



Volume 6 Issue 2

Health and Safety Information for Child Care Providers

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Child Care Health Outreach Program

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Hand Foot and Mouth Disease Outbreaks

[Hand Foot and Mouth Disease](#) (HFMD) is a common viral infection that is most frequently seen in the summer and fall. Symptoms of the illness include a low fever, reduced appetite, and sore throat followed by sores in the mouth, palms of the hands, soles of the feet, and sometimes the buttocks. Because it tends to be a mild illness, many children are well enough to attend child care. All the while, they may be shedding the virus from the blisters, in their stool, and in their saliva and respiratory secretions for several weeks. Often, this illness will spread throughout a classroom infecting the majority of the children. It is very hard to control, especially in groups of children younger than 5 who cough and sneeze on each other and are learning to potty train. Fortunately, the illness resolves in about a week. There are several viruses that cause HFMD, including coxsackie A16 and enterovirus 71, and children will become immune to the virus that infected them.



Child care providers wonder if keeping sick children home can reduce the spread. The American Academy of Pediatrics says that, **if** children feel well enough to participate and **don't** have a fever or excessive drooling, keeping them home won't really help much to keep the illness controlled. Some children can spread the virus in their stool for weeks to months! Also, children and adults can spread the virus and not look sick at all. This is why washing hands and covering our coughs is important all the time! Here are some things that will help keep children healthy when the germ comes around...



- wash hands properly and often
- avoid touching eyes, nose, and mouth with unwashed hands
- frequently sanitize toys and high-touch surfaces to kill the virus
- avoid close contact with blisters and mouthed toys

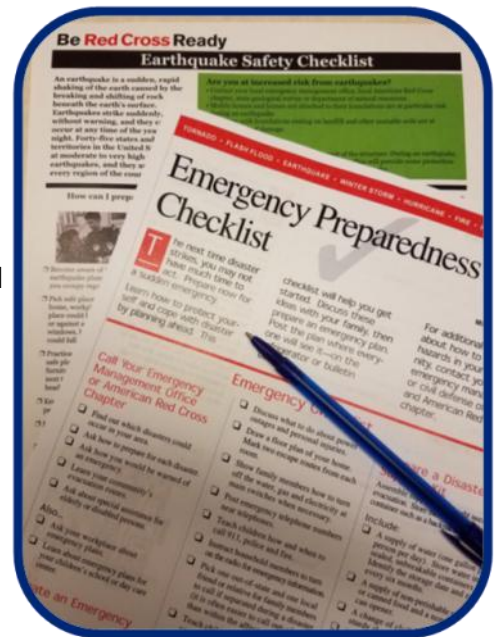
Press **PLAY** to hear a 4 minute podcast created by the National Center for Immunization and Respiratory Diseases at the Centers for Disease Control (CDC)

Reference: [Centers for Disease Control and Prevention](http://www.cdc.gov)

If Disaster Strikes ... Are You Prepared?

Disasters, natural or otherwise, can strike any time and any place. Some people never consider preparing for the possibility of a disaster until it happens. In order to be ready for a disaster, make sure you have done the following:

- **Put together a written disaster plan.** For a model disaster plan for child cares, please visit Snohomish Health District's website (www.snohd.org). Review and make changes to your plan annually.
- **Gather emergency supplies.** In a severe disaster, people will be expected to provide for their own survival needs for 72 hours or more. Make sure that you have supplies, including food and water, for yourself, your staff, and the children in your care. Supplies need to be stored in a location where they will be accessible in the event of an emergency. It is a good idea to have a few essential supplies in a backpack or duffel bag near the door in case you need to evacuate.
- **Have an out-of-area contact.** Choose an out-of-area contact that is at least 100 miles away from your child care. Give the phone number to all of your child care families. Use this number in a large disaster to communicate important information to families, such as your location and status. Get out-of-area contacts for each family as well.
- **Practice disaster drills with the staff and children.** Conduct drills for a variety of different disasters, including earthquakes and lockdowns. The more you practice, the more automatic your actions will be during a real disaster. For earthquakes, teach children to drop, cover, and hold on. Identify locations in each room and know what to do if you are outside.
- **Locate all utility shut off valves.** Make sure several staff or neighbors know where they are as well. You may need their help.
- **Prepare your environment.** Attach furniture, water heaters, and pictures to the wall securely. Store heavy items lower to the ground. Secure electronics. Make sure that exits are unobstructed.
- **Have a reunification plan.** Have a plan in place for reuniting families away from the main child care space.
- **Make sure staff families and your own families are prepared.** If a disaster occurs during child care hours, children will need the care and attention of staff members. It is important to know that your own family is ready.



