



CREATING A QUALITY LEARNING ENVIRONMENT

Handwashing & Basic Health Considerations for the Assessment Process

Use this video supplement to learn more about how providers can ensure that health and sanitation practices are carried out appropriately throughout the day.

Using the Supplement Guide for the Video “Handwashing and Basic Health Considerations for the Assessment Process”

Child care centers, family child care providers, and agencies that offer assistance to child care facilities can use this information to supplement the content discussed in the video. Much of the guide follows the outline of the video, but additional information and examples are provided in this format.

We encourage child care providers who have never been assessed for licensure to consider this opportunity to gain an objective view about the quality of care for the program and use that information to make decisions about quality improvements. Contact your Child Care Consultant at the North Carolina Division of Child Development and Early Education for more information about the assessment process, star rated license system, and submitting a request for an assessment.

Thank you for viewing the video. We hope the information shared with you generates new ideas to consider for your program.

Considerations While Viewing This Video and Others in the Series “Creating a Quality Learning Environment”

As teachers watch the video, they may have many ideas and thoughts to consider. It is important to remember that each video in the series has a particular area of focus. Though viewers might want to consider all the factors that contribute to a quality child care program, we recommend keeping the specific content in mind while watching, so you can pay attention to the key considerations of the focus area. For example, this video focuses primarily on sanitation; even though there may be scenes of positive interactions between staff and children, the main discussion points surround handwashing and basic sanitation.

Furthermore, viewers may notice elements that may seem problematic for meeting various requirements across different agencies. Some may even point out an issue or concern, or disagree with how a situation is handled. Acknowledging the fact that no child care program offers “perfect care” and the goal of this series is to show quality across a variety of settings, rather than depicting an ideal or unobtainable standard, should help address these concerns.



Outline of Video Supplement

- I. Handwashing Procedures
- II. Health-Related Handwashing
- III. Handwashing Related to Meals and Snacks
- IV. Surface Sanitation
- V. Diapering and Toileting
- VI. Helpful Hints and Common Questions
- VII. Additional Basic Health Considerations
- VIII. Resources

I. Handwashing Procedures

Requirements for good practice:

- Wet hands with running water.
- Wash all surfaces of hands with soap.
- Rinse well.
- Dry hands with single-use paper towel or other method.

Questions

To Earn a Higher Score, Does Handwashing Have to Be Perfect?

Perfection is not required at the “good” level. To earn higher scores, hands must be washed as needed at least 50–75 percent of the time, or with just a few lapses, depending upon the level of quality and scale. For specific requirements, refer to the appropriate scale, item, and indicator.

Common Problems:

- Soap is not used (children just rinse hands with water).
- Children do not rub hands well for the required amount of time—soap is immediately rinsed away.
- Children do not dry hands.

To address these common issues, staff members often use verbal reminders to complete the steps, and supervise the children appropriately to ensure the steps are completed.

Handwashing for Infants: Do Babies Have to Wash Their Hands?

- Infants with head control are expected to have their hands washed with soap and running water. For a very young infant with no head control, a disposable wipe would be an acceptable substitute.
- Children with special needs who have little head/neck control, rigid muscle tone, and/or are too heavy for teachers to lift can also use a disposable wipe in place of soap and running water.

Infants with head control are expected to have their hands washed with soap and running water. For a very young infant with no head control, a disposable wipe would be an acceptable substitute.

II. Health-Related Handwashing

Good handwashing is the most important means of reducing the spread of germs in child care settings. To help maintain a healthy classroom, hands should be washed at the following times:

- Upon entry to the classroom or re-entry after outdoor play.
- After messy types of play (also before and after water play).
- After contact with bodily fluids.
- After touching contaminated objects.

Hand Sanitizer—Is It OK or Not?

It depends on the circumstances. If there is no access to running water in certain situations, then it is okay to use hand sanitizer, disposable wipe, or wet paper towel. Washing hands with running water is always required in the classroom.

- **Outdoor play.** The provisions mentioned above can be used as a substitute for handwashing after wiping noses and before water play, but hands must be washed upon re-entry after outdoor play.
- **Cafeteria.** If the cafeteria has no sink, it is okay to wash hands in the classroom and then use hand sanitizer, wipe, or wet paper towel before going through the cafeteria line, as long as other measures are taken to prevent significant contamination of hands in between (such as instructing children not to touch the walls or each other).

Other Things to Remember:

- If there is blood (or fecal contamination) hands must be washed with soap and water even if you are outside.
- Hands must be washed with soap/running water before eating outside.

