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# Injury Prevention

2009 The Year  
of Safety



**"Safety is  
Everyone's  
Responsibility"**

Another year has come and gone. What resolutions did you make in 2008? Perhaps making 'Safety First' a goal for 2009. You can start by reviewing your facilities disaster plans. If you have one, take it out and update phone numbers and essential personnel's information. If you do not have one, resources are available at the Early Learning Coalition website [www.elcswfl.com](http://www.elcswfl.com).

## Inside this issue:

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**Fire Drills:**  
Have one **EVERY**  
month.



Newsletter by  
Sue Reese, RN  
Hendry Co. Health Dept

## Dates to Remember

### January:

National Mentoring Month  
National Blood Donor  
Month

### February:

Safety Awareness Month



**EARLY LEARNING  
COALITION**  
OF SOUTHWEST FLORIDA

"Nurturing the young children  
of Southwest Florida and  
those who care for them".

# January 2009

## HAND WASHING FACTS:



Keeping hands clean is one of the most important steps we can take to avoid getting sick and spreading germs to others. It is best to wash your hands with soap and clean running water for 20 seconds.

Limit use of alcohol-based hand rubs to areas of the child care facility that are inaccessible to children. Discourage alcohol-based hand rubs for hand hygiene in child use areas. Be sure you follow the manufacturer's instructions for use, if used at all. For more information; visit <http://www.ecels-healthychildcarepa.org/section.cfm?sectionID=3>

Concern about infectious disease in child care is an everyday worry for parents and caregivers of young children. When children become ill, they may pass their illnesses on to other children, to caregivers, and to caregivers' families. There are simple steps you can take to avoid preventable illnesses and reduce the risk of transmission of infectious disease.

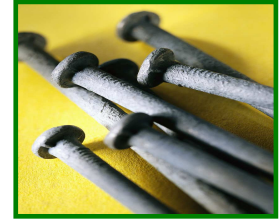
Be Prepared – don't wait until an outbreak occurs!

- Require correct hand washing procedures for adults and children.
- Air out all the rooms where children spend their days and take the children outside often.
- Allow lots of space for children to play both indoors and outdoors.
- Clean and sanitize areas for diapering, toileting, and eating as well as toys and furniture.
- Reduce germs by cleaning the environment with detergent and water and then sanitizing with a bleach solution.



Teach children and staff to sneeze and cough away from other people and toward the floor, into their elbows, or against their shoulders. Covering sneezes and coughs with a hand promotes the spread of germs from the hand to every subsequent surface touched, until the hands are washed.

## Tetanus in Child Care



Tetanus is relatively rare in the United States, with fewer than 100 cases reported annually. That does not mean we let our guard down. Young children are always on the go and commonly suffer minor scrapes and lacerations that could lead to acquiring Tetanus.

The bacteria that causes Tetanus is called *Clostridium tetani* (C..tetani) and is found worldwide in soil, street dust and animal feces. It is not just from a 'rusty nail'. Tetanus causes muscle spasms, stiffness in the neck, abdomen and back that follow with contractures that move down the body. These symptoms can come and go and last for up to a month. Other symptoms include fever, irritability, difficulty swallowing, headache, sore throat, to name a few.

Nails are not the only thing that carry Tetanus...

Complications from tetanus include; fractures of the spine, pneumonia, ulcers and secondary infections. The average time between infection and the onset of symptoms is 7 days.

Treatment for tetanus commonly consists of; antibiotics, antitoxins and updating tetanus vaccination. Hospitalization with medications for muscle spasms and other complications could be required. Some patients suffer lasting effects, and in some cases, it is fatal.

Preventing tetanus is important. Immunizations are the only effective way. Children younger than 7 years receive DTaP vaccine. DTaP is recommended in four separate doses starting at 2 months, then 4 months, 6 months, and 15-18 months. A booster may be recommended at 4-6 years of age. Your staff is also encouraged to keep their vaccinations up to date, a Td or Tdap booster every 10 years or after an injury with possible exposure to tetanus. Tetanus can NOT be transmitted one person to another, but we should be aware that our co-workers and staff are also at risk for contracting the disease.









Talk to your childcare health consultant and/or review your Health & Safety Manual for further information on immunizations, proper wound care and other prevention ideas.

## What is a Medical Home and what is the benefit?

Information gathered for this months issue included: CDC, globalhealthychildcare.org , naeyc.org , healthychild-care.org, AAP, medical-homeinfo.org.






First, a Medical Home means a "family-professional partnership" is established with your child care physician/provider.

### A Medical Home Includes:

-  A partnership between your family and your child's primary care clinician
-  A relationship based on mutual trust and respect and working with other care providers
-  Connections to supports and services to meet your child's and family's needs
-  Respect for your family's cultural and religious beliefs
-  After hours and weekend access to medical consultation about your child
-  Families who feel supported in caring for their child



### The Benefits of a Medical Home:

-  You regularly see the same primary care clinician and/or office staff who know your child and family;
-  Someone who will partner with you in coordinating care for your child, exchange information with you honestly, and respectfully as you learn from one another
-  Your family feels supported in finding resources, for all stages of growth and development of your child
-  Your family is connected to information and family support organizations
-  Your Medical Home partnership promotes health and quality of life as your child grows and develops into an adult

