

DOCUMENT RESUME

ED 411 053

PS 025 683

AUTHOR Foster, Karen B.
TITLE Creating a Child Care Center in a Nursing Home and
Implementing an Intergenerational Program.
PUB DATE 1997-00-00
NOTE 13p.
PUB TYPE Reports - Descriptive (141)
EDRS PRICE MF01/PC01 Plus Postage.
DESCRIPTORS *Day Care Centers; Frail Elderly; *Institutional
Cooperation; *Intergenerational Programs; Models; *Nursing
Homes; Older Adults; Preschool Children; Preschool
Education; Psychological Needs; *Shared Resources and
Services
IDENTIFIERS Elder Care; Illinois (Champaign County)

ABSTRACT

The success of the Champaign County Nursing Home Child Care Center (CCNHCCC) in Illinois provides a model for the establishment of child care centers in nursing homes. Needs assessment, financial support, licensing, staff hiring and training are all important factors that need to be addressed in the start up and running of such a program. The establishment of an intergenerational program at a facility of this type is intended to draw elderly residents out of seclusion and isolation and to make it possible for the children to benefit from the residents' love and affection. Mutual activities and interaction promote a fresh and unique understanding between the two age groups in an atmosphere of happiness and compassion. An onsite child care center helps recruit and retain employees with child care needs, while the nursing home atmosphere takes on a personal, friendlier, and more family-like tone. The program has a positive influence on children's perceptions of the elderly, of disabilities, and of nursing homes, as well as providing the elderly with an atmosphere of revitalized interest and social enrichment. (MT)

* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *

ED 411 053

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION
CENTER (ERIC)

- This document has been reproduced as received from the person or organization originating it.
- Minor changes have been made to improve reproduction quality.
-
- Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

Creating a Child Care Center in a Nursing Home
and Implementing an Intergenerational Program

Karen B. Foster

PERMISSION TO REPRODUCE AND
DISSEMINATE THIS MATERIAL
HAS BEEN GRANTED BY

Karen B.
Foster

TO THE EDUCATIONAL RESOURCES
INFORMATION CENTER (ERIC)

BEST COPY AVAILABLE

In recent years there has been a need by parents to have better quality child care. During the same time there has been a grass-roots effort to encourage intergenerational programming. I propose that combining a child care center in a nursing home the employees have the opportunity to receive quality child care on-site and the children and residents can participate in intergenerational programming to improve the quality of their lives. According to the Cost, Quality, and Child Outcomes in Child Care Centers study, the highest quality of care was found in centers that have access to extra resources to improve quality. "Centers that do not have to rely solely on parent fees are able to provide the highest quality. Falling into this category are centers operated by ...worksite centers subsidized by employers"(Neugebauer, 1995). Champaign County Nursing Home Child Care Center(CCNHCCC) is a successful example of such a program. The nursing home is a "community" for the residents and sometimes the children are their only link to the "outside". The child care center likes to feel that we are laying an affective foundation for the children to build on. By connecting the residents and children, we are providing each with a win-win situation. Without each group intermingling, the whole impact changes to status quo.

This paper will examine how to start-up a child care center in a nursing home and explain intergenerational programming with CCNHCCC as an example. A video which was made at the Josephine Sunset Home in Stanwood, Washington entitled, "Old Friends Are Best Friends" is an excellent introduction to

intergenerational child care. In it you can see the benefits of intergenerational activities.

To begin serious planning, a needs assessment must be completed. A survey needs to be given to employees asking: "What are the ages of your children?, Would you consider an on-site child care?, What hours do you need child care? How much do you currently spend per week on child care?" By calling other centers in your community or calling your local Child Care Resource Center, you can determine costs of other centers in your area.

A feasibility study on the child care project will answer how a center will perform financially, if developed in your facility. It provides forecasting data that helps define future financial success for the center. Projections of future demand for service are used to determine forecasts of client revenue. To assess further the financial impact of a child care center, construction or remodeling costs, along with daily operating expenses such as salaries, supplies, equipment, and bad debts are also calculated. Sources and uses of each should be included. This study serves as a useful management tool in the daily operation of the child care center because it offers information about revenues and expenses (Vujovich, 1987). A comptroller would be the person to examine those figures and give expert advice. After analyzing the needs assessment survey from the employees and the financial feasibility study, then a decision can be made whether or not to proceed with the center.

