

Module 2: Safety, Health, Nutrition

Section B: Healthy Practices for Children and Staff

Introduction

A healthy environment for the children and staff in the child care center requires an understanding of infection control and maintaining a clean classroom environment. As an early childhood professional, part of your responsibility includes maintaining and modeling healthy practices for the children in your classroom. In this section you will learn some of the basic procedures of cleanliness and infection control for keeping children and yourself healthy. In addition to taking care of the children, it is important to take care of yourself by eating nutritious meals, getting enough sleep, and following infection control practices.

Learning Objectives

After you complete this section you will be able to:

- Explain 4 strategies of classroom infection control.
- Explain the hand washing process.
- Explain diaper changing procedures.
- List 5 characteristics of a clean classroom.

Guiding Your Learning

As you work through this section think about the following questions:

- How would you define a healthy child care environment?
- What are the responsibilities of an early childhood teacher in providing children with a healthy child care environment?
- Look for specific guidelines for infection control and providing a healthy environment.
- Reflect on the reasons for providing specific procedures and guidelines for cleanliness and health in early care and education programs.

NOTE: The information contained in these sections are partial summaries of the DHS Child Care Licensing Regulations, are not intended to replace or provide an official interpretation of the Arizona Administrative Code and Arizona Revised Statutes for Child Care Facilities.

Summary of Key Arizona Child Care Licensing Standards

Article 3: Facility Administration

R9-5-301. General Licensee Responsibilities

F. Requires that all staff have a TB test.

G. Requires that a staff member with current CPR-First Aid training is in the child care center, on field trips, and with children during transportation.

J. Every September a licensee shall provide to parents of enrolled children information related to recommendations for influenza vaccinations for children.

K. Staff members who do not have proof of immunity against a communicable disease must be excluded from the center from the beginning through the end of an outbreak of the disease.

R9-5-305. Child Immunization Requirements

All children enrolled in a child care program must have a record of all immunizations on file. Two exceptions are granted; one is based on a doctor's statement regarding health concerns for the child; the second exception is based on religious beliefs.

Article 5 Facility Program and Equipment

R9-5-501 General Child Care Program, Equipment, and Health and Safety Standards

C 9. This regulation provides direction on procedures for the handling of children's personal products including sun screen, diaper ointment, and toothpaste.

C 11. This regulation states that the staff are responsible for monitoring enrolled children for overheating or overexposure to the sun.

R9-5-502. Supplemental Standards for Infants

This section pertains to ensuring that soft items such as pillows, comforters, bumper pads or stuffed toys are not in an infant's crib while the infant is in the crib.

Regulations for infants include placing the infants on their back for sleeping and the requirement to obtain written, current, and dated feeding instructions for each infant from a parent or health professional.

R9-5-503 Standards for Diaper Changing

The regulations in this area provide standards and specific direction for diaper changing.

R9-5-504. Supplemental Standards for 1-year-old and 2-year-old children

Center administration and teachers who work with the enrolled child are required to consult with the enrolled child's parent to develop a toilet training plan for each child. The regulation states that staff members cannot force toilet training on an enrolled child.

R9-5-512 Cleaning and Sanitation

The cleaning and sanitation of the facility are addressed in this section including pest control, facility cleanliness including floors, bathrooms (toilets, floors, and fixtures), laundry area, kitchen facilities, trash collection, classroom materials, and furniture and equipment.

All staff members and children are required to wash their hands with soap and running water after toileting.

R9-5-515 Illness and Infestation

A child or staff person who is ill or has a contagious condition cannot remain at the center. When center staff or children become ill with certain communicable diseases or conditions, a written notice should be provided and or posted to all parents and staff regarding the disease.

R9-5-516 Medications

Enrolled children may take prescription or non-prescription medications with written authorization and specific directions from the child's parents or a health care provider. This regulation provides specific directions and requirements for administering children's medication and storage of medication.

