Discovery Preschool &
Childcare Center, Inc.

Health Policy

Revised 9/21/11
PURPOSE AND USE OF HEALTH POLICY

This health policy is a description of our health and safety practices.

This policy was prepared by Wendy Bond.

Staff will be oriented to our health policy by either Wendy Bond, or a designee, upon hire of new staff and when there are changes for all staff.

Our policy is accessible to staff and parents and is located on the parent bulletin board and a copy in each classroom.
PROCEDURES FOR INJURIES AND MEDICAL EMERGENCIES

1. Child is assessed and appropriate supplies are obtained, and the Director is immediately notified.

2. First Aid is administered. Nonporous gloves are used if blood is present. If the injury/ medical emergency is life-threatening, one staff person stays with the child and administers appropriate first aid, while another staff person calls 911. If only one staff member is present, person assesses for breathing, circulation, administers CPR for 1 minute if necessary, and then calls 911.

3. If further information is needed, staff trained in First Aid refer to the First Aid Guide located in the main Preschool kitchen, by the first aid kit.

4. If the Director is not available to, the staff member shall call the parent/guardian or designated emergency contact if necessary. For major injuries/medical emergencies, a staff person will remain with the injured/ ill child until a parent/guardian or the emergency contact arrives, including during transport to a Hospital.

5. Staff will record the injury/ medical emergency on Accident/ Injury/ Incident Report which is kept in a file in each classroom. The report includes:
   - date, time, place and cause of injury/ medical emergency (if known)
   - treatment provided
   - name(s) of staff present, who provided care and
   - persons contacted

For major injury, such as one needing medical care or that is more severe, a copy is given to the parent/ guardian the same day and a copy is placed in the child’s file. For major injuries, where medical care was needed, the report must be signed by a parent/ guardian before copying, and a copy will be sent to the Licenser no later than the day after the incident.
6. An injury is also recorded on the Injury Log which is located in the Main Kitchen. The entry will include the child’s name, staff involved, and a brief description of the incident. We maintain confidentiality of this log by keeping a cover sheet over the log.

7. The Child Care Licenser is called immediately for serious injuries/incidents which require medical attention. This is done by the Director.
FIRST AID

All staff at Discovery Preschool will have current training in CPR and first aid. Documentation of staff training is kept in personnel files.

First aid kits will be located in both the kitchen areas, with easy access by all staff and classroom. Our first aid kits will contain:

- Band-aids
- Sterile gauze bandages
- Syrup of Ipecac
- First aid tape
- Gloves
- Tweezers for surface splinters only
- Roller bandage
- Small scissors
- Large triangle bandage (sling)
- All other items required by licensing

* Syrup of Ipecac is ONLY administered after calling and being directed by Poison Control 1-800-222-1222.

Medications, medicated wipes, or medical treatments (such as cortisone creams), will not be used on children without a written medication administration permission form.

A portable first aid kit will also be made available for all field trips, and must be taken each time a group is taken on a field trip. Included in this kit will be:

- Liquid soap, paper towels, or baby wipes
- Chemical ice pack
- Cell phone

All first aid kits will be checked each month by the classroom teacher and restocked as needed.
BLOOD/ BODY FLUID CONTACT OR EXPOSURE

Even healthy people can spread infection through direct contact with body fluids. Body fluids include blood, urine, stool (feces), drool (saliva), vomit, drainage from sores or rashes, etc. All body fluids may be infected with contagious disease. Nonporous gloves are always used when blood or wound drainage is present. To limit risk associated with potentially infectious blood/body fluids, the following precautions are always taken:

1. Any open cuts or sores on children and staff are kept covered.

2. Whenever a child or staff comes in contact with any body fluids, the exposed area is washed immediately with soap and warm water, rinsed, and dried with paper towel.

3. All surfaces in contact with body fluids are cleaned immediately with bleach water.

4. Gloves and paper towels or other materials used to clean body fluids are put in a plastic bag, tied closed, and placed in a covered waste container. Equipment used for cleaning body fluids is sanitized.

5. A child’s clothes soiled with any body fluids are put in a closed plastic bag and sent home with the child’s parent/guardian.

6. Hands are always washed with soap and warm water after handling soiled clothing, and after removing gloves.

Blood Contact or Exposure

When a staff person or child comes into contact with blood (e.g., staff provides first aid to a child who is bleeding), or is exposed to blood (e.g., blood from one person enters a cut or mucous membrane of another person), the staff member will complete an incident report and immediately inform the Director.
INJURY PREVENTION

1. Proper supervision is maintained at all times, both indoors and outdoors. Staff will position themselves to observe the entire play area.

2. The site are inspected quarterly for safety hazards by the director. Staff review their rooms and playground daily to remove any broken or damaged equipment.

   *Hazards include, but are not limited to:*
   - Security Issues (unsecured doors, fences, inadequate supervision)
   - General safety hazards (broken toys and equipment, standing water, chokable & sharp objects, etc.)
   - Strangulation hazards
   - Trip/ fall hazards ( rugs, cords, etc.)
   - Poisoning hazards ( plants, chemicals, etc.)
   - Burn hazards ( hot coffee in child accessible area, etc.)
   - Other: ________________________________

3. The playground is inspected daily by the classroom teachers for broken equipment, environmental hazards, garbage, animal contamination, and depth of cushion under and around equipment. It is free from entrapments, entanglements, and protrusions.

4. Toys are age appropriate, safe and in good repair. Broken toys are discarded. Mirrors are shatterproof.

5. Rooms with children under 3 years old are free of chocking hazards, such as hair bands, items other than toys lying on the floor, etc.

6. Cords from mini blinds are inaccessible and out of reach of children.

7. Hazards are reported immediately to the Director. The assigned person will insure that they are removed, made inaccessible, or repaired immediately to prevent injuries.
POLICY AND PROCEDURE FOR EXCLUDING ILL CHILDREN
(Additional information can be found in our Illness Exclusion Policy)

Staff will conduct a health check upon drop off.

Children with any of the following symptoms are not permitted to remain in care:

1. Fever of 100.5°F as read under the arm (auxiliary temp) accompanied by one or more of the following:
   a. Diarrhea or vomiting
   b. earache
   c. headache
   d. signs of irritability, confusion, or lethargy
   e. rash
   f. fatigue that limits participation in daily activities

2. Vomiting: 2 or more occasions within the past 24 hours

3. Diarrhea: 3 or more watery stools within the past 24 hours, or any bloody stool.

4. Rash, especially with fever or itching

5. Eye discharge or conjunctivitis (pink eye) until clear or until on antibiotic treatment for 24 hours.

6. Sick appearance, not feeling well, and/or not able to keep up with the daily activities.

7. Open or oozing sores, unless properly covered and seen by a physician. If needed must be on antibiotic treatment for 24 hours before returning to Discovery.

8. Lice, nits or scabies: Head lice must be treated and no nits or lice present, Scabies until after treatment has begun

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Following exclusion, children can return to Discovery when they no longer have any of the symptoms listed or a physician confirmation.

Children with any of the above symptoms/conditions are separated from the group and cared for in a space away from other children. Parent/guardian or emergency contact is notified to pick up the child.

We notify parents and guardians when their child may have been exposed to a communicable disease or condition (other than the common cold) and provide them with information about the disease or condition. We notify parents and guardians of possible exposure by posted notice on classroom sign in sheets or entry doors. Individual child confidentiality is maintained.

Communicable diseases can spread quickly in childcare settings. Because some of these diseases can be very serious in children, licensed childcare providers in Montana are required to notify Missoula County Health Department when they learn that a child has been diagnosed with certain communicable diseases. A list of these diseases is located in the office and available on request, or obtained by contacting the local Public Health Department.
IMMUNIZATIONS
The State of Montana requires everyone in a Center to be current on immunizations. Complete records are kept on site to protect every child and staff member. A Montana Certificate of Immunization must be completed and either signed by a physician or the Director.

Immunization records are reviewed quarterly and parents and staff are notified when updates are required. Records are reviewed annually by the Montana Public Health Nurse. Staff immunization records are reviewed annually by Health Inspector and Licensing.

A list of required immunizations is posted on the Parent information board, and a copy is available upon request. Montana childcare licensing provides limited immunization exemptions on specific immunizations and forms must be completed, signed, notarized (if needed).

A current list of exempt children is maintained on site.

Children are required to be immunized for the following:

- DTaP (Diphtheria, Tetanus, Pertussis)
- IPV (Polio)
- MMR (Measles, Mumps, Rubella)
- Hepatitis A
- Hepatitis B
- HIB
- Varicella (Chicken Pox)
MEDICATION ADMINISTRATION POLICY

a Medication is accepted only in its original container, labeled with child’s name
a Medication is not accepted if it is expired
a Medication is only given with written consent of the child’s parent/ legal guardian. This consent on the Medication Authorization form includes all of the following to be completed by the parent/guardian:
   a Child’s name, date of birth
   a Name of medication
   a Reason for medication
   a Dosage (must be same as child’s age/weight dosage on container)
   a Method of administration
   a Frequency (can not be given as needed, must specify time now, or symptoms when medication should be given)
   a Duration (stop and start dates)
   a Special storage requirements
   a Possible side effects
   a Any special instructions
a If the child’s is unwilling to accept the medication, refuses, etc. then the staff member will call the parent to come administer the medication.
a Over the counter/ topical medications, both prescribed and non-prescribed, also requires a authorization form for administration.

Parent/ Guardian Consent

1. A parent/ legal guardian must provide the sole consent for the medication, without the consent of a health care provider, if and only when the medication meets the following criteria:
   a The medication is over the counter and is one of the following:
      - Antihistamine
      - Non-aspirin fever/pain reducer, teething tablets/gels
      - Non narcotic cough suppressant
      - Ointment or lotion intended specifically to relieve itching or dry skin
      - Diaper ointment or non-talc powder
      - Sunscreen for children

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The medication has instructions and dosage recommendations for the child’s age and weight.

The medication duration, dosage, amount, and frequency specified on consent do not exceed label recommendations.

2. Written consent for sunscreen is valid for 6 months.

Health Care Provider Consent

1. The written consent of a health care provider with prescriptive authority is required for prescription medications and all over-the-counter medications that do not meet the above criteria (including vitamins, iron, supplements, oral re-hydration solutions, fluoride, herbal remedies, inhalers).

2. Medication is added to a child’s food or liquid only with the written consent of the health care provider.

3. A licensed health care providers consent is accepted in one of three ways:
   a. The provider’s name is on the original pharmacist's label (along with the child’s name, name of medication, dosage, frequency, duration, and expiration date; or
   a. The provider signs a note or prescription that includes the information required on the pharmacists label; or
   a. The provider signs a completed medication administration authorization form.

   Parent/guardian instructions are required to be consistent with any prescription or instructions from the health care provider.

Medication Storage

Medication will be stored where it is inaccessible to children and at the temperature specified on the label.
Staff Administration and Documentation of Medications

1. Medication is administered by Lead Teachers

2. Staff members will be trained as to proper procedures for administering and documenting medication

3. Staff giving medication will document on Medication Administration Log the time, date, and dosage of the medication given. The staff member will sign their initials on the form at the time of administering medication, and full signature once at the bottom of the form.

4. Any observed side effects are documented on the child’s medication authorization form, as well as reported to the parent/guardian on an accident/injury/incident form, or immediately. Notification is documented.

5. If medication is not given, a written explanation is provided on an error/incident form.

6. All information related to medication authorization and documentation is considered confidential and is stored out of general view.

7. Medication authorization forms are kept in a binder or out of general view.
Medication Administration Procedure

The following procedure is followed each time a medication is administered:

1. Wash hands before preparing medications.

2. Carefully read labels on medications and authorization form, noting:
   a. Child's name
   a. Name of the medication
   a. reason for the medication
   a. dosage
   a. method of administration
   a. frequency
   a. duration
   a. possible side effects
   a. special instructions

Information on the label must be consistent with the individual medication form.

3. Prepare medication on a clean surface away from diapering and toileting areas, and away from reach of any children.
   a. Do not add medication to child’s cup or food without written consent from health care provider.
   a. Measured liquid medications must be done by using a medication spoon, syringe, dropper or medicine cup provided by the parent /guardian. Not a table serving spoon.
4. Administer medication

5. Wash hands after administering medications.

6. Observe child for possible side effects and document on medication authorization form and note to parents.

7. We do not use bulk medications such as sunscreen and diaper ointment, and DO NOT administer any medications, including cough drops, without a medication administration authorization form.

Self Administration by Child

Discovery Preschool does not allow self medication for any child. All medications, even cough drops and ointments, must have an authorization form and must be given to staff. All medications must be kept out of reach of children.
HEALTH RECORDS

Each child at Discovery Preschool & Childcare Center, Inc. will have health records on site, and kept confidential. These health records will contain:

- Emergency contact form with health history/Consent to emergency care
- Name and phone number of health care provider
- Immunization record
- Allergy and food intolerance information
- Individual special health care plan for children with special needs, whether medical, physical, developmental or behavioral.

The above information will be updated annually or sooner for any changes.

CHILDREN WITH SPECIAL NEEDS

Our center is committed to meeting the needs of all children. This includes children with special health care needs such as asthma and allergies, as well as children with emotional and behavioral issues or chronic illness or disability. Inclusion of children with special needs enriches the child care experience and all staff, families, and children benefit.

1. Confidentiality is assured with all families and staff in our program.

2. All families will be treated with dignity and with respect for their individual needs and’ or differences.
3. Children with disabilities will be accepted into our program under the guidelines of the ADA.

4. Children with special needs will be given the opportunity to participate in the program to the fullest extent possible. To accomplish this, we may consult with our public health nurse consultant or other agencies/organizations as needed.

5. An individual plan of care is developed for each child with a special health care need. The plan of care includes information and instructions for daily care, potential emergency situations, and care during and after disaster. This plan is reviewed annually or when there are changes made to the plan.

6. All staff will receive general training on working with children with special needs, individual plans, and given updated training on specific special needs that are encountered in the classroom.

7. Teachers, cooks, and other staff will be oriented to any special needs or dietary restrictions by the Director.
HAND WASHING

Soap, warm water, and individual towels are available for staff and children at all hand washing sinks, at all times.

All staff wash hands with soap and water at hand washing not food prep sinks:
(a) Upon arrival at the site and when leaving at the end of the day
(b) Before and after handling foods, cooking activities, eating or serving foods
(c) After toileting self or children
(d) After handling or coming into contact with any body fluids such as saliva, urine, mucus, blood, or vomit
(e) Before and after diaper changing
(f) Before and after administering medications, lotion, etc.
(g) After attending to an ill child, taking temperature, etc.
(h) After smoking
(i) After being outdoors
(j) After feeding, cleaning, or touch pets/animals
(k) Before and after administering first aid

Children are assisted or supervised in hand washing:
(a) Upon arrivals to the Center
(b) Before and after meal, snacks and cooking activities
(c) After toileting and diapering
(d) After coming into contact with body fluids
(e) After outdoor play
(f) After touching animals
(g) Before and after water table play and textural experience play

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Hand washing Procedure

The following hand washing procedure will be followed at Discovery Preschool:

1. Turn on water and adjust temperature.
2. Wet hands and apply a liberal amount of soap.
3. Rub hands in a wringing motion from wrists to fingertips for a period of no less than 10 seconds.
4. Rinse hands thoroughly.
5. Dry hands using an individual paper towel.
6. Use hand drying towel to turn off water faucets and open any door knob/latch before discarding.

