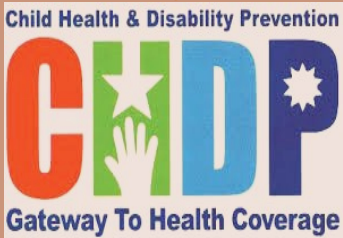


THE GROWING YEARS

A Newsletter of Riverside County's
Child Health & Disability Prevention Program

November
2021
Issue



LOOK INSIDE

In This Issue	Page
Message from Dr. Dael	1
Topic: Preventing Hearing Loss	2
Oral Health	5
Nutrition—WIC	7
Lead Poisoning Prevention: FAQs	8
ACE Screening	10
Resources/Flyers	12
CHDP Provider Information	14
CHDP 2022 Schedule of Events	15
CHDP Bulletin	17

In recent days, the news has reported hundreds of stories about the effects of social media on our children and adolescents. In March of 2018, the American Academy of Child and Adolescent Psychiatry reported that 90 percent of teens 13-17 have used social media and 75 percent have at least one active social media profile. That was three years ago; I suspect the numbers have grown since then. There is much potential for good that comes from social media such as the opportunities for socialization, finding support in areas of personal importance, sharing creative work, and general expression of ideas. Unfortunately, we're starting to learn about how social media might also have unhealthy effects on our kids and teens.

Way back in 2011, the American Academy of Pediatrics published *The Impact of Social Media on Children, Adolescents and Families*. They highlighted some of the risks associated with childhood social media use including cyberbullying, sexting and depression, influence from advertisers, and privacy concerns. I applaud the AAP for talking about these issues 10 years ago, but the article seems almost quaint at this point. In a more recent look at how social media and other factors might affect child and adolescent health, the Education Policy Institute and the Prince's Trust from the UK published *Young people's mental and emotional health/Trajectories and drivers in childhood and adolescence* in early 2021. They found that both physical activities, or the lack thereof, and social media both played an important and possibly interconnected role in youth mental health. Heavy use of social media seemed to negatively affect both boys and girls in early adolescence but for girls, the effect was more sustained and adversely affected more components of mental health. They found that for those girls who engaged heavily in social media, their general wellbeing and self-esteem scores fell, and they exhibited increased psychological distress throughout adolescence. The problems drivers of poor mental health for kids on social media ranged from poor body-image to cyberbullying.

Recent reports indicate that social media companies are aware of these adverse effects on adolescents but seem to struggle to address these issues on a user level and within their algorithms. The AAP's Bright Futures has published some guidelines for parents focused on having conversations with tweens and teens about some of the pitfalls of social media. They recommend parents monitor time on social media in general and encourage that kids trade some of that screen time for physical activity. They advise parents to discuss cyberbullying, when to seek an adult's help and that kids should stand up for other kids who they see being bullied. Parents should be open about the unrealistic beauty norms of social media and traditional media in general; parents should be aware of how these unrealistic beauty standards adversely affect their kids, particularly young girls.

Please take some time to discuss social media, screen time and mental health issues with your families and share some of the included resources. Together we can work to ensure that our kids stay happy and healthy in a modern world. Thank you for working so hard over these last 18 months to take care of Riverside County's kids.

- Resources:
- <https://pediatrics.aappublications.org/content/pediatrics/127/4/800.full.pdf>
 - https://epi.org.uk/wp-content/uploads/2021/01/EPI-PT_Young-people%E2%80%99s-wellbeing_Jan2021.pdf
 - https://brightfutures.aap.org/Bright%20Futures%20Documents/BF4_HealthySocialMedia.pdf



Christopher Dael
Medical Program Director
Children's Medical Services

Preventing Hearing Loss in Children & Adolescents

Many sounds are safe, but others can damage your hearing. Think of the many sounds at different volumes you hear in a day, a week, or a year. The effects of loud sounds can add up over a lifetime. This damage is called noise-induced hearing loss, or NIHL for short. NIHL can result from a onetime exposure to a very loud noise, or gradually from sounds that are not as loud but that you're exposed to repeatedly for long periods. Hearing loss may not be noticeable at first, but it can get worse over time. Examples of activities that are potentially loud enough to damage your hearing are:

- **Going to the movies in theaters or cranking up the volume on the TV at home.**
- **Auto races, sporting events, fireworks shows, and music concerts.**
- **Riding a motorcycle, dirt bike, all-terrain vehicle, airplane, or tractor.**
- **Playing an instrument in a band.**
- **Participating in or attending shooting sports, large noisy crowds.**
- **Sirens, lawn equipment, working with loud power tools.**
- **Listening to loud music, whether live or through headphones or earbuds.**



In March 2021, the World Health Organization (WHO) released a study entitled the *World Report on Hearing*. The report found that more than 50 percent of people ages 12 to 35 used smartphones or personal audio devices, consistently at a high volume that jeopardized their hearing. According to WHO, almost 40% of those who frequently visited entertainment venues were at high risk for hearing loss. Many devices that teens use today (such as music players) create noise levels at or above the recommended decibel level (85 dB).