A Healthy Environment

In thinking about a healthy child care environment, you might envision young children playing outside, enjoying meals and snacks, taking a nap, actively engaged with other children in learning experiences, and exploring the properties of sand and water. All of these common child care activities are appropriate and help children develop physically, intellectually, and emotionally. However, as young children explore their environment, investigate materials, and play with other children, share meals, and toys, they will, at some point, encounter the germs that can cause infectious diseases or illnesses. Researchers have found that children in child care do become sick more frequently and the illnesses tend to last longer than children who are at home. The good news is that 90% of the infections are mild and require no treatment. The incidence of illnesses decreases after the child has spent one full year in a child care program. The most vulnerable members of an early child care community are infants, pregnant women, and children with health issues.

The causes of infectious diseases in child care programs are viruses, bacteria, and parasites (typically stomach related illnesses). Infectious diseases are spread when a germ comes in contact with a person, a surface, food or water. One of the reasons that child care centers have a higher incidence of infectious diseases is that infants, toddlers, and preschool children have not been exposed to the wide variety of germs within the broader community and have yet to build up their immunity system. Once young children have been exposed, they are more likely to spread the disease since they are not yet skilled in personal hygiene practices that help minimize the spread of disease. If you observe young children, you will notice that they will touch their nose or mouth and then immediately touch a toy or another surface. This action contributes to the spread of infectious diseases. Young children also put everything in their mouths to explore and learn about the world around them.

The symptoms of infectious diseases include: cough, congestion, runny nose, stomach related symptoms including vomiting or diarrhea, a rash, fever, sore throat, ear ache, head ache or other body aches, and changes in behavior. Infectious diseases are spread when an ill person comes in contact with another person or an object they have touched.

Immunizations have helped to stop the spread of many childhood diseases such as measles and chickenpox. Flu shots are often recommended for young children and adults who work with young children. It is important that young children receive immunizations when they attend a child care program. Staff members need to have up-to-date immunizations to prevent the spread of infectious diseases.

Standard/Universal Precautions must be implemented whenever a bodily fluid is present. Bodily fluids are any natural fluids or secretions such as blood, urine, feces, mucus semen, or saliva. When bodily fluids are present, the provider must to the following:

1. Cover any sores, blisters or open wounds.
2. Use protective barriers such as latex gloves.
3. Try to contain the bodily fluid as much as possible by not moving the child. Bring first aid or care to him/her.
4. Clean and sanitize anything that might have come in contact with a bodily fluid.
5. Dispense needles in authorized Sharp containers.
6. Wash hands after being exposed to a bodily fluid.

Other ways that early childhood teachers and parents can control the spread of infectious diseases is through proper nutrition, enough sleep, exercise, and following healthy practices. Healthy practices may be referred to as infection control. Although infection control may sound like a medical term, the concept can be applied to child care programs. Infection control in a child care center includes the following practices:

- Hand washing
- Diaper changing
- Cleaning and sanitizing surfaces and equipment
- Daily Health Check
- Excluding children or staff members who are ill

Hand washing is one of the best ways to prevent the spread of disease. Hand washing, when done correctly and on a regular basis, is the single most effective way to prevent the spread of communicable diseases. Hand washing methods are easy for children learn and have been found to significantly decrease the spread of infectious diseases in child care environments.

Hand Washing Methods

1. Wet the hands with warm, running water.
2. Apply small amount of liquid soap.
3. Wash the fronts, backs, and in between the fingers while rubbing the hands together for 20 seconds.
4. Rinse all the soap and soil from the hands with warm, running water. All the water should go down the drain.
5. Dry the hands completely with a single use, disposable paper towel.
6. Turn off the water with a paper towel to prevent re-contaminating the hands by germs and soil on the faucet handles.
7. Discard paper towels immediately into the trash container. Do not reuse the paper towels for any other purpose.

Teachers can provide young children with fun activities that provide instruction on the correct way to wash their hands. Singing songs, such as the ABC song or Row, Row, Your Boat, while the children wash their hands is one way to ensure that children spend the correct amount of time to remove dirt and germs from their hands. Teachers can reinforce correct hand washing methods by being a role model and washing their hands with the children and providing instruction on hand washing procedures during activity times. Pictures of children hand washing in the children's bathrooms can encourage and remind older child of the hand washing process.