Locating the center in the nursing home has a variety of

possibilities. The child care center may be self-contained or may share the facility with the residents. It is up to the management to make that determination. Depending on state regulations, the child care center needs at least two areas for its own use. This would be for napping, bookkeeping, etc. These areas are potential spaces to share with the residents: dining room, activity room, and lounges. Outside play areas must be considered, too. These include courtyards, lawns around the facility, and neighborhood playgrounds. It is important to remember not to isolate the indoor child care center from the rest of the facility because it is crucially important to facilitate intergenerational exposure on a daily basis. The residents love to watch the children move about the home, plus happy children boost the morale for the residents and employees as well (Vujovich, 1987).

A meeting between the facility, an architect, and the licensing representatives is needed to approve plans for the center. An outline for your timetable of events for getting the center started including construction time and projected opening date is necessary. Included in this are architectural drawings of the child care that show: specific fire safety details, toilet and sink facilities, and mechanical and electrical work changes. When all license applications have been approved from the state and local agencies, then you may proceed with the remodeling or construction plans (Vujovich, 1987).

A nursing home operates with an in-house laundry, dietary

services, housekeeping, maintenance, business, and nursing staff. These are all necessary to the functioning of the child care center. Co-operation between the departments concerning new demands that the center creates is important. Once the operation is functioning, it will run smoothly if all persons involved are made aware of the situation. This is accomplished by meeting individually with each department head to realize the needs involved. Open lines of communication are always useful when problems arise. The parents of children in the center are on staff, so by working with them in this project, it gives them an opportunity to take ownership, too.

The next step in establishing a center is hiring the staff. A determination needs to be made about how many staff positions are needed based on the ages of the children to be in attendance. These requirements are in the state regulations. A director is the first person to be hired. Fill the position about two months before the anticipated opening of the center. She/He needs time to get organized, establish policies and procedures, plan activities, hire staff, secure child enrollment, and prepare the physical environment.

The director needs to train the staff in the center's child care program plus the intergenerational programming aspect of the center. There are many resources available with information on this subject. Generations Together, AARP, and other intergenerational groups have catalogs in which to find manuals for this purpose.

The Champaign County Nursing Home administration identifies four objectives in establishing a child care center on-site. The first one is that the child care time constraints on the employees is vastly improved by having the children go to the same place as the parents. Along with that benefit, the parents are only charged for the time the child is actually at the center. By doing so, the parent is more comfortable keeping the child home during illness or days off.

Two very important aspects of having an on-site child care center are how it helps recruit and retain employees with child care needs. The nursing home needed a physical therapist and was able to recruit one for the simple reason that child care was on-site. Retention of employees is hard to track, but persons who are happy with child care arrangements usually stay in current positions.

Lastly, the atmosphere of on-site child care takes on a personal, friendlier tone. All the employees, as well as the children's parents, work for the same governmental entity. It is more family-like.

Upon opening of the child care center, intergenerational interaction and activities will add a new dimension to the quality care given to both seniors and children (Friedman, 1991).

Now, just what is an intergenerational program?

"The National Council on Aging defines intergenerational programs as activities that increase cooperation and exchange between any two generations. Typically, however, they involve interaction between the young and the old in which there is a sharing of skills, knowledge, and experience. Integral to all of these programs are experiences that are mutually beneficial, that meet

some needs of both populations and that foster growth, understanding, and friendship between the generations. Intergenerational programs, furthermore, involve planned activities and ongoing interactions over extended periods of time"(Newman, 1986).

As stated in the CCNHCCC Policies and Handbook: "CCNHCCC wants to provide an unusual setting for seniors and youngsters to share in an awareness of mutual needs. Our goal is to utilize the activities of both the nursing home and child care center into a cheerful learning environment that benefits both groups. CCNHCCC wants to provide children the opportunity to understand the normal aging process. At the same time, seniors will feel closer to the community by having contact with the children.

