

Nursery Care Guidelines

First UU San Antonio

Parents leaving their children in the care of our nursery staff can be assured that the safety and welfare of their children is our highest priority. To that end, nursery staff and church administration will observe the following guidelines.

Procedures

Parents will sign their child(ren) in on the sign-in sheet when entering. If any person other than the person dropping off will pick up the child, the caregivers must be explicitly notified.

The sign-in sheet will have a space for parents to write their cell phone number so caregivers may contact them if needed. (Parents should be sure to put their cell phones on vibrate!) If a child cries for more than ten minutes straight, the parent should be called. No more than eight children of nursery age should be cared for in the nursery at one time. If a ninth child is checked in, contact a supervisor.

Nursery staff are responsible for ensuring the cleanliness and safety of the premises and users at all times. There must always be at least two caregivers in the nursery during nursery hours. Children are supervised at all times. Caregivers should use cellphones only in the case of emergency. Nursery staff will have completed a request for background screening and passed a confidential criminal background check.

Reporting suspected abuse

Most injuries to children are accidental and can be simply explained. Bruises, scrapes and cuts are part of the normal rough and tumble of a young child's life. There are, however, some children who suffer injuries which are not accidental. The nursery staff has a duty to report any serious concerns they may have about a child to the Texas Department of Family and Protective services at **1-800-252-5400**. They should also report such concerns to the Director of Lifespan Religious Education (DLRE), or to the minister if the DLRE is unavailable. Caregivers are aware of the sensitivity of this issue and of the confidentiality involved.

Sanitation

Caregivers will wipe down all surfaces with disinfectant after the last child has left the nursery each Sunday. Diaper-changing surfaces should be wiped with a disinfectant cloth after every use. Caregivers are encouraged to wear sanitary gloves when changing diapers or coming into contact with any bodily fluids. If this is not practicable, the caregiver will wash hands with disinfecting soap or use an instant hand sanitizer after each exposure. Hazardous materials like cleaning fluids must be kept where children cannot reach them. Children who manifest a fever or other signs of possible infectious disease should not be cared for in the nursery. If a caregiver sees signs of illness, the parent will be called.

Fire safety

Fire exits are clearly marked and are free from obstructions. Firefighting equipment is serviced regularly.

Environment and equipment

Plug protectors will be placed in all unused electrical outlets.

Donated equipment will be examined for adherence to safety standards before being used.

All toys should be age appropriate. Small toys will be tested to make sure they are not small enough to present a choking hazard.

All toys in a nursery should be washable. Smooth, plastic-covered toys are best because they can be easily cleaned.

Walkers are not recommended for church use.

No toys or blankets are to be in the crib, either as storage or during use.

Accidents and injuries

All accidents are recorded on an accident/incident report form which is to provide details of dates, times, nature of incident and injury, any treatment given, and is to be signed by the member of staff who administers First Aid. A First Aid box is available in all buildings and is replenished regularly. In case of serious injury 911 will be called and parents will be called in from the sanctuary.

Parent Concerns

Parents may feel confident that concerns expressed to our nursery caregiver staff will be taken seriously. Concerns may also be addressed to the Director of Lifespan Religious Education (344-2431; cell: 361-947-0863) or to the minister if the DLRE is unavailable.

I have read and agree to abide by the above guidelines

Printed Name of Nursery care-giver _____

Signature _____

Date _____

Putting baby to sleep (SIDS prevention)

Child care providers who care for babies less than 12 months old should be aware of the risk of Sudden Infant Death Syndrome (SIDS). According to the American Academy of Pediatrics, SIDS is the leading cause of death in infants and is most common in those who are one to four months old. The following guidelines should be followed to lower the risk of SIDS and increase the safety for infants in your care:

- Infants should ALWAYS be placed on their back to sleep. They should not be put to sleep on their side, stomach, or propped in some way.
- Infants should be placed on a firm sleep surface with fitted sheets, free of things that could make it difficult for them to breathe (e.g., soft bedding, pillows, stuffed animals, bumpers), and should be alone in the crib.
- Infants should sleep in a room that is a comfortable temperature, in a range that would be comfortable for a lightly clothed adult. Do not let them get too hot.

If there are concerns or special situations that require different sleeping arrangements for an infant in your care, you may also need to request a letter from the child's medical provider detailing any special arrangements that need to be made.