Hand washing at regular times and after specific activities are other factors in successfully using hand washing to reduce infections. The following chart provides a list of the times that teachers and children should wash their hands.

When do you wash your hands in an early childhood program?

Center Staff

- When first arriving at the program
- Before and after giving First Aid, changing bandages or taking a temperature
- Before and after preparing food activities, meals or snacks
- Before and after giving medications or treatments
- After using the toilet or assisting a child to use the toilet
- After diapering a child
- After prolonged coughing/sneezing episodes
- After caring for or handling pets or their cages/enclosures
- After tending to a sick child, adult or pet
- After handling items soiled with body fluids such as blood, stool, urine, mucus.

Children

- When arriving at the program
- Before eating meals or snacks
- Before activities that can include fingers or items that can go into the mouth, such as clay, play dough, water table or food, etc.
- After using the toilet or having a diaper changed
- After playing with animals or pets
- After prolonged coughing, sneezing, vomiting or wiping at the nose and mouth
- After outdoor play, especially before meals or nap time
- After messy activities

Taken from: Arizona Health and Safety Policy Manual for Child Care Centers - Spring 2006 page 30

Proper Diaper Changing procedures are another daily routine that can reduce the incidence of infectious diseases throughout the child care center. Contamination from bodily fluids associated with diaper changing can contain germs that cause infectious diseases that may spread throughout the center if proper diapering procedures are not followed. When infant and toddler teachers use the proper diapering procedures, the spread of germs can be reduced by sanitizing diaper changing surfaces and structured hand washing methods during the diaper changing process. Although the multi-step diapering process can look intimidating at first, the steps for proper diapering become part of the daily care giving routine while protecting the health of the children, teachers, parents, and the community. DHS provides a form titled **Diaper Changing Procedure** which can be posted at each diaper changing area in all classrooms where children's diapers are changed. Hand washing and sanitizing the diaper area are the primary procedures in the diaper changing process.

Note: Non-porous gloves such as latex must be used in the diapering process and are used when there is contact with blood. The use of gloves does not replace hand washing procedures. Once the gloves have been removed, the final step is following the correct hand washing process.

As one of the main activities in infant and toddler classrooms, the diapering and toileting training processes offers opportunities for individual interaction between the teacher and the child. Diapering provides ideal opportunities for building the nurturing relationship that promotes attachment between the child's teacher and the child. Respectful interactions include explaining the steps of the diaper changing process to the infant, "We are going to change your diaper." Or "We are almost finished changing your diaper. We just need to wash your hands." Diaper changing areas may have interesting pictures posted in washable frames that provide opportunities for infants to name items in the pictures. The interaction between the teacher and the child during these routine processes are perfect times to build language skills as the teacher talks to the infant and responds to their vocalizations.

Diaper changes are part of the documentation requirements on the Arizona Child Care Licensing Infant Daily Log. Being responsible for numerous children can make tracking difficult. Keeping accurate documentation ensures that all the children's basic needs are met. Keeping track of diaper changes can help you evaluate the child's health and readiness for toilet training.

**** Ask your Center Director for specific center policies and procedures for diaper changing.**

Toilet Learning or Potty Training is a big step in the life of a young child as they move toward gaining more independence. The Arizona Child Care Licensing Regulations require that child care staff and parents develop a joint plan for toilet training each child. Each child shows signs of readiness for toilet learning at different ages. Children's readiness to use the toilet includes both physical and emotional development. As children showing signs of readiness for learning to use the toilet the child's parents, toddler teaching staff, and administration should participate in developing an individual plan for the child. In addition to the child's readiness, their various cultural perspectives regarding toilet learning need to be considered in working with parents on toilet learning plan.

The Licensing Regulations state that young children shall not be forced to use the toilet. Learning to use the toilet should be a positive experience for the child. Behavioral approaches to potty training that force the child to sit on the toilet, tease, or make negative comments about the toddler may create major emotional issues for the child. Parents or teachers who force toddlers to participate in potty training may create power struggles with the child which creates negative feelings about toileting.