III. Handwashing Related to Meals and Snacks

Children and adults should wash their hands before serving food or eating. But there are other times when handwashing is required to maintain sanitary conditions. These include:

- Adults need to wash hands prior to handling bottles (such as moving them from the refrigerator to a warmer), preparing food, setting the tables, or serving food.



- Children need to wash hands immediately before eating and before bottle-feedings if they hold or handle their own bottles.
- Younger children need to wash hands after eating, since it is likely they will touch their face or food items. For older children such as preschoolers, handwashing after eating is required if finger foods were served or hands became messy for some reason while eating/drinking. For school-agers, handwashing is required if hands become soiled after eating messy foods.

Common Problems:

- Adults do not wash just before handling a bottle.
- Adults contaminate hands during bottle-feedings or meals by touching the floor, other children, or materials and do not re-wash hands as needed.
- Children wash hands but then contaminate them by touching classroom materials, furnishings, or other children before being seated to eat.

IV. Surface Sanitation

Tables

It is important to know the steps to proper table sanitation. Apply the soapy water solution or detergent first and wipe with a clean cloth. Apply the sanitizing solution (often bleach/water) and allow the sanitizing solution to remain on the surface for at least **two minutes** or air dry.

Common Problems:

- Both solutions are sprayed at the same time.
- Sanitizer is used without first cleaning the table.
- Wiping the sanitizing solution off immediately or before the two-minute contact time.

Another issue includes contamination of the eating surface prior to the meal. If play occurs in the classroom prior to meals, do not sanitize too early, as it will be likely for children (especially toddlers) to touch tables after they are clean. Wait until just before meals or have children play away from the table until it is time to wash hands to eat. If children play outdoors or are just arriving prior to eating, consider preparing the table before going out or before children arrive. Then the table is ready as soon as the group comes indoors and washes hands.

Children need to wash hands immediately before eating and before bottle-feedings if they hold or handle their own bottles.

When children wash hands, germs are deposited on the sink faucets and basin. The germs associated with toileting and diapering can potentially put children at risk for serious illnesses, particularly for very young children, so it is important to ensure that surfaces contaminated with these germs are sanitized to reduce the spread of illness.

Separate Sinks

If you have two or more sinks in your room, then hooray! Reducing the potential spread of germs takes a little less work. All you have to do is designate a sink to wash hands after toileting/diapering and designate the other sink(s) for all other types of handwashing (after entering the classroom, after wiping noses, before meals, etc.).

Quick Tips:

- Label your designated sinks so all adults, such as substitute teachers, know which sink to use for the specific type handwashing needs.
- Use picture labels and teach the children (when age-appropriate) about the separate sinks and explain that this will help them stay healthy.

Same Sink

If you use the same sink in your classroom to wash hands after diapering/toileting and for other handwashing purposes, you will need to disinfect the sink faucet and basin after diapering/toileting related handwashing. If you wipe the sink dry, make sure not to wipe the disinfectant off before two minutes. Here are some ways to achieve this important goal:

Quick Tips:

- If a group of children is completing toileting routines, or several diapers are being changed in succession, wait until after the last handwashing before disinfecting the sink. After spraying the sink, just let it air dry and make sure children do not touch the disinfectant; there is no need to wipe it off!
- If children potty at different times throughout the day, such that this handwashing is interspersed with other types of handwashing, the sink needs to be disinfected after each toileting use.
- **Exception.** If a group of children is using the bathroom, washing hands, and immediately going to eat, the water can be kept running or the faucets can be turned off with a paper towel in order to manage potential contamination.

When children wash hands, germs are deposited on the sink faucets and basin. The germs associated with toileting and diapering can potentially put children at risk for serious illnesses, particularly for very young children, so it is important to ensure that surfaces contaminated with these germs are disinfected to reduce the spread of illness.

Common Problems:

- Thinking you have to disinfect after each child when several children are completing toileting routines: this wastes time, creates a longer transition, and is unnecessary.
- Thinking you have to disinfect after other types of uses as well: you only need to disinfect sinks after toileting or diapering uses.

Toy Sanitation

Mouthing toys is a common behavior. This occurs as an age-appropriate means for exploring materials in infants and toddlers, and sometimes occurs with preschool-aged children as well. Having provisions for separating mouthed toys so that they can be cleaned and sanitized helps control the spread of germs in the classroom.

Quick Tips:

- Keep a designated bin for separating mouthed toys and maintain awareness of children's behaviors.
- Wait until a child is done with a mouthed toy before removing it.
- Make sure younger children cannot independently access the dirty toy bin.
- Talk to toddlers and preschool children about pretending with dramatic play materials without actually putting them in their mouths; model this behavior when appropriate.