"The primary intergenerational goal is to draw elderly residents out of seclusion and isolation with the help of young children. Likewise, these children will benefit from the love and affection given by the residents. The intergenerational (IG) program offers activities and promotes interactions that are designed for the elderly adult and young child that will focus on their physical, emotional, and social interests and needs. Activities and interactions promote a fresh and unique understanding among the two age groups in an atmosphere of happiness and compassion. Staff members of the facility are dedicated to the awareness of the aging, growth, and developmental process(Foster, 1990)."

Here are four needs identified from Children's Family Center:

1. Contact between young and old enlightens both generations.
2. IG programs are a powerful social influence. Such programs

enable people of both age groups to develop their capacity to care, engage in social activities and contribute to the betterment of society.

3. Seniors gain an appreciation for the life experiences of the child.

4. Both the young and the old learn to give something of themselves that money cannot buy(1992).

Program development has as many facets as there are groups to participate! Each program will have its unique components based on the outcome of all initial planning phases. These include ages and numbers of children, time of day and days of the week when time is available, the philosophy and goals of the program. After these factors have been determined, then the program is ready to be planned.

Each group is probably unfamiliar with the other, so by planning ahead the groups can choose activities appropriate for the groups. The curriculum for the program is not as important as just the interaction between the groups. Planning between staffs of the groups to be interacting is the first step to a successful program.

Staff training is another aspect of IG programming to aid in its success. At CCNHCCC the director took the Certified Nurse Assistants course through the junior college. It familiarized her with how a nursing home was run and it provided her with much information about the elderly. By knowing what many of the children's moms did at their jobs, it gave her a new rapport with them and other nursing home staff. Extensive

training such as that is not necessary to carry out IG programs. A basic awareness of the groups involved during planning sessions is adequate in most cases.

Key ingredients for success are flexibility and cooperation between groups. Proceeding slowly with plans to get each group used to the other is another ingredient. When planning activities the staff may decide on a project, but then it does not work with the individuals involved. A change is needed on-the-spot. Or perhaps an activity was planned for a certain time, but has to be re-arranged. Communication and openness are very important for these times.

Over the years, the children and the residents have been building links in many ways. Here are five:

1. All children take walks through the nursing home to visit residents who are unable to move around, and to say "Hi!" to their moms or dads.
2. Different ages have specified activities with certain areas of the nursing home on a weekly basis.
3. Monthly luncheons give the opportunity for the children and residents to share.
4. Special snacks are served in the child care center.
5. All children participate in the music program on Thursdays.

The residents benefit from just seeing the children. It brings a new environment to them. The elders remember their own childhoods or their own children, grandchildren, etc. One benefit that had not been considered in the beginning was how the children fulfill a need for those who had no children.

Two residents in particular were/are very close to the children for this reason. Bernie had had a stroke and his right side was paralyzed. But he maneuvered his wheelchair to the Center almost on a daily basis. Even before the Center opened he would come by to check the progress. One day he brought the director a plastic container for office supplies, a wicker pencil holder, and a letter holder. He said, "Everybody was bringing things for the children, but nothing for you." It was so generous! He continued to visit the children and they made special trips to see him in his room. The children were very important to him. How important was not realized until he died a few months after the Center opened and we learned that he had never married and had no children of his own. For that period of time that he was with the children, they were like his family. It was gratifying to know that they brought him happiness at the end of his life.

Daisy is another resident who told the staff every time that she saw the children how much she loved them because she was never able to have any of her own. Many other residents smile brightly or respond positively when the children are near. Making a difference in lives in this way is what it is all about!

The children have a foundation on which to build many skills in addition to the usual motor, cognitive, and affective domains. Realizing that people need wheelchairs, walkers, hearing aids, and other assistance gives a new dimension to daily living. One four-year old walked up to a stroke victim in his wheelchair. The man could only say, "SoSoSo." She knew this was his

conversation and repeated it back to him in a very nonchalant, loving way. While on another occasion a three-year old walked over to another wheelchair-bound person and used a cloth to wipe the saliva from her chin. Over time, children learn to accept disabilities as normal experiences.

Through intergenerational programming hopes are that the children will have positive experiences to carry throughout their lives. The positive experiences by the children may even lead some to the Health Care field. They learn respect for the elderly and not perceive nursing homes as negative places. Nursing homes are a place for the living and through intergenerational programming the children help to make them that way!