Resources

There are many local and national agencies which have resources available for child care providers and families.

- Ready.gov website from the Department of Homeland Security - www.ready.gov
- Snohomish County Department of Emergency Management - snohomishcountywa.gov/180/Emergency-Management
- Child Care Emergency Preparedness Toolbox - www.gsa.gov/graphics/pbs/Child_Care_Emergency_Preparedness_Toolbox.pdf
- Seattle-King County Public Health - www.kingcounty.gov/depts/health/emergency-preparedness
- American Academy of Pediatrics Disaster Resources for Child Care Providers - www.aap.org
- Snohomish Health District Child Care Health Outreach Program - www.snohd.org
- Red Cross - www.redcross.org
- FEMA "Multihazard Planning for Child Care" (free 2 hour online course) - training.fema.gov
- OSPI School Preparedness - www.k12.wa.us/SafetyCenter/Emergency
- Office of Human Services - <http://www.acf.hhs.gov/ohsepr/information-for-providers>
- CDC Caring for Children in a Disaster - www.cdc.gov/childrenindisasters/schools.html



Child Development: Is this Normal?

The Centers for Disease Control and Prevention (CDC) estimates that 1 in 6 children aged 3 - 17 has a developmental disability, but many of these children are not identified until they are school aged. Early identification and intervention is crucial to help each child build new skills and reduce the need for costly interventions in the future.

As an early care and education provider, you are in a great position to identify children who might be having trouble reaching their developmental milestones. By communicating your concerns to parents, you can help a child get the attention they need and improve his chances for success in life.



To help you “**Learn the Signs and Act Early**,” the CDC has created a new website:

[Milestones in Action](https://www.cdc.gov/ncbddd/actearly/) (<https://www.cdc.gov/ncbddd/actearly/>)

This website provides FREE access to :

- Training Materials
- Photos
- Checklists
- Videos
- Resources
- Screening Tools
- Ages & Stages Questionnaires ®



See pictures of different developmental milestones

Take CDC's FREE CEU training

[Watch Me! Celebrating Milestones and Sharing Concerns](#)

Refer parents

[Early Support for Infants and Toddlers \(ESIT\)](#)

1-800-322-2588



Watch videos on the different stages
Sample 18 month old video: [May Have Tantrums](#)

The Sugar Season

The changing of the seasons bring a number of holidays that give us reason to celebrate. Unfortunately that can mean a lot of extra sugar in the home and child care. All those sugary celebrations add up!

Sugar is Addictive

Sugar is a highly addictive substance. Children can develop cravings for sugar at a very early age. Too much sugar is the number one cause of tooth decay and can contribute to the development of Type 2 diabetes and obesity. Diets high in sugar are associated with skin problems, sleep disorders, and the development of some cancers.

Sugar Affects a Child's Behavior

Extra sugar in the child care or classroom can also cause behavior difficulties. While some children may not seem affected by sugar, others may experience hyperactivity and or sluggishness. Some children also have a difficult time with learning and concentration when their blood sugar levels rise. This is called sugar sensitivity. Sugar sensitivity is much more severe in children than adults and can decrease enjoyment and learning in your child care or classroom when too many sugary snacks and beverages are served.

Hidden Sugar

Common sources of excess sugar include baked goods, candy, ice cream, flavored yogurt, and most cereals. Don't forget to count drinks too! Sweetened beverages like soda and fruit drinks have been cited by the CDC as a top contributor to childhood obesity. Many juices also have as much, or more, sugar than soda. A single soda or one 12 ounce serving of juice has an average of 10 teaspoons of added sugar. The American Heart Association recommends that preschoolers and young children consume no more than 3 to 4 teaspoons of added sugar per day.

Celebrating without the Sugar

This holiday season look for other ways to celebrate than by indulging in junk food. You will be teaching children a healthy habit that can last a lifetime.

So kick the excess sugar and try these ideas to celebrate during child care hours instead:

- Holiday art party
- Holiday games or puzzles
- Dancing
- Hoola hoop, scarf play, or jump rope party
- Music time
- Seasonal field trip
- Holiday themed show-and-tell
- Have a pajama day or stage a "read in"

Natural Sources of Sugar

When a sweet tooth simply must be satisfied, encourage children to seek out natural sources of sugar such as fresh or dried fruit and non-flavored, non-sweetened dairy products.

