



gretchen's
house

So you want to know more about...

Our Health Policies

Rx for Healthy Kids

You did your research carefully and picked a clean and sanitary childcare center. Then why is your child still getting sick all the time? Here are some reasons children in high quality programs occasionally become ill:

- Children who enter group care, whether as infants, kindergartners, or somewhere in between, will be exposed to a new and relatively concentrated set of germs. For the first year or so that they are in care, they will be building up their immunity.
- Children who have busy schedules can come to miss crucial rest, which can

compromise immunity.

- Children who return to care before they are fully recovered from an illness are less able to fight off the next batch of germs.

It may help to remember that there are steps you can take to reduce your child's exposure to illness and boost their immunity.

Your best defense is a good offense. Make stringent handwashing the norm in your household and insist that visitors do the same. Wash your hands before you handle your child, their diapers, or their food. Serve a balanced diet and make sure that your child gets the nutrients he or she needs to stay

strong. When your child is stressed, reduce their exposure to others or "germ-filled" environments (i.e., those with many different people or infrequent cleaning like stores and parks).

Consult with your physician as to whether flu shots are a good idea for anyone in your family.

When your child becomes ill, make sure that they are feeling 100% before you expose them to the outside world again. Educate yourself about common illnesses. Make sure that *you* have the support you need: if absence from work is an issue, prepare a back-up childcare plan **before** your child becomes sick.

GH Germ-busters

Our teachers are trained to prevent the spread of Blood-Borne Pathogens. They also have First Aid and CPR certification.

- We use separate sinks for diapering and food prep.
- We use a licensing-mandated bleach solution to disinfect food preparation areas, diapering and toileting surfaces, play surfaces, and to clean up spills and accidents.
- We disinfect mouthed toys daily and bin toys weekly.
- We wash our own and children's hands (even babies') after diapering/toileting; before and after meals, and after any contact with bodily fluids.
- We use paper towels to dry hands and tabletops.
- We have hand sanitizers available for those occasional times when teachers can't immediately wash their hands.

Further reading

- *Caring for your Baby and Child*, by the American Academy of Pediatrics
- *Your Baby and Child*, by Penelope Leach

Handwashing—Your Best Defense

Why hand-washing is important:

- Hand-to-mouth contact is the number one transmitter of infectious disease.
- Washing hands (yours and theirs) protects you and the children in your care.
- The most contagious period for many illnesses is often **before** the person displays any symptoms; in addition, some people may carry a virus without being affected.

When you should wash hands:

- Before preparing or serving food;
- Before and after toileting and diapering;
- After wiping noses or other contact with bodily fluids;
- Before handling babies and between handling different children;
- When you arrive home or at the center.

How you should wash hands:

- Use warm running water.
- Use an antibacterial soap.
- Wash hands up to and including the wrists, backs of hands, under fingernails, and between fingers.
- Work soap into a foamy lather for at least ten seconds.
- Rinse hands thoroughly and dry with a paper towel, using the towel (not your clean hands) to turn off the faucet.

A note about hand sanitizing gels: These are **not** intended to be a *substitute* for proper handwashing, merely a stopgap measure when soap-and-water handwashing is not feasible.

Frequently Asked Questions

My child is fine to come back to the center, but I don't want him to go outside today. Outdoor time is an integral part of our curriculum. We can't isolate a child from particular activities for many practical reasons. Children need to be able to participate in all facets of our program to attend.

I gave my child acetaminophen/ibuprofen and now the fever is gone. Why can't she come to the center? High fever (102°F or more) is an indicator your child is fighting an infection. Reducing the fever may make your child more comfortable, but it may mask other important symptoms and won't eliminate contagiousness.

My child is teething, not sick. Regardless of fever, if your child is extremely irritable, we cannot provide quality care for her or the other children. Although doctors disagree about fever associated with teething, most agree that it should only cause a slightly elevated temperature, not more than 1-2 degrees above normal.

If my child isn't contagious, why can't she return to care? Coming to the center is like coming to a party – children whose symptoms may seem manageable at home can easily be overwhelmed in a group. We have to meet the needs of all the children in the program.

Why do I have to wait 24 hours after my child starts an antibiotic before he can return to the center? It takes about 24 hours for an antibiotic to take affect. Also, any allergic reaction is most likely to appear during this window.

My doctor says my child can return to care. Why isn't her assurance sufficient? Our policies were developed based on experts in the medical *and* early childhood fields. Doctors are not always familiar with our constraints, and may vary widely in their advice. This is why we have developed a comprehensive list of our own parameters. Check with a staff member for specifics on the illness in question.