file at the facility for two (2) years
- the health consultant shall visit the program according to the following schedule: \_\_\_\_\_
- reviewing health and immunization records of children and staff
- reviewing the contents, storage and plan for maintenance of first aid kits
- observing the indoor and outdoor environments for health and safety
- observing children's general health and development
- observing diaper changing and toileting areas and diaper changing, toileting and hand washing procedures
- reviewing the policies, procedures and required documentation for the administration of medications, including petitions for special medication authorizations needed for programs that administer medication
- assisting in the review of individual care plans for children with special health care needs or children with disabilities, as needed.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Agreement shall be signed yearly