# **STAFFING**

- Selected staff should be on nappy changing daily.
- Different staff should be on food preparation.
- Separate staff should look after under 2 year olds, and over 2 year olds.

# LAYOUT OF CHILDHOOD CENTRE

- Nappy changing areas need a sink and toilet close by.
- Nappy buckets and disposal bins need to be below or beside (not above) the changing area, inaccessible for children, and with a secure lid.
- Toilet facilities need to be ventilated and have a hand basin and one door between the toilet and food preparation areas. Separate sinks are required for handwashing, laundry, cleaning and disposal of dirty water, art materials preparation, food preparation, washing down soiled children.

## SICKNESS POLICY

This should be documented and displayed for all to see.

- Any child with vomiting and/or 3 or more bouts of diarrhoea in a 24-hour period should stay at home until symptoms have settled for 48 hours.
- Any child with a rash or sticky eye should be excluded for a period as stated after consultation with a general practitioner (GP) or Public Health.
- Any child with a fever should be excluded until the fever has subsided and the child is no longer on medication for the fever.
- Runny noses should be wiped with a tissue which should be disposed of immediately and child care staff should wash their hands or use an alcohol-based sanitiser.
- Sick staff should also be off work until they are asymptomatic for 48 hours.
- Staff and children should be up to date with immunisations for all childhood illnesses before working in or attending the centre, although children cannot be excluded. An up to date immunisation register is required to be kept by the Centre.
- Staff boosters for pertussis (whooping cough) every
   10 years and annual flu shots are recommended.

# CHLORINE DISINFECTANTS

Household bleaches are cheap and easy disinfectants. They should be used in the nappy changing area, toilets and sinks. They should be made up fresh each day, with a dilution of one-part bleach to ten parts water. They should be disposed of at the end of the day when cleaning has been completed or sooner if heavily contaminated with dirt. Further information found at:

www.cph.co.nz - Order resources Medical see MED0058

Made up chlorine solutions are best kept in a spray bottle. Clean this container daily as many dirty hands touch it.

# **OUTDOOR PLAY EQUIPMENT**

- Use animal proof covers overnight on sandpits
- Water Play empty troughs and containers daily

# **CAN YOU HELP?**

Early Childhood Centres are high risk areas for infectious diseases and every effort should be made to reduce the risk of cross infection.

Sometimes you, as a parent, staff member, supervisor or owner, can see areas in your centre that need improving. It's up to you to point these out.

## CONTACT FOR QUERIES

Contact your local office of the National Public Health Service if you have any queries pertaining to Early Childhood Centres.

Te Mana Ora | Community and Public Health
PO Box 1475, Christchurch, Phone (03) 378 6721
PO Box 443, Greymouth, Phone (03) 768 1160
PO Box 510, Timaru, Phone (03) 687 2600

Authorised by Resource Approval Panel CHH0014 February 2024

# Keeping healthy in

# EARLY CHILDHOOD CENTRES

# A RESOURCE FOR STAFF AND PARENTS OF EARLY CHILDHOOD CENTRES



Front image sourced from "Tamariki from Kidsfirst Kindergarten Hoon Hay

Health New Zealand
Te Whatu Ora

Early Childhood Centres are used more frequently today both in New Zealand and overseas as more parents or caregivers enter the workforce.

As the numbers increase, the rate of infectious diseases occurring in early childhood centres has increased – affecting children, their families and child care staff.

Compared with children cared for at home, children attending centres are reported to have:

- Twice the rate of:
  - Diarrhoea/vomiting
  - Chest infections
  - Ear infections (otitis media)
- Four times the rate of:
  - Croup
  - Conjunctivitis (sticky eyes)

Centres with children under 2 years have the highest rate of diarrhoea. Faecal contamination (bacteria from bowel motions) is commonly found on moist surfaces (taps, sinks) in nappy changing areas, toilet and laundry areas and on hands. Dry surfaces are less likely to be contaminated.

# **HOW DO WE STOP DISEASE SPREADING?**

# **HANDWASHING**

Handwashing is the most important method to prevent chest and stomach infections. Both adults and children must wash their hands (or have them washed) frequently. Children need encouragement to take the time to soap hands, rinse and dry them properly. Supervision of toileting and handwashing is important to set good habits.

## Wash hands after:

- Going to the toilet
- Nappy changing
- Blowing or wiping noses and mouths
- Touching animals
- Cleaning

# Wash hands before:

- Preparing food
- Eating

Don't forget to wipe babies' hands as they put them in their mouths frequently.

Staff, visitors, and parents should have separate toilets and handwashing facilities.

## SOAP

Liquid soap is best and easiest to use to prevent contamination. If cakes of soap are used, they need to be small, changed at the end of each day and kept in the draining rack (not in puddles of water or on the floor).

# HAND DRYING

Disposable paper towels are recommended. 'Once only' small cloth hand towels can be used but need laundering after one use.

## **NAPPY CHANGING**

- Hands should be washed both before and after nappy changing.
- Disposable nappies or a nappy laundry service should be used as this reduces the handling of dirty nappies in the centre.
- Reusable cloth nappies should be double bagged to avoid leakages and placed appropriately for the caregiver to take home. Bowel motions should be placed into the toilet. Nappy liners are advisable.
- Nappy liners should not be flushed, but solids removed or wrapped in a paper towel and disposed of with disposable nappies.
- Disposable paper towels should be placed on top of the changing pad, during changing and used afterwards to wrap a disposable nappy.
- Nappy pads should be wiped down after each child with hot soapy water and alcohol wipes, or a chlorine bleach solution diluted one in ten with water. After each round of nappy change a chlorine bleach solution should be used to wipe down the change mat. The surface should be allowed to dry before the next nappy change.
- Overpants and clothes should be placed over nappies. This stops leakage and contamination of surfaces.

# **GLOVES**

- Hands must be washed before and after wearing gloves and the gloves must be disposed of and never washed and reused.
- Disposable latex gloves can be worn for nappy changing, but often create a false sense of cleanliness.
   They are useful in blood spills and dealing with faecal soiling of clothes or nappies.

# **CLEANING**

- Toys and materials that children handle or put in their mouths should be cleaned at the end of each day with hot soapy water or put in the washing machine or dishwasher depending on the toy.
- Toilets, sinks and taps should be cleaned twice a day with chlorine solutions and dried with a paper towel.
- Fresh clean cloths should be used each day and put in the washing machine at the end of cleaning.
- Different coloured cloths should be used to clean each area such as toilets, sinks, food areas, play areas.
   Food areas should be cleaned first before play areas and toilet and sink areas last.
- Mops should be washed when cleaning is completed, have boiling water poured over them and then dried, preferably in the sun.
- A different mop should be used in the toilet area from the kitchen/activity areas.
- Mops should never be left in buckets of water or disinfectant as these are breeding grounds for bacteria.
- Cleaners should wash their hands after cleaning.
- A cleaning schedule should be kept to document cleaning routines and incorporated into the job description.
- Increased cleaning is needed during an outbreak and a commercial deep clean of the centre maybe required.
- A book should be kept for communicating requests to cleaners if working after hours.