By Carrie Parker, Healthy Communities Specialist





Infant Care Guidance

Handling Teething in Child Care



Teething, also called “cutting teeth,” is a developmental stage in which babies get their first teeth. Teething usually begins between 4 to 7 months. The two bottom front teeth are usually the first to appear and then the two top front teeth. By age 2 children generally have at least 16 teeth. By 3 years of age children will have all 20 baby teeth. These teeth will eventually be replaced with permanent teeth. During teething babies will naturally want to chew or bite. Chewing actually helps the tooth come out.



Most babies teethe without any problems but many may need a little help during this time. It is important for child care providers to recognize when a child is teething, and what to do to alleviate the infant's discomfort in a safe manner.

Common symptoms of a child who may be teething:

- fussiness or crankiness
- drooling
- chewing on hands, clothes, or toys
- biting
- decreased appetite
- red puffy gums
- crying
- rubbing of ears
- *slight* increase in temperature



Drooling

Some infants drool more when they are cutting teeth. The saliva from the drool can cause a rash so it is important to wipe saliva off of the face, chin, neck, and chest area. If drooling is extreme, consider putting a small bib around the baby's neck to keep clothes dry. Once the teeth come in, the drooling should lessen.

How to Alleviate Discomfort from Teething

The recommended intervention for teething discomfort is the use of cold (not frozen) items. The cold temperature acts as an anesthetic for the gums and can help reduce pain. Items must be kept clean and sanitized. They should be big enough that the child cannot choke yet small enough that they can chew on it.

Some recommendations advise to:

- massage or rub gums with washed fingers; child care providers should wear nitrile gloves (not latex).
- offer a clean, cold, damp washcloth or cloth teething ring.
- offer a cold teething ring (*unpainted wood, 100% natural rubber, organic cotton, or medical-grade silicone*).
- offer an approved hard chewing toy made from silicone or latex.
- contact a health care provider if the symptoms worsen.





Infant Care Guidance

Handling Teething in Child Care (continued)



Teething - What NOT To Do

- Do not give benzocaine numbing gels or liquids. They can cause [methemoglobinemia](#), are easy to overdose, and interfere with baby's gag reflex. Click [here](#) for a list of gels to avoid.
- Do not give oral viscous [lidocaine](#) due to risk of harm and even death.
- Do not give herbal or homeopathic medications, tablets or gels. They are not evaluated by the FDA for safety or efficacy and some contain a toxic ingredient called [belladonna](#).
- Do not use frozen foods as they can break off and be a choking hazard.
- Do not freeze teething items. Extreme cold can injure a baby's mouth.
- Never give aspirin or put aspirin on baby's gums. Aspirin may cause Reye's Syndrome in children.
- Avoid infant pain reliever medicine. Use only with pediatricians advice and prescription.
- Avoid teethingers that are:



- made in China** which could contain lead and phthalates that are damaging to body organs.
- made of polyvinyl chloride (PVC)** which is a known human carcinogen and may contain lead.
- made of plastic**, even if they say BPA and phthalate-free; plastic teethingers may still be toxic.
- biscuits**, as they pose a choking hazard because they can snap in half in your baby's mouth.
- rings with liquid or gel inside**. Baby's new teeth may puncture the ring.
- made with small parts** such as beads. This is a choking risk if the parts break off.
- necklaces**, because placing a necklace around a baby's neck poses a strangulation hazard.

Helpful Websites

Caring for Our Children provides national best practice guidance: <http://nrckids.org/CFOC3/index.html> (National Resource Center for Health and Safety in Child Care and Early Education)

References

American Academy of Pediatrics. Teething: 4 to 7 Months. Available at: healthychildren.org

Federal Drug Administration [Do Teething Babies Need Medicine On Their Gums? No](#)

Suggested training for Infant Nurse Consultants:

Online PACT (Protecting All Children's Teeth) Module for CME Credit – American Academy of Pediatrics
<https://www2.aap.org/ORALHEALTH/pact/index-cme.cfm>

Drug Facts (continued)	
Warnings (continued)	
Keep out of reach of children. If more than used for pain is accidentally swallowed, get medical help or contact a Poison Control Center immediately.	
Adverse Reactions: Methemoglobinemia has been reported following the use of benzocaine on extremely rare occasions. Intravenous methylene blue is the specific therapy for this condition.	
Directions	
do not exceed recommended dosage	apply to the affected area.
adults and children	Allow to remain in place at least 1 minute and then spit out.
2 years of age and older	Use up to 4 times daily or as directed by a dentist or doctor.
children under 12 years of age	should be supervised in the use of the product.
children under 2 years of age	consult a dentist or doctor.
Other information	
do not use if imprinted seal under cap is broken or missing.	
store at 20-25 °C (68-77 °F)	