The National Institute on deafness and Other Communication Disorders (NIDCD) sponsors it's a Noisy Planet Protect Their Hearing. This national public education campaign is designed to increase awareness among parents of children ages 8 to 12 (teens) about the causes and prevention of noise-induced hearing loss (NIHL). With this information, parents and other adults can encourage children to adopt healthy hearing habits before and during the time that they develop listening, leisure, and working habits. To find out more about how to protect your hearing and that of your family, visit the Noisy Planet website at <https://noisyplanet.nidcd.nih.gov>.

NIDCD Information Clearinghouse
1 Communication Avenue
Bethesda, MD 20892-3456
Toll-Free Phone: 800-241-1044
TTY: 800-241-1055
Email: nidcdinfo@nidcd.nih.gov



We offer services in English or Spanish. NIDCD information specialists are available Monday through Friday, 8:30 a.m. to 5:00 p.m., Eastern time.

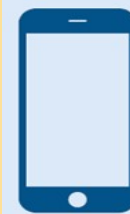
HEARING PROTECTORS FOR A NOISY PLANET

How do you know a sound is too loud? A sound is too loud is when you find yourself speaking loudly or have trouble having a conversation with someone when they are only an arm's length away. Another sign is if the noise hurts your ears or you experience a buzz/ring before or after the noise goes away. Research shows that parents and other adults are important role models for kids. You can be a good role model for hearing health by wearing hearing protectors and modeling other healthy hearing behaviors.

- **Take advantage of teachable moments when your child is appreciating sound (ex. a bird chirping or a campfire crackling) or when a sound is not enjoyable (ex. an ambulance siren or a car alarm). Remind them about how easy it is to damage their hearing and how to protect their hearing from hazardous noise.**
- **Teach your child to keep volume at a safe level when watching TV or listening to music.**
- **Help to safeguard their environment by not buying noisy toys or setting healthy volume limits on electronic devices.**
- **Make it convenient to use hearing protectors. Keep earplugs and earmuffs in reach and in the places where kids will need them.**

Just as you teach children to wear sunscreen, a seatbelt, and a bicycle helmet, they also need to be taught to protect their hearing. By teaching your children why protecting their hearing is important, you empower them to make healthy choices that can protect their hearing now and in the future.

To identify how loud noise levels are in your environment use a smart phone app. The CDC's National Institute for Occupational Safety and Health offers a free Sound Level Meter app for IOS devices.



**NIOSH Sound
Level Meter App**

There are several apps that measure sound levels and indicate when sound levels may be hazardous for your hearing. For example, the National Institute for Occupational safety and health (NIOSH), part of the Centers for Disease Control and Prevention (CDC), developed the NIOSH Sound Level Meter (SLM) app found at, [NIOSH Sound Level Meter App | NIOSH | CDC](https://www.cdc.gov/niosh/slm/)

for iOS devices to help identify sounds levels that may be harmful. You can download the free app at, <https://apps.apple.com/us/app/niosh-slm/id1096545820> on iTunes. Search for NIOSH SLM in the App store.

Health Assessment Guideline

(HAG) # 18: Oral Health

Don't forget to say "Aaaah!" CHDP's HAG #18 addresses oral health screening and anticipatory guidance. Please make sure all the following screening points are addressed at every well-child visit:



- ◆ Inspecting the mouth, teeth, and gums at every health assessment visit. [CHDP Dental Referral Classification Guide](#)
- ◆ Assessing risk for dental caries. [AAP Oral Health Risk Assessment Tool](#)
- ◆ Assessing child's access to fluoridated water or other potential sources of fluoride and prescribing fluoride supplement if inadequate [CDC: My Water's Fluoride](#) website has information on water fluoridation levels in various communities in Riverside County.
- ◆ Providing anticipatory guidance on preventing caries and gum disease including: establishing a dental home, proper oral hygiene practices, fluoride, sports dental injuries, and eating disorders. Refer to table 2 in the HAG for a complete age-specific list.

