



Lakeshore Little People's Place

## Health Care Service Plan

# INDEX

<b>Health Policy</b>	<b>3-4</b>
Child Health Policy	3
Return after Illness	3
Staff Health Policy	4
Administration of Medication	4
<b>Universal Precautions</b>	<b>5-8</b>
General Precautions	5
Cleaning and Sanitation	5
Hand Washing	6
Hand Washing Procedure	6
Infectious Diseases	7
Handling Bodily Fluids	7
Gloving Procedure	7
Diapering Procedure	8
Potty Training	8
Bathroom Visits	8
<b>Child Safety</b>	<b>9-10</b>
Emergency Procedures	9
Child Incident/Accident (Non-Emergent)	9
Accident/Injury (Emergent)	9
First Aid Kits	10
Child Abuse/Neglect	10
Prohibited Materials	10
Garbage and Refuse	10
Electrical Service	10
Ventilation and Screening	10
Fire Safety	10
Integrated Pest Management Program	10
<b>Food Service and Sanitation</b>	<b>11</b>
Food Service and Nutrition	11
Special Occasion Food	11
Food Preparation Areas	11
Food and Equipment Storage	11
Food Supplies	11
<b>Additional Info Regarding Infant and Toddlers</b>	<b>12</b>
<b>Parent Resources</b>	<b>12-13</b>

## Health Policy

**Child Health Policy.** A green Health Appraisal form containing an immunization record and documentation of a physical exam signed by a physician must be on file with LLPP. The green Health Appraisal form must be on file at the time of enrollment and then updated annually for all children until they enter kindergarten. Parents of School-Age children can sign a Physical Exam Waiver form stating that their child is in good health and that their immunizations are up to date.

It is the policy of LLPP to notify parents as soon as possible when changes in the child's health are observed. This will allow parents to give additional input on a child's condition and be involved in decision making regarding the child's care. Indicators of changes in a child's health are:

- Fever of 100 degrees or higher
- Diarrhea - two or more loose/watery stools without known cause  
**Exception:** Medication or new food reaction (call parents to confirm)
- Vomiting - any vomiting  
**Exception:** Babies that "burp up" following a feeding (consult parents for history)
- Unknown skin rash as these are often symptoms of communicable disease  
**Exception:** Parent does not need to be notified of mild diaper rash that is already known to the parent. Rashes due to allergies or known medical conditions should be treated as instructed by parent and a notification call must be made with each episode.
- Irritability, lethargy, persistent crying that is not typical for the child
- Difficulty breathing

If a child becomes too ill to participate comfortably in activities or they need more care than the staff can provide, the child will be temporarily separated from other children and sent home as soon as possible. Other criteria for exclusion include a fever above 101° (100.4° for under 2 months), or 3 or more episodes of diarrhea or vomiting. LLPP also reserves the right to send children home with lesser criteria if there are a significant amount of children with similar symptoms. Parents are expected to pick up ill children within an hour of notification.

Parents should notify the Site Director if a child in care has been diagnosed with a communicable disease. The Site Director will notify the Health Department (if necessary) and then post a Health Alert visible to parents. Communicable and infectious diseases include but are not limited to:

- Chicken Pox (Varicella)
- Fifth Disease
- Influenza (viral)
- Measles (Rubeola)
- Meningitis
- Mumps
- Respiratory Syncytial Virus (RSV)
- Roseola
- German Measles (Rubella)
- Scarlet Fever
- Strep Throat
- Streptococcus Pneumoniae
- Tuberculosis (TB)
- Whooping Cough (Pertussis)
- E. Coli
- Giardiasis
- Acute Gastroenteritis (food poisoning)
- Pinworm
- Scabies
- Pinkeye
- Hand, Foot and Mouth
- Viral Gastroenteritis – Norovirus & Rotavirus
- Hepatitis A
- Impetigo
- Herpes
- Head Lice
- Ringworm
- MRSA

**Return of Children to Childcare after Illness.** If a child is too ill to participate in the regular activities of the classroom they should not return to care. Children must be fever free without fever reducing medication for 24 hours prior to the child returning to the center. An exception to this is if a doctor's note is provided stating they can return to care. If a child has a communicable illness, the child may return once the exclusion criteria for that illness are resolved and/or the child receives clearance from a medical care provider. Exclusionary criteria will be determined by following medical care provider instructions and following guidelines set in place by the Ottawa or Allegan County Health Department regarding communicable diseases. LLPP reserves the right to request a doctor's note before allowing a child to return.

**Staff Health Policy.** Staff are expected to stay at home if they are running a fever at or above 101 degrees or have excessive vomiting or diarrhea. Staff are also expected to stay home if they have a communicable illness.