Infant Nurse Consultant Information

Center Directors: Please share pages 5-6 with your infant nurse consultant

Child Care Health Outreach Program Snohomish Health District

Infant Nurse Consultant Partnership Meeting
Monday, November 14, 2016
11:30 am – 1:00 pm

Patty's Eggnest and Turkey House
 303 128th St SW, Everett WA 98204
 (Go west off of the I-5 128th St. exit)





~ Medication Management ~ Training Program

Administering medications is an important responsibility that must be done safely and competently every time. It requires proper training to reduce the risk of making mistakes and causing unintentional injury.

To help child care providers with this responsibility, the Snohomish Health District's Child Care Health Outreach program is offering a Medication Management Training Program.

This program consists of four components:

Medication Management Parts 1, 2, & 3 (distance learning)
Hands-on Skills Assessment Class (October 12th or 14th, 2017)

With the successful completion of the Medication Management training program, participants will receive:

- **8 total STARS credits**
- **a medication training kit and manual**
- **a certificate of completion**

For more information or to register for the program, email:

childcareclassregistration@snohd.org

This series is offered at no cost.

Note: If you have taken Medication Management part 1 and/or part 2 previously, you do not need to re-take those classes.

Save your spot! Space is limited for the October Assessment class.

Guidelines for this medication management training abide by the Department of Early Learning (DEL) Washington Administration Codes (WAC), national best standards for care of children in child care settings, and the Institute for Safe Medication Practices (ISMP).

Due to staffing and time constraints, tests and assignments will be processed for providers who either *live or work in SNOHOMISH COUNTY ONLY*. Thank you for your understanding.



NEW! STARS Training for 2017



2017 STARS Classes

Health and Safety Information for Child Care Providers

Distance Learning Classes

Snohomish Health District provides distance learning classes for Snohomish County child care providers on a variety of disease and illness prevention topics. These STARS-approved classes are being offered at **NO COST** this year. They are designed to take about 2 hours to complete. On the class start date you will receive the curriculum via email. You will have until the end of the month to complete and return the test and evaluation (either via email or US mail). Once the test has been reviewed, you will receive a certificate via email. STARS credit will be entered into MERIT. Further detailed instructions will be provided when you register.

How Do I Register? It's simple! Email your name and the course or courses you wish to take to childcareclassregistration@snohd.org. Can't decide? Register for all of them and decide after you've seen the material!

NOTES: While it is acceptable to repeat classes previously taken, we strongly discourage repeating a class within a 3 year period and encourage taking a wide variety of classes. Due to staffing and time constraints, tests and assignments will be processed for providers who either *live or work* in SNOHOMISH COUNTY ONLY. Thank you for your understanding.

2017 Child Care Health Class Schedule

To register, email childcareclassregistration@snohd.org

Start date	Class Title
Jan 2	Preventing Diseases from Animals in Child Care Settings
Feb 1	Medication Management Part 1
Feb 1	5-2-1-0 Child Care!
Mar 1	Disaster Preparedness for Child Cares
Apr 3	Medication Management Part 2
Apr 3	Bullying Prevention NEW!
May 1	Cleaning and Sanitizing in Child Cares
Jun 1	Medication Management Part 3 NEW!
Jun 1	Healthy Whole Foods on a Budget
Jul 3	Injury Prevention - Toy Safety
Aug 1	Preschool Illness Prevention Basics
Aug 1	Cavity Free Kids
Sep 1	Germbusters - Importance of Handwashing in Child Care
Oct 2	Healthy Hygiene Products in Child Care NEW!
Oct 12 or 14	Medication Skills Assessment Training NEW! ** In-person training
Nov 1	Injury Prevention - Playground Safety NEW!
Nov 1	To be determined
Dec 1	Taking Care of You: Provider Wellness
Dec 1	Teaching Illness Prevention to Children

**** Must have completed Medication Management 1, 2 and 3 to take this class.**



SNOHOMISH
HEALTH DISTRICT
WWW.SNOHD.ORG

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We are available by phone or to visit your child care.

We can help with:

- Reportable Disease Control
- Outbreak Investigation
- Illness Prevention Advice
- Immunization Tracking
- Safe Food Preparation
- Cleaning and Sanitizing
- Child Behavior Issues
- Handwashing Practices
- Disaster Preparedness

.... and much more!

**Child Care Health
Outreach and Healthy
Communities Programs**

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