All children have toileting accidents during the toilet training process. When accidents occur during toilet training, change the child quickly while remaining positive and providing reassurance that accidents do happen and they will be successful in learning to use the toilet. When children have toilet accidents, change the child following infection control standards that include sanitizing the area where the child is changed, disposing of single use training pants, and following the correct hand washing process for the child and yourself. Soiled clothing must be put in a plastic bag and then placed in a covered container. Never put soiled clothing in a child's cubby or backpack.

Assessing the child's readiness for toilet training is outlined by considering the child, parent permission, and teachers in a series of steps as suggested by Wittmer and Petersen (2010).

The Child	The Parent	The Teacher
<ul style="list-style-type: none"> • Indicates an interest in using the potty • Follows simple directions • Is able to communicate needs to adults • Is not in a resistance stage of development • Is willing and able to sit on the toilet • Is able to pull pants off and on • Diapers are dry for a longer period of time • Asks to wear underwear • The child has been in the classroom for a period of time and is familiar with the teachers and environment 	<ul style="list-style-type: none"> • Is willing to work collaboratively with the toddler teacher(s) to create a consistent approach to toilet training • Agrees that the child is ready for toilet training • There are no major changes or transitions occurring in the family or child's life 	<ul style="list-style-type: none"> • Have positive and proactive relationship with the parent that includes daily communication • Has developed a trusting relationship with the child • Has the training and experience to provide the child with a positive toilet training experience

**Ask your Center Director for specific toilet training guidelines and policies for the center.

Sudden Infant Death Syndrome (SIDS)

Sudden Infant Death Syndrome is the most common cause of death in infants over one month of age. Although there are no known causes for SIDS there are several factors that have been identified as increasing the chances of infant deaths from SIDS. Some of the factors include:

- Infants sleeping on their tummies
- Infants sleeping on a soft mattress or with soft bedding
- Exposure to tobacco smoke before or after birth
- Prenatal exposure to alcohol
- Premature birth
- Low birth weight

The Safe to Sleep Campaign provides guidelines and information on Sudden Infant Death Syndrome in an online brochure that describes what a safe sleep environment looks like. Teachers and parents can reduce the incidence of SIDS by following these practices:

- Infants should always be placed to sleep on their backs
- Do not offer infants who use pacifiers a pacifier at bedtime until they are one year of age
- Provide infants with a firm and smooth sleeping surface
- Remove all blankets, toys and loose bedding from the crib
- The room environment should be kept warm; do not overheat a room
- Do not overdress an infant to the extent that the child is overheated
- Smoking should not be allowed in areas where children sleep, live, or play
- Make sure nothing covers the baby's head

Classroom Cleanliness is important in preventing the spread of infectious diseases and in creating a warm and inviting environment for the children.

Think about a time when your home was disorganized and in need of a good cleaning. How did you feel when you walked in after a long day at work? Now think about a time when you had cleaned and organized your home. How did you feel when you walked in the house after a long day at work?

Many people feel overwhelmed and disorganized when their surroundings are messy and chaotic. Young children respond in the same way. An environment that is clean and organized provides children with a sense of security in their surroundings that encourages exploration and sense of calmness that influences their behavior. Organizing materials and equipment to prevent clutter helps to create a clean and safe environment. Sometimes it is difficult in an early childhood classroom to determine if the classroom is clean, dirty, or temporarily messy due to children's active play. As individuals we all have our own perspective on what is clean or dirty, organized or messy. Use the following chart to think about what you consider clean, active play messy, or messy and dirty. Talk with your Center Director about the expectations of classroom cleanliness.

Is this a clean classroom, a dirty classroom, or a temporarily messy classroom?