AMERICAN DENTAL ASSOCIATION RECOMMENDED SUPPLEMENTAL FLUORIDE DOSAGES

Age of Child	Water Fluoride Concentration (parts per million)		
	Less than 0.3	0.3 – 0.6	Greater than 0.6
Birth to 6 months	0	0	0
6 months to 3 years	0.25 mg/day	0	0
3 to 6 years	0.5 mg/day	0.25 mg/day	0
6 to 16 years	1.00 mg/day	0.5 mg/day	0

COLD AND FLU SEASON: 5 WAYS TO CARE FOR YOUR MOUTH WHEN YOU'RE SICK



When he's feeling under the weather, ADA dentist Dr. Gene Romo says one thing always helps him feel a little more like himself. "Brushing my teeth when I'm sick actually makes me feel better," he says. "My mouth feels clean, and in a way, I feel like my health is starting to improve."

When you have a cold or the flu, taking care of your body is your top priority—and that includes your mouth. "It's important to take care of your dental health all year round, but especially when you're sick," Dr. Romo says.

Here are some simple ways to care for your dental health when you're not feeling well:

Practice Good Hygiene

When you're sick, you know to [cover your mouth when you cough and sneeze](#). Don't forget to keep up your dental and toothbrush hygiene as well.

According to the CDC, the flu virus can live on moist surfaces for 72 hours. "The number one rule is not to share your toothbrush anytime, but especially when you are sick," Dr. Romo says.

You also probably don't need to replace your toothbrush after you've been sick. Unless your immune system is severely compromised, the chances of reinfecting yourself are very low. "But if you're still in doubt, throw it out," says Dr. Romo. "Especially if you've had your toothbrush for 3-4 months, when it's time to replace it anyway."

Choose Sugar-Free Cough Drops

Read the label before you pick up a bag at the drug store with an eye to avoid ingredients like fructose or corn syrup. “Many cough drops contain sugar, and it is like sucking on candy,” says Dr. Romo. “Sugar is a culprit when it comes to cavities.” The longer you keep a sugary cough drop in your mouth, the more time cavity-causing bacteria has to feast on that sugar, which produces the acid that can leave holes in your teeth.

Swish and Spit After Vomiting

One unfortunate side effect of a stomach flu, among other illnesses, is vomiting. You might be tempted to brush your teeth right away, but Dr. Romo says it’s actually better to wait. “When you vomit, stomach acids are coming in contact with your teeth and coating them,” he says. “If you brush too soon, you’re just rubbing that acid all over the hard outer shell of your teeth.”

Instead, swish with water, a diluted mouth rinse or a mixture of water and 1 tsp. baking soda to help wash the acid away. Spit, and brush about 30 minutes later.

Stay Hydrated to Avoid Dry Mouth

When you’re sick, you need plenty of fluids for many reasons. One is to prevent [dry mouth](#). Not only is it uncomfortable—dry mouth can also put you at greater risk for cavities. The medications you might be taking for a cold or flu—such as antihistamines, decongestants or pain relievers—can also dry out your mouth, so drink plenty of water and suck on sugarless cough drops, throat lozenges or candies to keep that saliva flowing.

Choose the Right Fluids

When it comes to your mouth and your body, one beverage is always best. “The safest thing to drink is water,” Dr. Romo says. “Sports drinks might be recommended to replenish electrolytes when you’re sick, but drink them in moderation and don’t make them a habit after you’ve recovered because unless they are a sugar free version, they contain a lot of sugar.”

You might also want something to warm you up. “When you have a cold or the flu, you may want something comforting to get through it, like tea,” he says. “Try not to add sugar or lemon if you can avoid it. Sugar can help to fuel cavity-causing bacteria, and lemon is acidic. It’s something to keep in mind once you’re feeling 100% again, as well.”

American Dental Association. (n.d.). *Caring for your teeth when you’re sick* – American dental association. mouthhealthy.org. <https://www.mouthhealthy.org/en/az-topics/c/cold-and-flu-season>



Make it Your WIC!

Welcome,

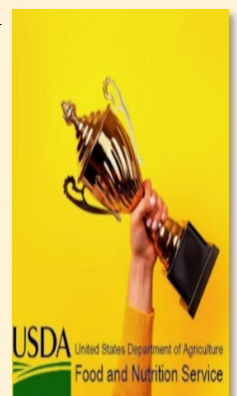
We are offering appointments online, by phone or video in the interest of protecting the health and safety of our WIC families as well as our staff.