V. Diapering and Toileting

The proper diaper change procedure was designed to help cut down on the spread of germs during diapering. For the proper procedure, see the document, "North Carolina Child Care Health and Safety Resource Center Diapering Poster."

Quick Tips:

- Post a simple picture poster with steps of the diaper changing process over the changing table.
- Review and practice the correct process to make it a habit.
- Always use hands-free trash cans for diapering purposes.
- Place trash cans convenient to diapering table, making it easy to use the foot pedal.

Having provisions for separating mouthed toys so that they can be cleaned and sanitized helps control the spread of germs in the classroom.

Common Problems:

- Forgetting a step or doing them out of order (forgetting to pull wipes out of the container prior to bringing the child to the area; wiping the child's hands with a wipe after putting their clothes on instead of before; disposing of the soiled diaper after completing the change instead of immediately after taking it off the child).
- Touching the trash can lid to dispose of diapers.
- Wiping the disinfectant off immediately, rather than waiting for two minutes.
- Using fabric straps on changing pads (remove these because they cannot be properly cleaned and disinfected).
- Thinking a wipe is sufficient for cleaning an infant's hands (if the infant has head control they also need to have their hands washed with soap and running water).

Proper Procedures for Changing Diapers or Pull-Ups When Children Are Standing Up During Toilet Training

Requirements are based on what is needed.

- **Preparation:** If the change gets messy (heavily soaked diaper or feces), then wipes should have been brought to the diapering area. If there are no problems, then preparation is not needed. Teachers typically know which children need more assistance or have more accidents.
- **Disposal:** Soiled diapers/pull-ups should be disposed of immediately after being removed from the child just like a regular diaper change on a diapering table. Placing the soiled diaper/pull-up on the floor is not considered proper disposal.
- **Wipe adult's hands:** This step is required only if the adult's hands become soiled when removing the soiled diaper/pull-up (heavily soaked diaper or diaper with feces).
- **Wipe child's hands:** This step is required only if the child soils hands; for example, putting hands inside the soiled diaper/pull-up.
- **Clean and disinfect the diapering surface:** For this step, there is no diapering surface, but if an extremely soiled diaper/pull-up (drenched, oozy, etc.) is placed on the floor, then cleaning and sanitizing of that area would be required.



Quick Tip:

- Keep a container of wipes in the bathroom so they will always be handy.

VI. Helpful Hints and Common Questions

Trash Cans: Which Are Hands-free?

There are several kinds of hands-free trash cans including foot pedal and flip-top lids. However, foot pedal trash cans are the best option. Flip-top lids can be problematic; some lids swing open easier than others depending on the weight of the item being thrown away. A diaper may be heavy enough to push open the lid on its own, but the lid will have to be pushed open when throwing away a paper towel. But, if teachers use the paper towel to push open the lid **and** this is a consistent practice, then it would be okay. However, children are usually not able to do this consistently and almost always touch the flip lids.

Quick Tips:

- Classrooms should test out several kinds of trash cans and see what works for the ages and abilities enrolled.
- Even with foot pedals, children often lift the lid with their hand when throwing items away—review with children why it is important not to touch the lid.
- Leave trash can lids open during routine times (handwashing, toileting, lunch) making it less likely children will touch lids.
- Watch the height of trash cans. Sometimes in toddler and 2s rooms, trash cans are as tall as the children. This causes children to touch the rim of the trash can when throwing items away rather than being able to drop the paper towel down into the trash can.

Common Questions:

- **Question:** If children use a hallway bathroom for toileting and then go directly to the classroom, do they have to wash again as they enter the classroom?

Answer: When the scales refer to handwashing upon arrival and re-entry, that means children and adults need to wash their hands when they arrive at the program, when they come inside from the playground, and if they are moving from one classroom grouping (such as a morning room) to another grouping in another classroom. The situation described in the question would not require additional handwashing.

Classrooms should test out several kinds of trash cans and see what works for the ages and abilities enrolled.

- **Question:** If a child quickly comes in to toilet during outdoor time, does he have to wash his hands before toileting?

Answer: No, as long as he does not touch classroom materials. The requirement for handwashing when re-entering the classroom from outdoors is so that outdoor germs are not transferred to indoor play materials and furnishings. So if the child is only coming in to toilet and not to play with toys, then handwashing is not required until after toileting is completed.

- **Question:** Do children need to wash hands before being served water?