References

- Children's Family Center. (1992). Some of the benefits of an intergenerational program. Mechanicsburg, PA.
- Foster, K. (1990, September). The "C" Center-Champaign County Nursing Home Child Care Center Policies and Handbook. Urbana, IL.
- Friedman, L. (1991, Spring). "C" Center Child Day Care Program Evaluation. Urbana-Champaign, IL.
- Neugebauer, R. (1995, March/April). Cost and quality study findings unveiled. Child Care Information Exchange, pp. 80-81.
- Newman, S. (1986, November). Creating effective intergenerational programs. Perspectives on Aging. p. 1.
- Vujovich, J. (1987). Child Care in Nursing Homes, Creating an Intergenerational Program. Colorado Springs, CO: Jane Vujovich.



U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement (OERI)
Educational Resources Information Center (ERIC)



REPRODUCTION RELEASE
(Specific Document)

I. DOCUMENT IDENTIFICATION:

Title: <i>Creating a Child Care Center in a Nursing Home and Implementing an Intergenerational Program</i>	
Author(s): <i>Karen B. Foster</i>	
Corporate Source:	Publication Date:

II. REPRODUCTION RELEASE:

In order to disseminate as widely as possible timely and significant materials of interest to the educational community, documents announced in the monthly abstract journal of the ERIC system, *Resources in Education* (RIE), are usually made available to users in microfiche, reproduced paper copy, and electronic/optical media, and sold through the ERIC Document Reproduction Service (EDRS) or other ERIC vendors. Credit is given to the source of each document, and, if reproduction release is granted, one of the following notices is affixed to the document.

If permission is granted to reproduce the identified document, please CHECK ONE of the following options and sign the release below.

← Sample sticker to be affixed to document

Sample sticker to be affixed to document →

Check here

Permitting microfiche (4" x 6" film), paper copy, electronic, and optical media reproduction.

"PERMISSION TO REPRODUCE THIS MATERIAL HAS BEEN GRANTED BY

_____ *Sample* _____

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)"

Level 1

"PERMISSION TO REPRODUCE THIS MATERIAL IN OTHER THAN PAPER COPY HAS BEEN GRANTED BY

_____ *Sample* _____

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)"

Level 2

or here

Permitting reproduction in other than paper copy.

Sign Here, Please

Documents will be processed as indicated provided reproduction quality permits. If permission to reproduce is granted, but neither box is checked, documents will be processed at Level 1.

"I hereby grant to the Educational Resources Information Center (ERIC) nonexclusive permission to reproduce this document as indicated above. Reproduction from the ERIC microfiche or electronic/optical media by persons other than ERIC employees and its system contractors requires permission from the copyright holder. Exception is made for non-profit reproduction by libraries and other service agencies to satisfy information needs of educators in response to discrete inquiries."

Signature: <i>Karen B. Foster</i>	Position: <i>Child Care Director</i>
Printed Name: <i>Karen B. Foster</i>	Organization: <i>Champaign County Nursing Home</i>
Address: <i>1701 E. Main St. Urbana, IL 61801</i>	Telephone Number: <i>(217) 384-3784</i>
	Date: <i>6/16/97</i>

3
8
6
2
5
6
0
2
5
6
3



III. DOCUMENT AVAILABILITY INFORMATION (FROM NON-ERIC SOURCE):

If permission to reproduce is not granted to ERIC, or, if you wish ERIC to cite the availability of the document from another source, please provide the following information regarding the availability of the document. (ERIC will not announce a document unless it is publicly available, and a dependable source can be specified. Contributors should also be aware that ERIC selection criteria are significantly more stringent for documents that cannot be made available through EDRS.)

Publisher/Distributor:	
Address:	
Price Per Copy:	Quantity Price:

IV. REFERRAL OF ERIC TO COPYRIGHT/REPRODUCTION RIGHTS HOLDER:

If the right to grant reproduction release is held by someone other than the addressee, please provide the appropriate name and address:

Name and address of current copyright/reproduction rights holder:
Name:
Address:

V. WHERE TO SEND THIS FORM:

Send this form to the following ERIC Clearinghouse:

If you are making an unsolicited contribution to ERIC, you may return this form (and the document being contributed) to:

ERIC Facility
1301 Piccard Drive, Suite 300
Rockville, Maryland 20850-4305
Telephone: (301) 258-5500