- Our offices are open for you!
 - ✓ Call 800-455-4942 for an appointment for:
 - Enrollment, recertification or consultation for nutrition or breastfeeding
 - ✓ Pick up your eWIC card
 - ✓ Pick up or return a breast pump
- Virtual services online or by phone - 800-455-4942
 - ✓ Apply on our App - Rivco mobile WIC
 - ✓ Phone appointments
 - ✓ Phone consults for nutrition and breastfeeding
 - ✓ Online classes
 - ✓ Online peer groups

More fruits and veggies are here!



The USDA Food and Nutrition Services recognized Riverside County WIC for outstanding work in strengthening breastfeeding programs in its communities. For their efforts, Riverside County WIC was awarded the WIC Breastfeeding Award of Excellence Gold. Notably, the Peer Counseling program was recognized for their exemplary success in promoting and initiating programs to increase community breastfeeding engagement. The USDA maintained that some strategies developed by the award-winning clinics included: Offering participants personalized breastfeeding support and ongoing assistance as well as collaborating with community partners.



Commonly Asked Lead Questions for Providers:

Clinic Staff's Introduction: Hello, (insert name or pronoun of parent/guardian), the doctor placed an order to check your child's blood lead level (BLL).

*** Parent/Guardian: Why does my child need the test?**

Clinic Staff: A lead test is used to find out if your child has lead in their blood. A child can eat or breathe lead into their body. Once in the body, lead can cause a wide range of health and behavioral problems, which can occur even without obvious symptoms. Blood lead testing is the way to identify if a child is exposed to lead. There is no known safe amount of lead in the body. Early identification of lead exposure is vital to lower lead levels and decrease harm to the child.

*** Parent/Guardian: What is Lead?**

Clinic Staff: Lead is a metal which has been used in many things and does not break down or disappear over time. It was used in paint on homes built before 1978, in water pipes until 1986, and in gasoline for on-road vehicles until 1996. Since most of the paint and water pipes remain, and because emissions from gasoline released lead particles into the soil, exposure to lead from the old sources continue. Dust containing small particles of lead from past use of paint and gasoline is the main way many children are exposed to lead. Water can also be contaminated from lead in the pipes or fixtures. In addition, dishware, toys, spices, candies, foods, traditional cosmetics and medicines from outside the U.S. and other common household items such as brass keys or jewelry sometimes have high levels of lead.

*** Parent/Guardian: How are children exposed to lead?**

Clinic Staff: Lead can get into your child's body when your child chews or sucks on items with lead, or touches items with lead on them and then puts their hands in their mouth. Children can also swallow lead when they drink lead contaminated water or beverages or eat lead contaminated foods or medicines. Lead dust may exist in soil or be created when an older home is renovated or covered with paint that is chipped or peeling. If parents or household members work with lead in their job, they can bring lead dust home on their clothes, skin, and hair. Lead dust blown into the air by wind or sweeping can be inhaled.

*** Parent/Guardian: What are the dangers of lead in my child's body?**

Clinic Staff: It can be hard for a child exposed to lead to learn, pay attention, behave, and grow. At very high blood lead levels, lead poisoning can lead to death. Testing is necessary to identify if lead is present in the child's body. Taking action to remove lead prevents more damage to your child's development and health. Most children who have lead poisoning do not look or act sick.



**Childhood Lead Poisoning Prevention Program
Riverside University Health System - Public Health
1-800-346-6520**

*** Parent/Guardian: What can I do to help my child if their lead level is high?**

Clinic Staff: The first thing to do is to find out what the level is and that's why we are doing this test. If the level comes back high (≥ 4.5 mcg/dL), there are certain actions you can take to help

reduce the level of lead in your child's body. For example, feeding your child a healthy diet with regular meals and snacks can lower the amount of lead that their body absorbs. **(Give the parent/guardian a copy of the Well Fed=Less Lead brochure and the check-list.)**

It is also important to learn where lead could be found in and around your home and remove the source from the child's environment.

*** Parent/Guardian: What are some other things I can do to care for my child?**

Clinic Staff: Do not let your child chew on painted surfaces or eat paint chips; wash your child's hands and toys often; feed your child healthy meals/snacks every day; avoid giving your child sweets; keep your home clean and dust-free; do not sand or scrape paint. If you are exposed to lead at work, you can bring that lead home to your child. After work, always change out of work clothes and take a shower first before handling your child, wash work clothes separately from all other clothes, and keep work shoes outside the house.