Answer: If it is just water, and children quickly have a drink and then return to playing, then it is fine to skip handwashing. However, if it is a whole group routine where all of the children have to sit down at a table for a water and sit for several minutes, then handwashing and proper table sanitation would be required. When children have to sit at the table and wait for others, they tend to have spills, splash/play in the water, lick their fingers, etc., as compared to having a quick drink of water and moving on to another activity.

- **Question:** Do teachers need to wash hands between each child when applying sunscreen?

Answer: No. When applying sunscreen to children in rapid succession, handwashing is not required between each child as long as the teacher's hands are washed at the beginning and end of the sunscreen application routine.

VII. Additional Basic Health Considerations

Tooth Brushing: How Do You Make It Sanitary?

Having children brush their teeth is encouraged and earns credit at the excellent level; however, programs do need to ensure sanitary practices are maintained.

Quick Tips:

- If one tube of toothpaste is used, the toothpaste for each child should be squeezed out onto a clean paper towel or plastic cup for each child and not directly onto each child's toothbrush.
- If the same sink is used for tooth brushing and handwashing after toileting, the sink must be disinfected before children brush their teeth.
- Be sure toothbrushes are able to air dry and bristles do not touch each other.
- Toothpaste does not have to be used to count as proper tooth brushing.

Having children brush their teeth is encouraged and earns credit at the excellent level; however, programs do need to ensure sanitary practices are maintained.

Storage and Spacing for Cots, Cribs, and Mats

Proper spacing between cots/mats/cribs cuts down on the spread of airborne germs while children are sleeping.

Quick Tips:

- If a solid barrier is used to separate cribs that are closer together than the required sanitary spacing, it must extend the full length of the sleeping surface—an “L,” “T,” or perpendicular placement does not work if the barrier covers only the short end instead of the long side.
- If possible, avoid putting mats in high traffic areas (e.g., in front of a book shelf where children go to pick a book before nap time or by the bathroom doorway). If necessary, place those mats last, making it less likely that they get stepped on by other children.
- Barriers must be solid—pegboards with small holes or open shelves are not considered solid barriers.

Other Things to Consider:

- Children should only sleep with personal sleep items that are not used for group play throughout the day (their own stuffed animals, dolls, pillows, etc.) rather than community classroom materials such as those located in a cozy area.
- When children’s bedding (blankets, pillows, etc.) is placed on top of cots for storage and the cots are stacked, be sure bedding is folded neatly and smoothly so it is not touching the bottom of the cot stacked above it.

Proper spacing between cots/mats/cribs cuts down on the spread of airborne germs while children are sleeping.

VIII. Resources

Helpful documents, Web sites, and related resources are found at:

Web Resources

- North Carolina Rated License Assessment Project: www.ncrlap.org.
- North Carolina Child Care Health and Safety Resource Center: www.healthychildcarenc.org
- The Division of Child Development and Early Education: www.ncchildcare.dhhs.state.nc.us.

References

- American Academy of Pediatrics. (2002). *Caring for our children: national health and safety*.
- Harms, T., Clifford, R., & Cryer, D. (2005). *Early childhood environment rating scale. Revised edition*. New York: Teachers College Press.
- Harms, T.; Clifford, R.; & Cryer, D. (2007). *Family child care environment rating scale. Revised edition*. New York: Teachers College Press.
- Harms, T.; Clifford, R.; & Cryer, D. (2006). *Infant/toddler environment rating scale. Revised edition*. New York: Teachers College Press.
- Harms, T.; Jacobs, E.; & White, D. (1996). *School-age care environment rating scale*. New York: Teachers College Press.
- North Carolina Additional Notes for Clarification (n.d.). Retrieved from the North Carolina Rated License Assessment Web site at www.ncrlap.org.
- *Performance standards: Guidelines for out-of-home child care programs. Second edition*. Washington, DC: American Academy of Pediatrics.

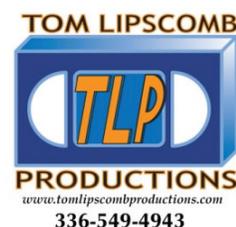
Acknowledgments

Handwashing and Basic Health Considerations for the Assessment Process is a child care training project by NCRLAP with support from the North Carolina Division of Child Development and Early Education.

We wish to give a special thank you to the children and staff of the featured child care programs as well as to Tom Lipscomb of Tom Lipscomb Productions. Copies of this video and guide may be reproduced and used for training purposes.

Handwashing &
Basic Health
Considerations for the
Assessment Process

12



NCRLAP

University of NC at
Greensboro
915 Northridge St.
Greensboro, NC 27403
www.ncrlap.org
866-3NCRLAP (toll-free)