Description	Clean	Dirty	Temporarily Messy
1. All the tables and chairs are clean.			
2. It is the end of choice time and the art table is covered with pictures cut from magazines, glue bottles, and construction paper.			
3. The carpeted area of the classroom has stains.			
4. The sink in the art area is stained with paint and has bottles of paint and paint brushes sitting on the counter next to the sink.			
5. The shelves in the block area are labeled with the block shapes and are free of dust. The wooden blocks appear to have been sprayed and wiped dry.			
6. Children are playing in the book area. There are books on the floor and flannel board pieces that have not been put away.			
7. Children are playing in the sensory table which is filled with cornmeal, small dinosaurs, and cars. There is cornmeal on the floor.			
8. In the manipulative area the shelves are labeled with different types of blocks and toys. The labels have started to peel off of the shelves. The bins are broken and the blocks and toys are dirty and mixed together in the different boxes.			
9. It is naptime and the children are resting on their mats. There is food on the floor under the table and the tables are sticky with the remains of food from lunch.			
10. Children are playing dress-up. The clothes are on the floor. Some of the clothes are dirty. The plastic dishes are dirty and the dolls are not wearing clothes and are dirty.			

A clean environment provides the children with a healthy environment that helps reduce the spreading of infectious diseases. Maintaining a clean classroom involves cleaning and sanitizing or disinfecting the equipment, learning materials, floors, bathrooms, diapering areas, tables, chairs, countertops, and other fixtures or equipment that children come in contact with during their daily routines. Sanitizing will reduce but not eliminate the germs that cause infectious diseases. Disinfecting will destroy the majority of infectious bacteria. The three methods to sanitize or disinfect are through immersing in a disinfectant solution, wiping with a disinfectant solution, or spraying with a disinfectant solution. The most effective disinfectant solution is also the most cost effective. A combination of cool water and bleach can be

mixed each day and used to disinfect the classrooms, bathrooms, diapering areas, and the child care facility.

The Arizona Department of Licensing provides a schedule to disinfect and a recipe for a general use bleach solution:

**Recipe for Bleach GENERAL PURPOSE and
DIAPER AREA Solution**

**Mix the solution daily and label
each bottle of solution with the date.**

1/4 cup bleach
1 gallon of cool water
OR
1 tablespoon bleach
1 quart cool water

Recipe for SOAKING Solution

(For use on toys, eating utensils, etc.)

1 tablespoon bleach
1 gallon cool water
(Soak 2 Minutes and Air Dry)

To learn about how often and the type of disinfectant solution to use, review the handout: Arizona Child Care Center Cleaning and Sanitation Guidelines.

****Ask your Center Director about the specific sanitation guidelines and procedures at the center.**

Daily Health Checks can help prevent the spread of infectious diseases. Daily health checks are conducted by the classroom teacher when the child arrives and throughout the day if necessary. The daily health check provides a way to identify children who may be ill and address their health needs in a timely manner. Typically a daily health check occurs as the parent arrives and shares information with the teacher about the child including schedule differences and any differences in health or behavior. Examples may include differences in the child's appetite, complaining of not feeling well, sleepy, or accidents that may have occurred at home. The sharing of information about the child's health occurs again when the parent picks up the child. The teacher shares the same types of information about the child's behavior, eating patterns, general wellness, and accidents or incidents. Health checks provide one way that parents and teachers can work together to ensure that children are in good health. If the child has symptoms of an illness the parent and teacher can decide if it is safe for the child to be at the center. Children who are ill or contagious must be excluded from the child care program until they are no longer contagious. If a child has a contagious disease, a notice that provides information and symptoms of the illness must be posted in the center to notify parents. A child may not be at the

program until he/she is symptom free for 24 hours or provide a note from the child's doctor that the child is not contagious.

Signs that a child is contagious:

- Fever of 100° axillary (under the arm) if other signs and symptoms of illness are present (e.g. diarrhea, rash, earache, sore throat) or Fever of 101° axillary (under the arm) or greater, even if no other signs and symptoms are present
- Sores that are open, infected, or not easily covered
- Vomiting more than twice in 24 hours
- Diarrhea more than three times in 6 hours
- Earache that is causing severe discomfort
- Red eyes with discharge
- Lice or nits
- Scabies
- Ringworm
- Undiagnosed rash

****Ask Your Center Director about specific procedures for daily health checks at the center.**

Children may attend the center while on medication if they do not have a contagious illness. If your program allows the administering of medications parents must provide signed medication authorization for prescribed medications to be given to their child. If a child in your class takes medication while at the center, talk with your Center Director about the specific medication policies and procedures. Remember, that only medications that have written parent authorizations may be given to a child in care.