*** Parent/Guardian: What is a normal blood lead level?**

Clinic Staff: There is no safe level of lead in the body for children. The normal blood lead level is zero. When lead gets into the body, it doesn't do anything good for your child.

*** Parent/Guardian: What are some of the effects that I will see in my child if they have a high lead level?**

Clinic Staff: Many children do not have obvious effects, so it is important to get your child tested for lead exposure. Some of the effects, if present, can be confused with common childhood complaints, such as constipation, abdominal pain, leg pain, irritability, learning difficulties, and more. Lead can still be causing harm even if you do not see obvious symptoms. The best way to know if your child has lead poisoning is to get your child tested for lead.

*** Parent/Guardian: How often should I check my child for lead?**

Clinic Staff: Your child should be checked at 1 y/o and 2 y/o. If the doctor did not check your child at 1 y/o and 2 y/o, then you should make sure your child is checked and tested as soon as possible before their 6th birthday. Depending on the result of your child's lead level, that will determine how often your child would be retested. Please discuss this with your doctor. **(Refer to the California Management Guidelines on Childhood Lead Poisoning for Health Care Providers for details on retesting schedule. For testing indicators see Standard of Care Guidelines on Childhood Lead Poisoning for HealthCare Providers.)**



Childhood Lead Poisoning Prevention Program
Riverside University Health System - Public Health
1-800-346-6520

Adverse Childhood Experiences

(ACEs)



What are they and what do they mean to me?

Adverse Childhood Experiences—also known as ACEs—can affect your and your family’s health. ACEs affect all communities. In fact, two-thirds of us have had at least one ACE.

ACEs are events that occur during childhood that can cause high levels of stress in your body and your brain. That stress is considered “toxic,” and can have life-long health effects if not recognized and treated.

There are 10 ACEs that we talk about. You may be asked to review this list and let our health care team know how many of these you or your child have experienced. This is known as the ACE “score”—it will help us do a better job of meeting your health care needs.

The 10 ACEs

- Physical abuse
- Emotional abuse
- Sexual abuse
- Physical neglect
- Emotional neglect
- Having caregivers with mental health concerns
- Having caregivers with problematic substance use
- Having caregivers that are separated or divorced
- Having a caregiver that has been incarcerated
- Domestic violence at home



More than a Number.

Having ACEs does not determine our futures—our stories are more than a number. The important thing is to identify and understand our ACEs and toxic stress, and then work to find ways to heal.

Research shows there are several things we can do to reduce the stress that we feel and prevent further health conditions from developing:

- Having healthy and supportive relationships with a parent, family member, or mentor
- Getting regular sleep
- Eating healthy food
- Spending time outside and in nature
- Getting regular exercise
- “Mindfulness” practices like yoga, meditation, and deep breathing
- Talking to a mental health professional

Let your health care team know if you have questions.

Go to NumberStory.org to learn more about ACEs and toxic stress, and what you can do to improve your health.



Save the Date!

ACEs Aware Initiative Riverside County Core Training

Riverside University Health System— Public Health and Riverside County Medical Association is hosting a 2-part Core Training. **ACEs Aware** is an initiative to offer Medi-Cal providers training, clinical protocols, and payment for screening children and adults for ACEs.

Beginning July 1, 2020, to receive Medi-Cal payment, providers must have completed a certified Core Training and attested to the state that they have completed it.

NEXT TRAININGS:

Part 1: December 8, 2021 11:30am - 1:00pm

Part 2: December 15, 2021 11:30am - 1:00pm



Click [HERE](#) to register!



For more information, please contact Dianne Leibrandt, DLeibrandt@ruhealth.org

Are you working to help people affected by the COVID-19 pandemic?

Use these principles of Psychological First Aid (PFA) when working with survivors:



Respond to requests and initiate contacts in a nonintrusive, compassionate, and helpful way.



Help people meet their basic needs.



Calm emotionally overwhelmed or disoriented individuals.



Identify immediate needs and concerns.



Empower people to take steps to meet their needs.



Encourage people to reach out to family and friends via phone, text, or other virtual methods.



Provide information about common stress reactions.



Link people with available resources.



ADDITIONAL RESOURCES:

Disaster Distress Helpline: 1-800-985-5990

National Suicide Prevention Lifeline:
1-800-273-TALK (1-800-273-8255)

The Substance Abuse and Mental Health Services Administration (SAMHSA) National Helpline:
1-800-662-HELP (1-800-662-4357)

PFA Online Course from the National Child Traumatic Stress Network and National Center for Posttraumatic Stress Disorder: <https://www.nctsn.org/resources/psychological-first-aid-pfa-online>.