**Administration of Medication for Children.** It is important for staff to keep accurate records and take extra safety precautions when handling medications. Certain medications can cause allergic reaction or fatality for children who are not prescribed the medication. Call DeVos Children's Hospital Poison Control Center at 1-800-222-1222 and check the child's allergies if you see any new or unusual symptoms or reactions from a medication. Specific child allergies are posted in the classrooms.

Parents must complete a Medication Permission and Instruction form for each medication before staff are able to administer any medication. All medication must be in its original container, stored according to instructions, and clearly labeled for a named child. Prescription medication must have the pharmacy label indicating the physician's name, instructions, and name and strength of the medication. Staff must only administer medication according to these instructions. Medication Permission and Instruction form for oral medications must be updated every three months. The staff member who administers the medication logs the dosage, date, and time at which the medication was given and initials the entry. All medication must be placed out of a child's reach and stored according to the directions. When a child discontinues the medication, the medication should be handed to the parent or turned into the Site Director if the child is no longer in attendance. The medication forms should also be turned into the Site Director and placed in the child's permanent file. Medication that is stored for a period of time needs to have the expiration date checked frequently.

Any topical non-prescription medication, including but not limited to sunscreen, lotions, lip balm, diaper rash ointment, etc. require written parental consent obtained by the Medication Permission and Instruction form. Topical non-prescription medications, such as sunscreen, do not need a recorded time or amount documented. Written parental authorizations for topical items need to be updated yearly.

## Universal Precautions

**General Precautions.** Many communicable diseases can be prevented through appropriate hygiene and sanitation practices. Contamination of hands, toys, and other equipment in the room has appeared to play a role in the transmission of disease in child care settings. Illnesses may be spread by way of:

- Human waste, such as urine and feces
- Bodily fluids, such as saliva, nasal discharge, eye discharge, open skin sores, and blood
- Direct skin to skin contact
- Touching a contaminated object
- The air (in droplets that result from sneezes and coughs)

Since many infected people carry communicable diseases without symptoms, and many are contagious before they experience a symptom, caregivers need to protect themselves and the children they serve by carrying out, on a routine basis, universal precautions and sanitation procedures. Since we cannot know who is infected, we must practice Universal Precautions which assumes that every person and all body fluids are potentially infectious.

Safe work practices reduce the risk of exposure and include proper hand washing procedures, use of waste containers, and proper disposal of contaminated objects, proper housekeeping procedures, and proper food storage procedures. Staff members must evaluate the work environment for potential hazards such as broken toys or other “sharps” that may have edges that could puncture the skin.

**Cleaning and Sanitation.** Cleaning and sanitation creates a pleasing and healthy environment for parents, children and staff members. Labeled spray bottles (Soapy Water, Rinse Water, and Sanitize) are available in every classroom and food service area. The staff member who opens each classroom is responsible for making fresh bleach water every morning.

For manual washing of tableware, utensils, food contact surfaces and food service equipment, diapering areas, sleeping equipment and toys, the following process will be used:

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|--------|--|
| Step 1 | Wash surface or article vigorously with warm water and detergent.  |
| Step 2 | Submerge, rinse or spray with water and wipe clean.  |
| Step 3 | Submerge, wipe, or spray with solution of one (1) tablespoon of chlorine bleach in one (1) gallon of warm water. Bleach must have an EPA number indicating it is approved for food contact sanitizing. |

The article or surface will then air dry. Tables, highchairs and diaper changing tables can be dried with a single-use towel after air drying for a minimum of 2 minutes. Staff will use the guidelines on the pH strip packaging to periodically check the balance of the bleach to water. A dishwasher with sanitizing capability may also be used for washing.

**Cleaning and sanitizing schedule.** Staff will clean specified items using the following schedule:

- **Before each use:** Food prep surfaces, food service tables, and highchair trays.
- **After each use:** Food prep surfaces, eating utensils and dishes, food service tables and high chair trays, counter tops, food prep appliances, diaper changing tables and any toys having contact with a child’s mouth.
- **End of day:** Sinks and faucets, counter tops, toilets, diaper pails, tile floors, carpet and rugs (vacuum), infant and toddler toys having contact with a child’s mouth, door and other handles.
- **Weekly:** Classroom toys, play activity centers, and classroom shelving, refrigerators, machine washable toys, dress up clothes, and sleeping equipment. Bedding will be sent home with parents at the end of each week for laundering.

**Hand Washing.** This is the primary prevention for the spread of disease and topical allergic reactions. Waterless antibacterial hand sanitizer may not be used in place of washing hands with running water.

