Appendix A

Instructions for Doing a Daily Health Check

A daily health check occurs when the child arrives at the program and continues throughout the day.

Check the following while at the child’s level so you can interact with the child when talking with the parent:

1. Child’s behavior: is it typical or atypical for time of day and circumstances?

2. Child’s appearance:
   - Skin: pale, flushed, rash (*feel the child’s skin by touching affectionately*)
   - Eyes, nose, and mouth: note color; are they dry or is there discharge? Is child rubbing eye, nose, or mouth?
   - Hair: (in a lice outbreak look for nits)
   - Breathing: normal or different; cough

3. Check with the parent:
   - How did the child seem to feel or act at home?
   - Sleeping normally?
   - Eating/drinking normally? When was the last time child ate or drank?
   - Any unusual events?
   - Bowels and urine normal? When was the last time child used toilet or was changed?
   - Has the child received any medication or treatment?

4. Any evidence of illness or injury since the child was last participating in child care?

5. Any indications of child abuse or maltreatment?

Document any unusual findings.
Appendix B

Hand Washing

All staff, volunteers, and children will wash their hands at the following times:

a) upon arrival for the day, when moving from one child care group to another, and whenever they are dirty

b) before and after:
   - eating, handling food, or feeding a child
   - giving medication

c) after:
   - diapering and toileting
   - coming in contact with bodily fluids (mucous, blood, vomit) and wiping noses, mouths, and sores
   - handling pets or other animals
   - coming in from outdoors

All staff, volunteers, and children will wash their hands using the following steps:

1) Moisten hands with water and apply liquid soap.

2) Rub hands with soap and water for at least 30 seconds – remember to include between fingers, under and around fingernails, backs of hands, and scrub any jewelry.

3) Rinse hands well under running water with fingers down so water flows from wrist to finger tips.

4) Leave the water running.

5) Dry hands with a disposable paper towel or approved drying device.

6) Use a towel to turn off the faucet and, if inside a toilet room with a closed door, use the towel to open the door.

7) Discard the towel in an appropriate receptacle.

8) Apply hand lotion if needed.

If a child is too heavy to hold for hand washing at the sink and cannot be brought to the sink for hand washing, use disposable wipes or a damp paper towel moistened with a drop of liquid soap to clean the child’s hands. Then, wipe the child’s hands with a wet paper towel and dry the child’s hands with a fresh paper towel.
Appendix C

Diapering

Diapering will be done only in the selected diapering area. Food handling is not permitted in diapering areas.

Surfaces in diapering areas will be kept clean, waterproof, and free of cracks, tears, and crevices. All containers of skin creams and cleaning items are labeled appropriately and stored off the diapering surface and out of reach of children.

Diapers will be changed using the following steps:

1) Collect all supplies, but keep everything off the diapering surface except the items you will use during the diapering process. Prepare a sheet of non-absorbent paper that will cover the diaper changing surface from the child’s chest to the child’s feet. Bring a fresh diaper, as many wipes as needed for this diaper change, non-porous gloves and a plastic bag for any soiled clothes.

2) Put on gloves. Avoid contact with soiled items. Items that come in contact with items soiled with stool or urine will have to be cleaned and sanitized. Carry the baby to the changing table, keeping soiled clothing from touching the caregiver’s clothing. Bag soiled clothes and, later, securely tie the plastic bag to send the clothes home.

3) Unfasten the diaper, but leave the soiled diaper under the child. Hold the child’s feet to raise the child out of the soiled diaper and use disposable wipes to clean the diaper area. Remove stool and urine from front to back and use a fresh wipe each time. Put the soiled wipes into the soiled diaper. Note and later report any skin problems.

4) Remove the soiled diaper. Fold the diaper over and secure it with the tabs. Put it into a lined, covered or lidded can and then into an outdoor receptacle or one out of reach of children. If reusable diapers are being used, put the diaper into the plastic-lined covered or lidded can for those diapers or in a separate plastic bag to be sent home for laundering. Do not rinse or handle the contents of the diaper.

5) Check for spills under the baby. If there is visible soil, remove any large amount with a wipe, then fold the disposable paper over on itself from the end under the child’s feet so that a clean paper surface is now under the child.

6) Remove your gloves and put them directly into the covered or lidded can. Wipe your hands with a disposable wipe.
7) Slide a clean diaper under the baby. If skin products are used, put on gloves and apply product. Dispose of gloves properly. Fasten the diaper.

8) Dress the baby before removing him from the diapering surface. Clean the baby’s hands, using soap and water at a sink if you can. If the child is too heavy to hold for hand washing and cannot stand at the sink, use disposable wipes or soap and water with disposable paper towels to clean the child’s hands. Take the child back to the child care area.

9) Clean and disinfect the diapering area:
   - Dispose of the table liner into the covered or lidded can.
   - Clean any visible soil from the changing table.
   - Spray the table so the entire surface is wet with bleach solution or hospital-grade germicidal solution.
   - Leave the bleach on the surface for 2 minutes, then wipe the surface or allow it to air dry.

10) Wash hands thoroughly.
Appendix D

Safety Precautions Related to Blood

All staff will follow standard precautions when handling blood or blood-contaminated body fluids. These are:

a) Disposable gloves must be immediately available and worn whenever there is a possibility for contact with blood or blood-contaminated body fluids.

b) Caregivers are to be careful not to get any of the blood or blood-contaminated body fluids in their eyes, nose, mouth, or any open sores.

c) Clean and disinfect any surfaces, such as countertops and floors, onto which blood has been spilled.

d) Discard blood-contaminated material and gloves in a plastic bag that has been securely sealed. Clothes contaminated with blood must be returned to the parent at the end of the day.

e) Wash hands using the proper hand washing procedures.