SAMHSA Disaster Technical Assistance Center website at <https://www.samhsa.gov/dtac> or call us at 1-800-308-3515.

SAMHSA
Substance Abuse and Mental Health
Services Administration

SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities.

1-877-SAMHSA-7 (1-877-726-4727) • 1-800-487-4889 (TTY) • <https://www.samhsa.gov>

PEP20-01-01-014

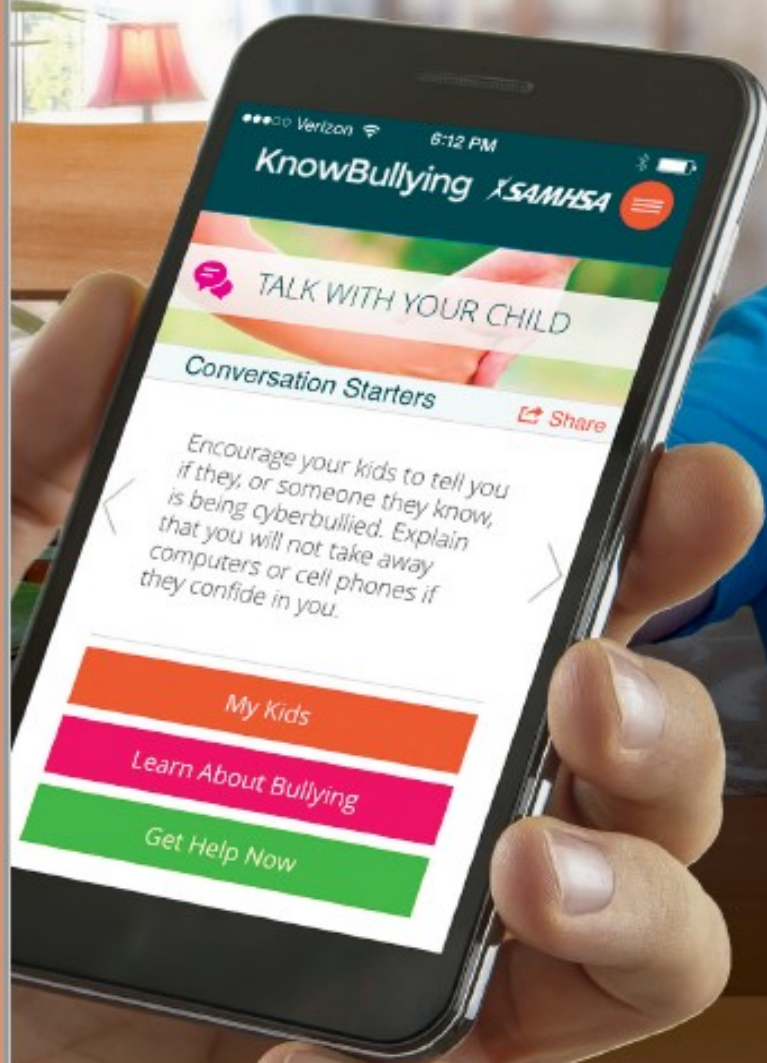
Get the free app that can prevent bullying.

How can I help a child affected by bullying?

Talking with your child every day is an easy way to stay connected. Research shows that spending at least 15 minutes a day talking with your child will increase self-esteem and encourage him/her to come to you with a problem. This will help your child face bullying—whether being bullied, engaging in bullying, or witnessing bullying.

How can the KnowBullying app help prevent bullying?

The KnowBullying app helps you make the most of each opportunity to talk by giving helpful reminders and conversation starters. It provides information on bullying including how to know if your child is being affected and how to stop it. KnowBullying by SAMHSA also provides strategies for educators and school administrators.



Put the power to prevent bullying in your hand.



Free for iPhone® and Android.™
Visit <http://bit.ly/KnowBullying>



welcome!

NEW CHDP CLINICS

- * **Aspen Medical Group, Inc. – Moreno Valley**
- * **Borrego Health, Martha’s Village - Indio**
- * **Borrego Health, Palm Springs Family Health - Palm Springs**
- * **Children’s Primary Care Medical Group, Inc. –Two locations in Hemet**
- * **Children’s Primary Care Medical Group, Inc. – Two locations in Temecula**
- * **Children’s Primary Care Medical Group, Inc. – Wildomar**
- * **Dr. Rios Clinica Medica Familiar – Corona**
- * **Neighborhood Healthcare: Rancho Paseo Medical Group Banning**
- * **Neighborhood Temecula Parkway – Temecula**
- * **Unicare Community Health Center, Inc. – Moreno Valley**

*******IMPORTANT: CHANGE OF PROVIDER INFORMATION*******

To maintain CHDP program enrollment, providers must submit changes of information to the local CHDP program within 30 days of the change. These changes include:

- ◆ **Change of address**
- ◆ **Addition of sites of service**
- ◆ **Use of temporary location or mobile van unit**
- ◆ **Changes in NPI or Federal Tax Identification Number**
- ◆ **Addition or deletion of rendering providers**
- ◆ **Change from an Independent to an intermittent/satellite clinic.**

Providers whose status changes from an individual provider to a group, from a group to a clinic, or from a clinic to a Federally Qualified Health Center (FQHC), etc., must notify CHDP after securing the new status.

CHDP 2022 Schedule of Events



Two in-person workshops and two in-person trainings will be offered (tentatively).
 Virtual events will be conducted via Zoom.
 *All virtual trainings will require an in-person practicum to be completed at our Riverside office the same month of attendance to receive a certificate of completion.

January 2022						
Su	M	Tu	W	Th	F	Sa
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

January

1/12/22 (Wed)	Overview Workshop (Virtual)	8:30am - 2:15pm
---------------	-----------------------------	-----------------

February 2022						
Su	M	Tu	W	Th	F	Sa
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28					

February

02/01/22 (Tue)	Audiometric/BMI/Fluoride Varnish /Vision (Virtual)	TBD
02/04/22 (Fri)	Practicum sign-off by appointment only (In person) *	10:00 am - 4:00pm
02/11/22 (Fri)	Practicum sign-off by appointment only (In person) *	10:00 am - 4:00pm
02/18/22 (Fri)	Practicum sign-off by appointment only (In person) *	10:00 am - 4:00pm
02/25/22 (Fri)	Practicum sign-off by appointment only (In person)*	10:00 am - 4:00pm

March 2022						
Su	M	Tu	W	Th	F	Sa
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

March

03/09/22 (Wed)	Overview Workshop (Virtual)	8:30am - 2:15pm
----------------	-----------------------------	-----------------

April 2022						
Su	M	Tu	W	Th	F	Sa
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

April

04/05/22 (Tue)	Audiometric/BMI/Fluoride Varnish /Vision (In person) 4210 Riverwalk Parkway, Riverside, 92505	TBD (Includes practicum)
----------------	--	-----------------------------

May 2022						
Su	M	Tu	W	Th	F	Sa
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

May

05/11/22 (Wed)	Overview Workshop (In person) 4210 Riverwalk Parkway, Riverside, 92505	8:30am - 2:45pm
----------------	---	-----------------

REGISTRATION IS REQUIRED

Registration information will be sent via email 3 weeks prior to the class.
 Zoom link for approved participants will be sent via email 1 week prior to the class.
 For special accommodations or more information call the CHDP office at
 (951)358-5481 or (800) 346-6520

CHDP 2022 Schedule of Events



Two in-person workshops and two in-person trainings will be offered (tentatively).
Virtual events will be conducted via Zoom.

*All virtual trainings will require an in-person practicum to be completed at our Riverside office the same month of attendance to receive a certificate of completion.

June 2022						
Su	M	Tu	W	Th	F	Sa
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

June

06/07/22 (Tue)	Audiometric/BMI/Fluoride Varnish/Vision (Virtual)	TBD
06/10/22 (Fri)	Practicum sign-off by appointment only (In person) *	10:00 am - 4:00pm
06/17/22 (Fri)	Practicum sign-off by appointment only (In person) *	10:00 am - 4:00pm
06/24/22 (Fri)	Practicum sign-off by appointment only (In person) *	10:00 am - 4:00pm

July 2022						
Su	M	Tu	W	Th	F	Sa
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

July

07/01/22 (Fri)	Practicum sign-off by appointment only (In person) *	10:00 am - 4:00pm
07/13/22 (Wed)	Overview Workshop (Virtual)	8:30am - 2:15pm

August 2022						
Su	M	Tu	W	Th	F	Sa
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