Hand washing procedures are posted at each sink used for hand washing.
SOCIAL-EMOTIONAL -DEVELOPMENTAL CARE

A developmentally-appropriate curriculum will be in place in all classrooms, and will follow program goals as set by the Director. We consider the social-emotional needs of every child in each age group. Our parent handbook discusses our discipline practices and plan for helping children with challenging behavior or behavioral difficulties.

DIAPERING

We use disposable diapers at Discovery Preschool, that are provided by the parents.

Children are NEVER left unattended on the diaper-changing table. Safety belts are not used on the diaper-changing table, as they are neither washable nor safe.

The diaper changing table is ONLY used for diapering. Toys, pacifiers, papers, dishes, blankets, nap mats, etc. are not to be placed on diapering surfaces.
The following diapering procedure is posted and followed at our Center:

1. Wash hands
2. Gather necessary materials
3. Put on disposable gloves
4. Place child gently on table and remove diaper. *Do not leave child unattended.*
5. Dispose of wet diaper in covered handsfree container. Dirty diapers are to be wrapped and disposed of in outdoor receptacle after diapering is completed.
6. Clean the child’s diaper area completely from front to back, gently. Use a clean wipe for each stroke.
7. If a signed medication authorization indicates, and ointment has been provided, apply topical cream/ointment/lotion. You may wash your hands with a wipe or change gloves if necessary.
8. Put clean diaper on child, making sure it is secure yet not tight. Dress child.
9. Wash the child’s hands with soap and running water, or a wet wipe for young infants.
10. Place child in a safe place.
11. Clean diaper changing table with bleach water solution. Dispose of soiled diaper if applicable, in outdoor receptacle.
12. Wash hands thoroughly after every diaper change, with soap and running water.

*Please note: Even if gloves are used hand washing MUST still be done.*

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Assisting Children With Toilet Training/ in Need of Help in the Bathroom

1. Wash hands before assisting child
2. Gather necessary materials (pull up, clean clothes, gloves, cleaner and sanitizers, wipes, plastic bag)
3. When developmentally appropriate, pull ups are changed standing up.
5. Remove soiled or wet clothes and place in plastic bag to be sent home.
6. If child has soiled themselves or needs assistance wiping, do so from front to back with a clean tissue or wipe.
7. Removed gloves, and wash hands.
8. Assist child if needed in dressing, place clean pull up or diaper on.
10. Clean area and toilet, if necessary, with bleach water solution.
11. Place child’s soiled clothing outdoors for pickup, in an area away from child’s reach. If wet, place in designated area to take home.
12. Wash hands.
STAFF HEALTH

1. All staff must show documentation of current immunizations, and be up-to-date with all immunizations.

2. Our Center complies with all recommendations from the local health jurisdiction.

3. Staff members who have a communicable disease are expected to remain at home until no longer contagious. Staff are required to follow the same guidelines outlined in EXCLUSION OF ILL CHILDREN in this policy.

4. Staff members are encouraged to consult their health care provider regarding their susceptibility to vaccine-preventable diseases.

5. Staff who are pregnant or considering pregnancy should inform their health care provider that they work with young children. When working in child care settings there is a risk of acquiring infections which can harm a fetus. These infections include Chicken Pox (Varicella), CMV (cytomegalovirus), Fifth Disease, and Rubella (German Measles).
CHILD ABUSE AND NEGLECT

1. Child care workers are state mandated reporters of child abuse and neglect: we immediately report suspected or witnessed child abuse or neglect to the Child Protective Services (CPS).

2. Staff will first report their concerns to the Director, and then contact CPS if suspected or witnessed abuse or neglect is present.

3. The state licenser is notified of any CPS report made.

ANIMALS ON SITE

We have animals on site. Our animal policy is:

1. Animals present at the Center or visiting the Center are carefully chosen regarding the care, temperament, health risks, and appropriateness for young children. We do not have birds or reptiles at Discovery Preschool.

2. Animals at Discovery and visiting animals have current and up to date immunizations.

3. Children and adults wash their hands after feeding animals or touching/handling animals or animal homes or equipment.