Children wash their hands:

- Before eating or food preparation experiences
- After using the restroom or having diaper changed
- After wiping their nose
- After handling animals and pets
- Whenever soiled

Staff may wash children's hands with non-toxic disposable wipes in the following situations:

- When the child is too heavy to hold for handwashing
- When the child cannot stand safely at the sink
- When the child is not developmentally ready to hold his or her head
- When the child has a special need, so the child is not able to wash his or her own hands
- When soap and running water are not available during an outing, hand sanitizers, and/or single-use wipes may be used as a temporary measure

Staff members wash their hands:

- Upon arrival prior to the care of children
- Before eating and preparing food
- After personal bathroom use
- After helping a child in the bathroom
- After wiping noses
- After any physical contact with a sick child
- Before administering any medications
- Before applying bandages
- Before and after diapering
- After handling garbage, litter, diapers or soiled clothing
- After applying sunscreen to a child before the next child's sunscreen is applied, even if gloves are worn
- Between feeding each infant
- After handling animals and pets
- Whenever soiled

**Hand Washing Procedure.** The following steps should be followed to ensure effective hand washing:

- Have a clean, disposable or single-use towel available.
- Turn on the water to a comfortable temperature between 60 to 120 degrees.
- Moisten hands with water and apply liquid soap.
- Rub hands together vigorously until a soapy lather appears and continue for at least 20 seconds. Rub between fingers, around nail beds, under fingernails, jewelry and back of hands.
- Rinse hands under running water until they are free of soap and dirt. Leave the water running while drying hands.
- Dry hands with a clean, disposable paper or single-use towel.
- If taps do not shut off automatically, turn taps off with the disposable paper or single-use towel.
- Throw the disposable towel in a lined trash container or place cloth towel in a laundry hamper or hang individually labeled towel to dry.
- Use hand lotion to prevent chapping, if desired.

**Infectious Diseases.** Many diseases are transferred from person to person through disease-carrying microorganisms (pathogens) that may be found in human blood, tissue, organs or other bodily fluids. Diseases that are of the most threat are Hepatitis B (HBC), Hepatitis C (HCV), and Human Immunodeficiency Virus (HIV). A vaccination is available for HBC but there is no vaccination or cure currently available for HCV or HIV.

A direct infection occurs when infectious material splashes into or onto a person's eyes, mouth, cuts, abrasions or mucous membranes. Indirect infection occurs when infectious material first spills onto an object, such as a toy, and then finds its way into someone's body. Dry blood may be infectious for several days. If an employee thinks they, or a child, have been exposed, they must report the incident to the Site Director, document the way in which the exposure occurred and undergo a medical evaluation and follow-up. These arrangements will be made by the Site Director, but kept confidential between the health care professional and the employee.

**Handling Bodily Fluids.** All actions involving potentially infectious materials should be performed in a manner that minimizes splattering, splashing, spraying, or generating droplets. Disposable gloves must be used as a barrier between your skin and any bodily fluid, especially when performing emergency care. All employees must wash their hands immediately even if gloves were used when caring for the other person. A mouth guard should be used when performing CPR. These are located in each first-aid kit.

Blood and bodily fluids, used bandages, contaminated "sharps", and any item that may contain infectious material, and items with dried potentially infectious material are called regulated waste and must be placed in the building's designated red Bio-Hazard can. Contaminated clothing and other laundry is handled as little as possible. Employees should not rinse contaminated children's clothing after contamination by feces, urine or blood. Rather, place the articles in a plastic bag and seal it while wearing disposable gloves and return to parents upon pick-up. Immediately dispose of all other infected materials in the classroom including all materials used to clean contaminated items and place them in the sealed designated container.

Bodily fluids (such as blood, vomit and feces) on the following surfaces will be disinfected with non-scented chlorine bleach:

- Stainless steel and food/mouth contact items (tables, toys, etc.) - one tablespoon of bleach per gallon of water
- Non-porous (non-absorbent) surfaces, tile floors, countertops not used for food prep, sinks (not stainless steel) and toilets - 1/3 cup bleach per gallon of water
- Porous (absorbent) surfaces and wood floors - 1-2/3 cups bleach per gallon of water

**Gloving Procedure.** It is important to wear gloves when dealing with bodily fluids. Gloves should be put on and removed using the following process:

- |        |   |
|--------|---|
| Step 1 | Put on a clean pair of gloves.  |
| Step 2 | Provide the appropriate care.   |
| Step 3 | Remove each glove carefully. Grab the first glove at the palm and strip the glove off. Touch dirty surfaces of glove only to dirty surfaces of glove. |
| Step 4 | Ball-up the dirty glove in the palm of the other gloved hand.   |
| Step 5 | With the clean hand, strip the glove off from underneath at the wrist, turning the glove inside out. Touch clean surfaces only to clean surfaces.     |
| Step 6 | Discard the dirty gloves immediately in the designated waste receptacle with lid.   |
| Step 7 | Wash hands.   |

**Diapering Procedure.** