# Maintain a clean and hygienic environment

**Overview**

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## Overview
This topic, ‘Maintain a clean and hygienic environment’ will provide you with an awareness of how infection spreads in the child care environment and increase your understanding of your role in reducing germs within the workplace environment and minimising their spread to others.

Ensure cleaning occurs as an ongoing process as per recognised state/territory regulations and requirements.

Cleaning of premises

The levels of health, safety and cleanliness are not just arbitrary standards. ACEQA - the new National body ensures early childhood education and care across Australia is of high quality via a National Quality Framework which consists of:

- A National legislative framework that consists of - the Education & Care Services National Law and the Education & Care Services National Regulations
- A National Quality Standard (NQS) consisting of 7 quality areas
- A National quality rating & assessment process
- A Regulatory Authority in each state and territory which approves and monitors childhood education and care in accordance with the National legislative framework and National quality standards

For more information see: http://www.acecqa.gov.au/

ACECQA regulates the quality of care in 7 different quality areas including health, protective care and safety. For a childcare centre to become accredited it must at meet these standards in all 7 areas. All childcare centres must ‘act to control the spread of infectious diseases’. This includes personal hygiene, cleaning of body fluid spills and routine cleaning of the service.
Cleaning of the service properly, thoroughly and with the proper agents will reduce infection and disease spread. Cleaning needs to be done both routinely to reduce surface germs, accumulated dirt and dust and for particular events. Such events include infection outbreaks in the service or body fluid spills. Body fluids include urine, faeces, nasal secretions, saliva, vomit and blood. Particularly when working with children, body fluids are dealt with regularly and frequently and great care must be taken.

Cleaning seems such a laborious chore. It is, however, in your interest to make sure that any service you work in is clean and germ-free. Trying to maintain high cleanliness standards is not always easy.

Hire a cleaner, I hear you say. That is a great idea if the service can afford it. It allows staff more time to give quality care and less time trying to schedule a cleaning roster into their already busy workload. Cleaners are, hopefully, specially skilled in cleaning childcare centres and can be contracted after hours when the service is empty making cleaning faster and more effective.

However, even with cleaners contracted every evening to do the basic chores, there are many times throughout the day that cleaning must be done by the service staff. Staff must know what to clean and what product to use in order to inform the cleaner. There are also many areas that the cleaner simply will not have time to clean or areas that cannot wait till the cleaner arrives in the evening. You cannot leave a puddle of urine on the bathroom floor at 10am till the cleaners arrive at 6.30pm.

How do you motivate staff to clean well and regularly?

Using a rotating roster system is probably a good plan. This allows for different staff to clean different areas at different times. A roster relieves the tedium of cleaning and shares the less glamorous cleaning chores around. It is neither safe nor effective to clean and look after children at the same time. You will have to schedule cleaning when the children are asleep or at play in another room or area. When cleaning has been completed it is also a good idea, especially in large centres, to sign off that the job has been done just to keep a track of the rota.

What areas require cleaning?

The short answer is everything, however this is not possible every day. The areas you clean very frequently (at least daily) are the areas which harbour the most germs. These include the toilets, the nappy change area, the eating areas, the floors, the kitchen and the frequently used surfaces. Areas which need less frequent cleaning are areas such as shelves and surfaces rarely used, books, toys or outdoor equipment. Particular care must occur when cleaning all areas of high micro-organism activity such as:

- toilets and nappy change areas
- waste bins
- sickbay or first aid areas
where the elderly, very young or immune deficient attend
where any medical procedures occur.

Special cleaning is required when there is a spill of bodily fluids (urine, faeces, vomit, blood or mucous) or an outbreak of an infectious disease. Special precautions should be taken when cleaning or dealing with body fluids and these will be outlined shortly.

Cleaning cloths in some services are colour coded for a particular area. For example a yellow cloth is used in bathrooms and a blue cloth in kitchens. This is to ensure there is no cross contamination from area to area. It would not be pleasant for the bathroom cleaning cloths to be used to wipe down kitchen benches just in case there are residual germs lurking in the cloths.

The cleaning equipment itself requires cleaned after use. When a cloth, mop, brush or bucket has been used it is either disposed of appropriately or washed in detergent and allowed to dry, preferably in sunlight. The cleaning equipment must then be stored safely away from children due to its contact with germs and cleaning agents.

Activity 1

Use appropriate cleaning agents as per recognised state/territory regulations and requirements

Cleaning agents – are they necessary?
Washing germs down the drain is the most effective way to kill germs, as opposed to trying to kill them with chemicals. Ordinary detergents help to loosen the germs so they can be washed away.

Use colour coded sponges in each area; blue for food tables, pink for craft, yellow for bathrooms and keep them separate.

Wash your hands, wear general purpose rubber gloves when cleaning and hang them outside to dry when finished. Wash and dry your hands after removing the gloves.

Basic scrubbing with warm, soapy water is effective for most low germ areas — it will remove all surface germs. Using strong chemical cleaners where it is not necessary is not only expensive but is also harmful to the environment. Where possible, use warm soapy water. It is also important not to use buckets of warm soapy water to clean, as wiping a surface with
germs and returning a cloth to a bucket will enable the germs to survive on the cloth area. Instead, wash down with detergent and water and dry using paper towels.

**Activity 2**

In the event that there is an outbreak of infection, then more thorough cleaning can be undertaken.

**Disinfection**

Disinfectants are not usually necessary (NHMRC Staying healthy in childcare 4th ed). Most germs do not survive long on a clean surface when exposed to air and light. Even in hospitals, the emphasis is on the use of detergent and effective cleaning and drying procedures rather than disinfectants.

In an outbreak situation, public health units may specify the use of a particular disinfectant. In this situation, for the disinfectant to work properly, there still needs to be thorough cleaning using a detergent beforehand.

To kill germs any disinfectant needs:

- A clean surface to get to the germ.
- To be able to act against those particular germ
- To be the right concentration
- Enough time to kill the germs. This is at least 10 minutes.

Remember always keep cleaning agents in an adult height locked cupboard and do not use cleaning products when children are present.

**Sterilisation**

Do not confuse the term disinfection with sterilisation. Sterilisation is the process to remove all living organisms rendering it sterile. It is only necessary for instruments or equipment that enter the human tissues and for small babies’ feeding equipment. Again the object requires washing with hot soapy water before it is sterilised, or in the case of newborn equipment such as bottles, dummies and feeding equipment, a steam steriliser or placing in boiling water for at least 5 minutes.

Each centre uses its own particular cleaning products. You will see many cleaning agents designed for cleaning floors, toys, hands and clothes. When you use a new cleaning product it is extremely important to read the label and follow the manufacturer’s guidelines on the container. Also if you are cleaning, using any chemical agent, wear gloves to prevent any
reaction with your skin. It is important to know what product is used in what situation. You must also know the precautions to be taken when using each product and who to contact and what to do in the event of a spill, splash or poisoning.

POISONS INFORMATION HELP LINE 13 11 26

Procedure for cleaning any body fluid spill

Body fluids, as mentioned previously, have the potential to contain many harmful bacteria and virus so it is essential that body fluids are cleaned and disposed of carefully.

- Before touching any such spills you must put on a pair of disposable gloves.
- Exclude the area where the spill occurs from all children.
- Place paper towel over the spill.
- Danger signs or barriers will ensure there are no further contaminants and that no one slips on the wet floor.
- Carefully remove the paper towel and content, placing in a plastic bag. Remove gloves and also put into the bag.
- Seal the bag and put in an appropriate bin.
- Place fresh gloves on hands.
- The area is then washed with warm soapy water. Applying disinfectant directly to a body fluid spill is ineffective and counterproductive, always wash first.
- All non-disposable items including cleaning cloths or buckets are to be also washed.
- If any clothes, either staff or child’s, are soiled by such fluids then they must be rinsed in cold water and washed separately in a very hot wash and dried either in a hot dryer or in the sun. The heat from the dryer or the sun’s UV rays will also help to kill germs.

Wash linen and clothes in hot soapy water and dry in the sun

Chemical hazards

There are many potential hazards for children and staff in childcare services that can be minimised by safe storage. The most obvious items that require special and childproof storage facilities are household chemicals. However, other items such as medications, first aid kits and gardening equipment all need to be stored safely or in a way that prevents ready access by children.
Cleaning chemicals

Childcare services often have their cleaning chemicals supplied in bulk which can complicate storage issues. Workers need to ensure that such large amounts of chemicals are kept in a locked cupboard or a storage space in an area ‘off limits’ to children and well away from food preparation areas. There are regulations under the Dangerous Goods Safety Act 2004 covering safe storage and handling of chemicals classed as ‘dangerous goods’.

Not all cleaning chemicals are classed as dangerous goods so check for a diamond shaped sign, usually with a single word warning such as ‘TOXIC’. Many cleaning chemicals are simply classed as ‘hazardous’ which is denoted by the word ‘HAZARDOUS’ usually appearing in large, block form, red letters on the label.

Buying in bulk also means that the chemicals need to be decanted, and sometimes diluted. The possibility of accidental spillage, misuse or poisoning increases when chemicals are not kept in the original, fully labelled container.

When chemicals need to be decanted and mixed into smaller, household sized containers for easy access by staff, you need to ensure that:

- You wear gloves and if necessary, a face mask to protect yourself.
- The smaller container is clearly labelled and the label is renewed as it wears or washes away. Mark with the product’s name and label as ‘hazardous’ or ‘dangerous’ as per the original container.
- The smaller containers of chemicals are also kept out of reach of children – an adult height (1.5 metres) locked or childproof cupboard is best. Putting them in high places is not enough.
- You avoid using spray bottles which atomise the chemical and make inhalation a risk for children and staff. A squeeze bottle can be just as effective for most cleaning jobs.

Before using any chemical you should:

- Read the label
- Read the ‘Material Safety Data Sheet’ (MSDS) which must be supplied with any chemical classed as ‘hazardous’ and displayed where such chemicals are frequently used and stored.

For more information about material safety data sheets, check the following WorkCover NSW website: [www.workcover.nsw.gov.au](http://www.workcover.nsw.gov.au)

or contact the relevant WHS Regulator in your State or Territory.

Cleaning and sustainability in child care services

We are becoming increasingly aware of the health risks posed by exposure to chemical substances to both ourselves and to children.
Chemicals not only cause harm to us though – every cleaning product impacts on the health of the planet as well. We must all work towards sustainable cleaning strategies that minimise the impact on the environment.

Simple strategies such as:

- Eliminating hazardous substances e.g. avoiding the use of aerosols cans and replacing with pour bottles
- Increasing ventilation rather than using chemical deodorisers
- Cleaning with warm soapy water rather than using disinfectants or sanitisers
- Choosing mild plant based and ph neutral detergents
- Using microfibre cloths and mops for general surface cleaning e.g. tables, floors, bench tops. Be aware though, because microfibre cloths trap dirt and germs so effectively they are not recommended for use in nappy change areas.
- Measure dishwashing and laundry detergents carefully – don’t guess
- Soak dirty surfaces before cleaning to soften and lift dirt, making your job easier.
- Using more ‘natural’ surface cleaning agents such as bi carbonate of soda (mixed with water to form a paste this is an effective scourer for cleaning tables after play) and vinegar (diluted in water helps to evaporate moisture quickly from windows and mirrors).

If you are interested in finding out more about safer cleaning practices in child care there are some useful web sites in the additional resource section of this topic.

Follow standard precautions for infection control

What area standard precautions?

Standard precautions are standard, safe work practices that are to be applied to all children and staff regardless of their known or presumed infectious status.

In child care these include:

- Effective hand washing and cleaning practices

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• Use of appropriate personal protective equipment (eg. gloves)
• Immunisation of children and staff

Infection prevention and control

It is the responsibility of all persons who attend the workplace to follow the health and hygiene guidelines to minimise infection to both themselves and to others.

Imagine working in the following workplace:

You arrive at work to find that the person you are working with is lighting up their third cigarette of the morning in the staff room. You head into the playroom and find that the heating system is still broken so you have to leave your jacket on, as it is a cold, July morning. The children who attend the service have been unwell with a flu virus that seems to have spread rapidly to everyone including the staff. You notice that some of the children attending today appear to have some symptoms of the virus. Several staff are ill with the flu including the cleaner and no one has had time to empty the overflowing buckets or vacuum the floor.

Hopefully you will never have to work in conditions like these. Although we cannot completely stop disease and illness arising, we can minimise its spread and ensure the working environment does not contribute to ill health.

A valuable publication which explains about disease spread and how to prevent infectious disease in early childhood services is produced by the Australian Government: National Health and Medical Research Council. It is titled “Staying Healthy in Childcare” – 4th Edition and can be found via the following link:


It is highly recommended that you access this resource for this unit.

PLEASE NOTE: 5th edition of Staying Healthy in early childhood education and care services is currently in draft form and due out in 2012

Disease and germs

Germs are tiny, little microbes, so small you cannot see them. They are all around us, in the air we breathe, the surfaces we touch, the food we eat, the clothes we wear, even on our own bodies. Luckily most will cause us no harm, but some are not so harmless. In the home setting prevention of germ spread is done by hand washing and daily/weekly cleaning.

When working in a childcare setting, prevention of germ spread must be much more fastidious and effective. When did you last see a baby cover his mouth when he coughed or sneezed?
How many children do you know who still wipe their noses on their sleeves and which children wash their hands each time they touch their nose? The reasons for such ease of disease spread particularly amongst children are many.

**Germs**

Germs are micro-organisms, especially ones causing disease. Disease is an unhealthy condition of the body.

It is not possible to remove all germs from the environment but reducing their numbers will significantly reduce illness and disease. However, this is not as easy as it seems. Germs come in many different shapes and sizes and, to make it more difficult, they are invisible.

Germs can be classified simply into three groups:

1. bacteria, such as streptococcus that can cause an infected, sore throat
2. viruses that cause diseases such as common cold or AIDS
3. fungi that give you infections like the itchy and horrible athletes foot (tinea).

Disease is carried in or on:

- body fluids
- skin
- insects

**Body fluids**

Body fluids include urine, faeces, vomit, mucous, saliva, and blood. Mucous and saliva can contain viruses and this is the most common way that disease is spread. A child may cough or sneeze spreading droplets of germs into the air, or may put a toy in his mouth which, may then go in other mouths passing on the germs. Diseases spread this way include measles, croup, flu, and gastroenteritis.

We can’t prevent this, but we should make sure the toys are clean and do not spread infection.

Urine, faeces and vomit can contain a few unsavoury viruses, some of which are particularly dangerous to pregnant women, e.g. CMV (cytomegalovirus). Not wearing gloves or poor hand washing puts you at risk of diseases such as diarrhoea and vomiting.

Blood can contain viruses, for example HIV (AIDS). These viruses are more difficult to transmit unless it is a direct blood-to-blood transfer, such as a bleeding nose of an infected person coming in direct contact with an open cut on a carer’s hand.
**Skin**

Diseases such as scabies, impetigo and chicken pox can be passed on when touching the infected skin.

**Insects**

There are some diseases which are spread by mosquitoes, depending on where you live. An example is Ross River virus. They can be difficult to avoid, insect nets and using natural deterrents will minimise risk.

**Spread of germs**

Think about the last cold or cough you have had. How do you think you caught it?

There are 4 essential steps to the spread of infections. Infection control aimed t breaking the chain of infection. The steps are:

1. The person with the infection spreads the germ into the environment.
2. The germ must survive in the appropriate environment, e.g. air, surfaces, water, on objects, in urine and faeces or in food.
3. Another person then comes in contact with the germ.
4. The person then becomes infected.

When germs are passed on, from one person to another, in the above ways it is termed cross-infection. The infection crosses from one person to another.

There are three ways we can minimise or even stop the process of cross infection.

1. Stop the germs surviving when they are released into the environment.
2. Stop the germs gaining successful entry into your body.
3. Prevent the germs occurring in the first place.

These are the aims of all infection control procedures in the workplace.

**Activity 3**

**Infection control**

To prevent germ spread and to maintain a healthy environment there are six main things that must be done:

1. cleaning
2. teaching
3. exclusion
4. immunisation
5. planning
6. follow policies, regulations and legislation.
Cleaning includes your personal hygiene, the washing of all hands and all the areas, equipment, toys and surfaces in the centre. Cleaning will be dealt with in greater detail later in this topic.

Teaching includes teaching staff, children and parents and providing information, posters and notices to encourage good hygiene practices. Teaching by example is also extremely effective. If you demonstrate exemplary hygiene practices then it is more likely that those you are trying to teach will copy and adopt these practices.

Exclusion means that all staff, clients and visitors with infections must stay away from the service till they are better. Immunisation is an inexpensive and reliable way to prevent some infections. Care needs to be taken to ensure children who are not immunised against particular vaccine preventable diseases are protected.

Planning includes planning a good physical layout of the service. There must be separation of the sections of high contamination such as toilets and nappy change areas. These must be kept away from food preparation areas and sections accessed by small, ill or elderly clients. Planning includes organising the roster to ensuring sufficient staff numbers to maintain good hygiene practices.

Follow regulation and legislation. Government legislation and regulations set out health and hygiene practices which must be observed. Penalties are applied to services that do not meet these requirements.

How a service is organised is very important to maintain a low infection spread.

Adequately maintain ventilation, lighting and heating/cooling

Environmental conditions
The environment in which you work makes a difference to your health and well being. Environmental factors such as heating, cooling and lighting all affect your health, remember the example of the unhealthy work environment at the beginning of the topic.

The heating and cooling in a childcare service must comply to the regulations as set out in the Education & Care Services National Regulations and the WHS regulations. (Reference will be
made to both these government documents throughout this topic. It is helpful to read these regulations either in their printed forms or on the Internet.

Case study

Arechna works in a small centre in an old renovated building. The centre is located in the basement and has only two small windows on to the street. The light in the centre is from fluorescent tubes and they have been flickering all day. The room is warm and it is a warm day, the room smells a little damp when they open up every morning. Quite often at the end of the day Arechna has a headache and her asthma is also a problem some days. There is some outside play space but, quite often, it is not used.

Arechna’s service meets none of the regulations put in place to protect the health of both workers and clients. The heating and cooling services must be safe and effective, the temperature inside adjusted to the weather. The preferable temperature is between 22-25°C. Ventilation is also an important consideration, with a good flow of air through the service reducing the build up of allergens, pollutants, and germs.

Lighting

Good lighting is vital to good health. Both having exposure to natural light and having good quality, artificial lights are very necessary. The centre should use as much natural light as possible using skylights, large windows and outside play time.

Ventilation and heating/cooling

Not only is it extremely unpleasant to work in an overheated, unventilated environment—it is also extremely unhealthy. The heating and cooling services must be both safe and effective, the temperature inside adjusted to the weather. The preferred temperature is between 20–25°C. The sleep area, particularly for babies, needs to be kept at a lower temperature to minimise the risk of SIDS (there is a higher incidence of SIDS in overheated areas). Heaters and cooling systems need to be completely inaccessible to children at all times.

Ventilation is also an important consideration, with a good flow of air through the centre to help reduce the build up of allergens, pollutants, and germs. When opening windows to allow good, fresh air flow, safety precautions must be taken. Safety locks on the windows and safety screens will prevent children finding their way through an open window.
Adhere to personal hygiene/health procedures as per recognised state/territory regulations and requirements

Good personal hygiene is essential if we are to reduce the risk of cross infection between children and adults. Carers who role model effective personal hygiene habits such as effective hand washing, hygienic practices for wiping children’s noses and hygienic food handling practices are helping children to develop hygiene habits that they will continue to use throughout their lives.

Families will be looking at our personal hygiene practices and we should be encouraging families to follow these practices both at the centre and at home with their children.

Our personal hygiene practice will be supported by service policies and procedures which are in turn developed using recommendations from recognised authorities such as the National Health and Medical Research Council (a peak health body in Australia), state health departments and Food Standards Australia and New Zealand.

We should be particularly mindful of:

- Encouraging each other to use through hand washing and drying practices frequently throughout the day
- Encouraging children to follow simple rules of hygiene such as hand washing and basic dental care
- Ensuring equipment and toys are clean and well maintained
- Keeping all areas of the child care centre environment clean
- Using hygienic toileting and nappy changing techniques
- Wiping children’s noses hygienically and cough etiquette (Coughing or sneezing into your elbow or using tissues and then washing hands.
- Displaying clear instructions and reminders about the services hygiene procedures such as hand washing, nappy change procedure etc
- Implementing hygienic food handing preparation and storage
- Providing information for families on the services hygiene procedures and immunisation schedules for children
- Developing clear procedures for handling and disposing of body fluids such as blood
- Excluding unwell children and staff from the service
- Encouraging families to keep unwell children at home

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Handwashing

HOW TO WASH HANDS

• Use liquid soap and running water
• Wash your hands thoroughly while counting slowly from 1 to 10
• Rinse your hands while slowly counting from 1 to 10
• Turn off the tap with paper towel
• Dry hands well with new paper towel

WHEN TO WASH HANDS

• On arrival (this reduces new germs being introduced to the centre)
• Before handling food, including a baby’s bottle
• Before eating
• Before and after changing a nappy
• After removing gloves
• After going to the toilet
• After cleaning up blood, faeces or vomit
• After wiping a nose
• Before giving medication
• After handling garbage
• After playing outside
• Before going home (this prevents taking germs home)

WASHING AND RINSING YOUR HANDS SHOULD TAKE ABOUT AS LONG AS SINGING ‘HAPPY BIRTHDAY’ TWICE.
Effective hand washing technique

I’m sure you are thinking “but I already know how to wash my hands”, however after you have read through the following procedure I’m sure you’ll agree that the effective hand washing technique is not what you or I normally use at home.

Hand washing is the single most effective procedure for preventing the transmission of infection. It is important both how and when we wash our hands.

Use the following method to make sure your hands and the children’s hands are as germfree as possible.

The process of thoroughly washing and rinsing your hands should take 10 – 15 seconds. This can be achieved by slowly counting to 10 when you wash and then slowly counting to 10 when you rinse.

When to wash the children’s hands

- When they arrive at the centre. This reduces the introduction of germs. Parents can help with this;
- Before and after eating and handling food;
- After having their nappy changed. Their hands will become contaminated while they are on the change mat;
- After going to the toilet;
- After coming in from outside play;
- After touching nose secretions;
- After coming in contact with blood, faeces or vomit;
- Before joining the mixed age group (if applicable); and
- Before going home. This prevents taking germs home. Parents can help with this.

Activity 4

Activity 5

Activity 6

Activity 7
Promoting children’s personal hygiene

As well as being a positive role model for effective personal hygiene practices, it is important that we encourage children’s hygiene in other ways.

Some strategies include:

- Ensuring the equipment and environment is appropriate
- Provide gentle reminders and encouragement
- Talk about the importance of hygiene
- Sing songs, read books or recite poems
- Using clear colourful posters to promote hygiene messages
- Use positive language

You might like to use the following song with children to promote hand washing.

"Hand washing Song" (sung to the tune of "Row, Row, Row Your Boat")

Wash, wash, wash your hands,
Wash the germs away.
Soap and water does the trick,
To keep them clean today.

Queensland Health’s Germ Busters Early Childhood Program, has many more fun and positive ideas to promote children’s personal hygiene practices. See the additional resources section at the end of this topic if you would like to learn more about the Germ Busters Program.

Ensure beds and bedding conform to health, hygiene and safety requirements as relevant

In order to provide for children’s emotional and physical wellbeing it is essential that their sleep and rest requirements are met in a safe and hygienic environment.
Cots and beds

It is time for a child to move out of a cot when they attempt to climb out of it. It is better to fall from a low bed on to the floor than to fall from cot height. For older children in the child care environment, various types of portable and stackable stretchers and floor mattresses are usually used for rest or sleep. Mattresses or stretchers often need to be shared among children who attend on a part time basis, but not at the same time. A system for identifying mattress or stretchers needs to be in place. Apart from providing fresh linen for each child, the actual stretchers, mats and other types of bedding also need to be disinfected and aired on a regular basis—and always before they are used by another child.

There are hazards and injuries that happen even in bed. Cots and beds should meet the Australian Safety Standard (AS/NZS 2172:2003). All furniture and hardware that is bought for children should also meet this standard.

You should consider the following safety features when looking at cots:

1. Cots should be safe, sturdy with secure childproof side drop locks.
2. The mattress should be firm and a close fit to the base.
3. The mattress should have a firm fitting protective covering, not a loose protector added.
4. There should be no sharp parts, splinter free, no stickers or transfers—these can be removed and become a choking hazard.
5. There should not be any protruding parts that clothing can catch on.
6. Bars with spaces between 50–85mm and no horizontal bars (except base and top bar) that can be used as steps.
7. No spaces between 5–12mm where fingers could be trapped.
8. More than 500mm from mattress to top of cot.
9. Avoid cot and crib toys that can be used to assist a child to climb out or that have small, easily removed parts.

Bed linen

Excellent hygiene practices are essential with bed linen as this can be a source of cross-infection particularly if appropriate cleaning procedures are not in place. As suggested by the Education and Care Services National Regulations 2011, children should not share bed linen. It is best if they have their own bed linen. This may be provided by the centre or by the parents depending on the centre’s policy. Once allocated, sets of bed linen need to be stored individually in a way that prevents possible cross infection, or to be washed before being used by another child.
Children should have their own bed linen

Sleeping areas

The temperature of the sleep area is also a factor in sleep safety. One of the risk factors for SIDS is from overheating. Sleep areas should be kept comfortable, temperature between 20 – 25 degrees and well ventilated. Think about how hard you find it to sleep on a hot, sticky night. The Education and Care Services Regulation also states that centres providing care for children under the age of 2 years must have a separate room or area which is only used for sleeping. This is best because the temperature is easier to regulate, it is quieter and the little ones are safe from older, interested children—a tiny sleeping baby is fascinating to a two-year-old! Good viewing windows and baby monitors are great tools for sleep supervision but the best practice is safety checks.

Safety checks on sleeping infants should be made every 10 minutes.

Sleep safe measures must also be taken to reduce the risk of suffocation or strangulation:

- No cot bumpers or large fluffy toys.
- No dummies safety-pinned on strings to the baby’s clothes at any time.
- No ribbons or chains.
- Mattresses must fit to the edge of the cot with no gap.
- Light, loose blankets.

Please note: We will be discussing SIDS in detail next. This topic is a sensitive one and may cause distress to some students. If you find reading about this topic uncomfortable, please contact your teacher/counselling unit.

Sudden Infant Death Syndrome (SIDS)

Please note: This topic is a sensitive one and may cause distress to some students. If you find reading about this topic uncomfortable, please do not proceed. Contact your teacher/counselling unit.
**Risk factors and SIDS**

SIDS can happen to both sexes, across all cultures and economic situations, at any sleep time, day or night. The reasons for cot death are unknown. However, there are some babies at higher risk than others.

Those risk factors are:

- mothers who have smoked during pregnancy
- smoking in and around the baby
- premature or low weight babies
- overheated babies
- babies with colds and coughs
- babies less than six months.

Although the cause of SIDS is still unknown, world-wide research indicates that you can lower the risk of SIDS occurring by the following precautions. You must follow these precautions when putting a baby down for sleep in all childcare services:

- Put babies to sleep on their backs only.
- Have their feet touching the bottom of the cot.
- Dress them lightly and use light, layered covers.
- Ensure the room is well ventilated and at a comfortable temperature.
- Check babies every 10 minutes when they are asleep.

**Ensure food preparation, handling, storage and serving areas comply with recognised state/territory food safety and handling requirements**

The areas and equipment used for food preparation, handling, storage and serving are exposed to micro-organism growth and may harbour bacteria which is capable of causing food related infection, illness and disease.

Children are particularly vulnerable to food illness and so child care services must take precautions to guard against this occurring. Service policies and procedures with relation to food handling and storage must be developed to meet the guidelines of state and territory legislation.
The Education and Care Services National Regulations 2011 and the Food Standards Code are two pieces of legislation that helps to regulate food safety in the child care service.

It is recommended that Early Education and Care services have the following:

1. The premises of a children’s service must have a designated area that is both safe and hygienic, for food preparation and storage.

2. Facilities in the designated area must include a stove or microwave, sink, refrigerator, suitable disposal facilities and hot water supply.

3. Facilities for the preparation and storage of food must be designed, located and maintained so as to prevent children from gaining access to any harmful substance, equipment or amenity.

4. If the premises of a centre based or mobile children’s service contains a separate kitchen, the kitchen must have a door, half-gate or other barrier to prevent unsupervised entry by children into the kitchen.

5. In addition to a food preparation area, a centre based children’s service must also have a designated area that is both safe and hygienic, for the preparation of bottles for children under the age of 2 years.

6. Any area in which bottles are prepared for children under the age of 2 years, whether in a centre based children’s service or any other children’s service, must be separate from any area in which nappy-changing facilities are provided.

7. A mobile children’s service may provide food preparation and storage facilities through another facility, service or regular arrangement if food preparation and storage facilities are not available on the premises used by the mobile children’s service.