Teacher Health

Teachers who work in child care centers need to know it is important to take care of yourself as well as the children. Eating healthy foods, getting enough rest, making certain your immunizations are up-to-date, and taking time to exercise are all important steps in maintaining your health.

Your responsibility is to provide a healthy, safe, and nurturing environment for young children. Developing relationships with children are equally as important as maintaining a clean environment. The children are always the first priority. Incorporate the daily routines involved in maintaining a healthy environment with the classroom activities and daily schedule. Use your creativity and ask others for suggestions on how to combine the multiple responsibilities of an early learning teacher.

Applying Your Knowledge

How does this information affect your work with young children?

Following infection control practices is a critical part of your responsibility as a child care professional. Young children are more susceptible to infectious diseases. By following hand washing, sanitation, and infection control practices the incidence of infectious diseases in child care centers may be decreased.

Check Your Understanding

- ✓ Name 4 infection control methods to use in a child care center.
- ✓ Explain the steps in the hand-washing process and reasons hand washing is important in a child care center.
- ✓ Name three times when children should wash their hands during their child care day.
- ✓ Name three times when staff should wash their hands while working with young children.
- ✓ List the steps in diaper changing.
- ✓ Name three people who are important in determining when a child is ready for toilet training.
- ✓ Name three characteristics of a clean classroom.

Resources

Printable Resources

DHS - Cleaning and Sanitation Guidelines

http://www.azdhs.gov/als/childcare/documents/providers/forms/cleaning_sanitation_guidelines.pdf

DHS – Diaper Changing Procedure

http://www.azdhs.gov/als/childcare/documents/providers/forms/diaper_changing_procedure.pdf

DHS – Hand Washing Tip Sheet <http://www.azdhs.gov/als/childcare/documents/providers/helping-hands/handwashing.pdf>

What does a safe sleep environment look like? SIDS Reduction

https://www.nichd.nih.gov/publications/pubs/Documents/safe_sleep_environ_sheet_2012.pdf

DHS - Tummy Time Tip Sheet <http://www.azdhs.gov/als/childcare/documents/providers/helping-hands/tummy-time.pdf>

Videos

DHS – Diaper Changing Areas <http://www.youtube.com/playlist?list=PLE5A9923B23D9AE01>

DHS -Infant Classroom/General Diapering Information
<http://www.youtube.com/playlist?list=PLE5A9923B23D9AE01>

References

American Academy of Pediatrics: Infectious Diseases Curriculum – Participants Manual
<http://www.healthychildcare.org/ParticipantsManualID.html>

National Institute of Child Health and Human Development, Safe to Sleep Campaign, What Does A Safe Sleep Environment Look Like?
https://www.nichd.nih.gov/publications/pubs/Documents/safe_sleep_environ_sheet_2012.pdf

Wittmer, D. S. & Petersen, S.H. . (2010) Infant and toddler development and responsive program planning: A relationship-based approach, Second Edition. Pearson.

Module 2-Section C Worksheet

Name 4 infection control methods to use in a child care center.

- | | | | |
|----|-------|----|-------|
| 1. | _____ | 3. | _____ |
| 2. | _____ | 4. | _____ |
| | _____ | | _____ |

Explain the steps in the hand-washing process and reasons hand washing is important in a child care center.

Name three times when children should wash their hands during their child care day.

- | | |
|----|-------|
| 1. | _____ |
| 2. | _____ |
| 3. | _____ |

Name three times when staff should wash their hands while working with young children.

- | | |
|----|-------|
| 1. | _____ |
| 2. | _____ |
| 3. | _____ |

List the steps in diaper changing.

Name three people who are important in determining when a child is ready for toilet training.

- | | |
|----|-------|
| 1. | _____ |
| 2. | _____ |
| 3. | _____ |

Name three characteristics of a clean classroom.

- | | |
|----|-------|
| 1. | _____ |
| 2. | _____ |
| 3. | _____ |