In an emergency, a child’s well-being takes priority. A bleeding child will not be denied care even if gloves are not immediately available.

The program will have a Bloodborne Pathogens Exposure Plan ensuring all staff members are trained in ways to protect themselves and ensuring the facility’s plan will conform to the requirements reflected in the model plan provided by OSHA.

A copy of the model exposure plan is available at http://www.osha.gov/Publications/osha3186.pdf

To request a copy of the OSHA Bloodborne Pathogens Model Plans publication (Publication # 3186) write to:

U.S. Department of Labor/OSHA
OSHA Publications
P.O. Box 37535
Washington, D.C. 20013-7535
or call: (202) 693-1888
Appendix E

Cleaning and Sanitizing

Equipment, toys, and objects used or touched by children will be cleaned and sanitized as follows:

1. Equipment that is frequently used or touched by children on a daily basis must be cleaned and disinfected when soiled and at least once weekly.
2. Carpets contaminated with blood or bodily fluids must be spot-cleaned.
3. Diapering surfaces must be disinfected after each child.
4. Countertops, tables and food preparation surfaces (including cutting boards) must be cleaned and disinfected before and after food preparation and eating.
5. Potty chairs must be emptied and disinfected after each use. They must not be washed out in a hand washing sink, unless that sink is washed and disinfected after such use.
6. Toilet facilities must be kept clean at all times, and must be supplied with toilet paper, soap, and disposable towels accessible to the children.
7. Any surface which comes in contact with blood or bodily fluids must be disinfected immediately.
8. Thermometers and toys mouthed by children must be soaked in a disinfectant before use by another child.

Sanitizing Solution

Unscented chlorine bleach is the most commonly used sanitizing agent, because it is affordable and easy to get. The State Sanitary Code measures sanitizing solution in "parts per million," but programs can make the correct strength sanitizing solution (without having to buy special equipment) by reading the label on the bleach container and using common household measurements.

Read the Label

Sodium hypochlorite is the active ingredient in chlorine bleach. Different brands of bleach may have different amounts of this ingredient: the measurements shown in this appendix are for bleach containing 6% to 6.15% sodium hypochlorite. The only way to know how much sodium hypochlorite is in the bleach is by reading the label. Always read the bleach bottle to determine its concentration before buying it. If the concentration is not listed, you should not buy that product.

Use Common Household Measurements

Using bleach that contains 6% to 6.15% sodium hypochlorite, programs need to make two standard recommended bleach solutions for spraying nonporous or hard surfaces and a separate solution for soaking toys that have been mouthed by children. Each spray bottle should be labeled with its respective mixture and purpose. Keep it out of children’s reach. The measurements for each type of sanitizing solution are specified on the next page.
SPRAY BLEACH SOLUTION #1 (for food contact surfaces)
Staff will use the following procedures for cleaning and sanitizing nonporous hard surfaces such as tables, countertops and diapering surfaces:
1. Wash the surface with soap and water.
2. Rinse until clear.
3. Spray the surface with a solution of \( \frac{1}{2} \) teaspoon of bleach to 1 quart of water until it glistens.
4. Let sit for 2 minutes.
5. Wipe with a paper towel or let air-dry.

SPRAY BLEACH SOLUTION #2 (for diapering surfaces or surfaces that have been contaminated by blood or bodily fluids)
Staff will use the following procedures for cleaning and sanitizing diapering surfaces or surfaces that have been contaminated by blood or bodily fluids:
1. Put on gloves.
2. Wash the surface with soap and water.
3. Rinse in running water until the water runs clear.
4. Spray the surface with a solution of 1 tablespoon of bleach to 1 quart of water until it glistens.
5. Let sit for 2 minutes.
6. Wipe with a paper towel or let air-dry.
7. Dispose of contaminated cleaning supplies in a plastic bag and secure.
8. Remove gloves and dispose of them in a plastic-lined receptacle.
9. Wash hands thoroughly with soap under running water.

SOAKING BLEACH SOLUTION (for sanitizing toys that have been mouthed)
Staff will use the following procedure to clean and disinfect toys that have been mouthed by children:
1. Wash the toys in warm soapy water, using a scrub brush to clean crevices and hard to reach places.
2. Rinse in running water until water runs clear.
3. Place toys in soaking solution of 1 teaspoon of bleach to 1 gallon of water.
4. Soak for 5 minutes.
5. Rinse with cool water.

When sanitizing equipment, toys and solid surfaces the program will use:
(check all that apply)
- hospital-grade germicide
- bleach solution made fresh each day
- Spray solution #1: \( \frac{1}{2} \) teaspoon of bleach to 1 quart of water
- Spray solution #2: 1 tablespoon of bleach to 1 quart of water
- Soaking solution: 1 teaspoon of bleach to 1 gallon of water
### DONNING

1. Wash hands.

2. Put on a clean pair of gloves. Do not reuse gloves.

### REMOVAL and DISPOSAL

1. Remove the first glove by pulling at the palm and stripping the glove off. The entire outside surface of the gloves is considered dirty. Have dirty surfaces touch dirty surfaces only.

2. Ball up the first glove in the palm of the other gloved hand.

3. Use the non-gloved hand to strip the other glove off. Insert a finger underneath the glove at the wrist and push the glove up and over the glove in the palm. The inside surface of your glove and your ungloved hand are considered clean. Be careful to touch clean surfaces to clean surfaces only. *Do not touch the outside of the glove with your ungloved hand.*

4. Drop the dirty gloves into a plastic-lined trash receptacle.

5. Wash hands.

_Glove use does not replace hand washing. Providers must always wash their hands after removing and disposing of medical gloves._