Food Standards Code

There is a standard which requires childcare centres that process food for more than six (6) children aged four (4) years or less to implement a food safety program. This is Standard 3.3.1 Food Safety Programs for Food Service to Vulnerable Populations, and it is part of the Food Standards Code. It was gazetted by Food Standards Australia New Zealand (FSANZ) in October 2006.

(The Food Standards Code can be viewed at http://www.foodstandards.gov.au/foodstandards/foodstandardscode.cfm

According to 3.2.1 Food Safety Programs, chapter 3 of the Australian New Zealand Food Standards Code 2007, ‘businesses that prepare food for service to vulnerable persons [must] implement a food safety program in accordance with Standard 3.2.1. This will normally include food businesses providing food to... children in child care centres’. For full details see: http://www.foodstandards.gov.au/_srcfiles/Guide%20321%20FoodSafetyPrograms-WEB.pdf

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Key provisions of the Food standards include procedures such as:

- Staff being required to wear gloves for any food handling
- Washing all food utensils in hot soapy water after use
- Clear labelling all food items and containers and left over food items
- Disposing of food past its use by dates
- Using separate chopping boards and utensils for different types of foods i.e. cooked and uncooked, vegetables, meat, fish etc
- Safe food storage temperatures
- Raw meat being stored on the lowest shelf of fridge

Food safety is a serious business. The effects of unsafe food practices can be disastrous – the results can involve illness and even death. Children are particularly vulnerable.

**Activity 8**

Access the NSW Food Authority fact sheet by searching the following: *Food Safety tips for childcare centres from the following link:*


Answer the following questions;

1. Why do child care centres need to take particular care with foods containing raw or lightly cooked egg?
2. You have decided to make pikelets with the children tomorrow – what are some particular food safety strategies you should be mindful of?
3. Why is honey unsafe for children under one year of age?

Your response

Feedback

1. Child care centres and preschools need to take extra care with any food containing raw or lightly cooked egg. If eggs are not handled correctly, Salmonella can grow, causing sickness.
2. Cooking eggs thoroughly (so the yolk is not runny) kills any Salmonella that may be present.
When making pikelets or other batters with egg:

- wash and dry hands before and after cooking
- make sure pikelets are cooked all the way through the middle (tip: make the pikelet consistency runnier with more milk)
- wait until the pikelet surface has bubbled before turning over
- cook other side until golden brown
- don’t let children lick the bowl or utensils
- Refrigerate any pikelets that are not used immediately

3. Honey is not safe for children under one. If an infant consumes honey, it can lead to infant botulism. Botulism is where Clostridium botulinum bacteria releases toxins into the body, causing weakness and paralysis.

If an adult eats honey containing botulinum spores, defence systems in the intestine stop the spores growing. However, for young children their digestive system isn’t protective enough to stop growing bacteria and producing toxins. Honey is safe for children over one.

Summary

- Effective cleaning of the child care service is one of the most important ways we can reduce infection in the service. We need to know what to clean, when to clean and how to clean effectively.
- Warm soapy water is sufficient for the majority of cleaning tasks in the service.
- Standard precautions such as hand washing, effective cleaning, glove use and immunisation are the most effective ways of reducing infection spread.
- Germs are spread in four ways- faecal- oral, droplet, contact and blood and body fluids
- Ventilation, lighting and heating/cooling all have a role to play in reducing infection in the service
- Beds and bedding require special care to ensure they are not a means of transmitting disease amongst children
- Hygienic food preparation, handling and storage is critical in reducing the likelihood of food borne disease in the child care service.
Additional resources

For more information on infection control and the importance of personal hygiene in child care settings refer to:

Staying Healthy in Child Care (4th Edition)

For more information on green cleaning:
www.sasiclean.com.au
www.freshgreenclean.com.au
www.tec.org.au
http://www.eceen.org.au/services.htm

For more information about promoting personal hygiene in young children:
You can read more about the Queensland Health Departments Germ Busters program at www.health.qld.gov.au/germbusters/resources_ec.asp

For more information about food safety:
HACCP Based Food Safety Programmes and Endorsements:


NSW Food Authority (2008) Food service in NSW childcare centres: preliminary evaluation findings. Newington, NSW