August

08/02/22 (Tue)	Audiometric/BMI/Fluoride Varnish/Vision (Virtual)	TBD
08/05/22 (Fri)	Practicum sign-off by appointment only (In person) *	10:00 am - 4:00pm
08/12/22 (Fri)	Practicum sign-off by appointment only (In person)*	10:00 am - 4:00pm
08/19/22 (Fri)	Practicum sign-off by appointment only (In person)*	10:00 am - 4:00pm
08/26/22 (Fri)	Practicum sign-off by appointment only (In person)*	10:00 am - 4:00pm

September 2022						
Su	M	Tu	W	Th	F	Sa
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

September

09/14/22 (Wed)	Overview Workshop (In person) Location TBD in Eastern Riverside County	8:30am - 2:45pm
----------------	---	-----------------

October 2022						
Su	M	Tu	W	Th	F	Sa
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

October

10/04/22 (Tue)	Audiometric/BMI/Fluoride Varnish/Vision (In person) Location TBD in Eastern Riverside County	TBD (Includes practicum)
----------------	---	-----------------------------

November 2022						
Su	M	Tu	W	Th	F	Sa
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

November

11/09/22 (Wed)	Overview Workshop (Virtual)	8:30am - 2:15pm
----------------	-----------------------------	-----------------

REGISTRATION IS REQUIRED

Registration information will be sent via email 3 weeks prior to the class.
Zoom link for approved participants will be sent via email 1 week prior to the class.
For special accommodations or more information call the CHDP office at (951)358-5481 or (800) 346-6520

CHDP NEWS

Bon Voyage, Desiree!

After dedicating almost two decades to Riverside County, Child Health Programs' Health Education Assistant, Desiree Contreras, has decided it's time to retire by year's end. While staff is saddened to lose a vital component of both the Child Health & Disability Prevention and Childhood Lead Poisoning Prevention programs, we wish Desiree the best of times ahead. Learn a little about her County experience below.

Q: Have you always worked for Child Health Programs?

A: No, my humble beginnings were as an Office Assistant with WIC (Women, Infants and Children) at the Telephone Center in 2001. I worked there for almost two years and left the County for a couple years because my husband was transferred to Phoenix for work. I returned to WIC as an Office Assistant again. Lactation Services then offered me the HSA (Health Services Assistant) position where I worked for three years and received my Lactation Consultant license. After that, I was an HSA for CLPPP (2006) and now an HEAII for both CHDP and CLPPP (as of 2019).

Q: What have you found to be challenging?

A: When lead-affected families are displaced. Sometimes we start working with a family whose child has lead in their blood. When we return for follow-up, the family is sometimes gone because the homeowner has decided to kick the family out of their home before we can find the source of the lead problem at the home.

Q: What advice would you give to a new person working in your position?

A: You have to have passion for the programs; do the job if you mean it. The job can be very emotional and stressful because you're dealing with kids. I love public speaking, too. It's a gratifying position; you can make a difference in families' lives. My advice would be to stick together as a team and help each other out. You can be a friend AND a coworker; people say you can't, but that's not true.

Q: What do you plan on doing after retirement?

A: Traveling if COVID permits, definitely Europe (Italy, Spain, Greece, France) and with my travel trailer to Oregon, Canada, the whole coast.

Q: Any last words you'd like to share?

A: May the force be with you, my fellow Americans! (laughter)



CHILD HEALTH PROGRAMS STAFF

Child Health Programs

Kristen Rodriguez, ANM - Lead and CHDP programs
Desiree Contreras, HEA II - Lead and CHDP programs

Child Health & Disability Prevention Program

Patty Palomino, PHN - Charge Nurse
Emily Hafrian, PHN
Cathy Miller, PHN
Laura Calderon, Health Services Assistant

Childhood Lead Poisoning Prevention Program

Noella Tataw, PHN - Charge Nurse
Stephanie Nerida, PHN
Crystal Meals, Health Services Assistant
Jose Izquierdo, Health Services Assistant

Office Support

Lilia Landazuri, Office Assistant II
Diane Montanez, Office Assistant II

Editors: Kristen Rodriguez PHN, Nurse Manager, Child Health Programs; Desiree Contreras, HEA II, Child Health Programs.

Contributors: Robert Ibrahim, MPH, MOTR/L, Program Chief, CMS; Christopher Dael, MD, CCS; Patty Palomino, PHN, CHDP; Emily Hafrian, PHN, CHDP; Noella Tataw, PHN, CLPPP; Stephanie Nerida, PHN, CLPPP; Diana Gonzalez, MPH, RD, Nutrition Services; Vanessa Montano, BS, DH, Oral Health Program; Diane Montanez, OAI, CHP.

All CHP programs can be reached by calling 1-800-346-6520.