Texas DPS Diaper changing guidelines*

Division 2, Diaper Changing §746.3501 What steps must caregivers follow for diaper changing?

Subchapter R, Health Practices Division 2, Diaper Changing September 2003 Caregivers must: (1)

Promptly change soiled or wet diapers or clothing; Medium-High

(2) Thoroughly cleanse children with individual cloths or disposable towels. You must discard the disposable towels after use and launder any cloths before using them again

(3) Ensure that the children are dry before placing a new diaper on the child. If the child must be dried, you must use a clean, individual cloth or disposable towel to dry the child. You must discard the disposable towel after use and launder any cloth before using it again; Medium-High

(4) Not apply powders, creams, ointments, or lotions without the parent's written permission. If the parent supplies these items, permission is implicit and you do not need to obtain permission for each use; Medium

(5) Label powders, creams, ointments, or lotions with the individual child's name

(6) Keep all diaper-changing supplies out of children's reach.

• A pleasant attitude while changing a child's diaper, even if a child has had a loose stool, helps to

develop a child's positive sense of self.

- Wipes are helpful in removing residue, such as food off a baby's face or feces from a baby's bottom during diaper changing.
- Parents need to give permission before over-the-counter creams or powders are used. A parent can address whether the child has a skin allergy or if a child's pediatrician does not recommend use of topical products when diapering. Caregivers may seek written permission to use these products before the need arises.

§746.3503 What equipment must I have for diaper changing? Subchapter R, Health Practices Division 2, Diaper Changing December 2010 Medium-High

(a) You must have a diaper-changing table or surface that is smooth, non-absorbent, and easy to clean. Medium-High

(b) You must not use areas that children come in close contact with during play or eating, such as dining tables, sofas, or floor play areas, for diaper changing.

(c) To prevent a child from falling, a diaper-changing surface that is above the floor level: Medium-High (1) Must have a safety mechanism (such as safety straps or raised sides) that is used at all times when the child is on the surface; or Medium-High (2) The caregiver's hand must remain on the child at all times when the child is on the surface

(d) You must have a hand-washing sink in the diaper-changing area. Refer to §746.4403 of this title (relating to

Must I have a hand-washing sink in the diaper changing area?). A separate area used for diaper changing and/or changing of soiled underwear reduces contamination of other parts of the child-care environment.

§746.3505 What must I do to prevent the spread of germs when diapering children? Subchapter R, Health Practices Division 2, Diaper Changing December 2010

(a) You must wash your hands. Refer to §746.3419 of this title (relating to How must children and employees wash their hands?).

(b) You must wash the infant's hands or see that the child's hands are washed after each diaper change. See §746.3421 of this title (relating to How must I wash an infant's hands?).

(c) If you use disposable gloves, you must discard them after each diaper change and wash your hands with soap and running water. Medium-High

(d) Caregivers with open wounds and/or any injury that inhibits hand washing, such as casts, bandages, or braces, must not change diapers.

(e) You must sanitize the diaper-changing surface after each use. Refer to §746.3409 of this title (relating to What does Licensing mean when it refers to "sanitizing"?). However, if you are changing diapers on a number of children consecutively, you may cover the surface with a non-absorbent paper liner that is disposed of between each diaper change. Medium-High

(f) You must cover containers used for soiled diapers or keep them in a sanitary manner, such as placing soiled diapers in individual sealed bags.

- Recommendation: Assembling all of the supplies necessary for a diaper change before bringing the child to the changing table ensures the protection of the child. If the hand-washing sink is not adjacent to the diapering area, wipes may be used, as a temporary measure only, to clean the caregiver's and child's hands while supervising the child on the changing table.

- During diaper changing, a child's hands often stray into the area of the child's body covered by the diaper. Germs are contained in human waste and body fluids and are present on the skin and the diaper even if they cannot be seen. Washing an infant's hands after each diaper change helps reduce the spread of germs.

- Because of the risk of splashing, and gross contamination of hands, sinks, and bathroom surfaces,

rinsing diapers or clothes soiled with fecal material in the child-care setting increases the risk that you, other caregivers, and the children would be exposed to germs that cause infection. • Rotating 2 changing mats throughout the day, using one while another is sanitized and dries, provides an alternative to waiting between diaper changes.

*Urgency levels removed: most of these guidelines are “medium high.”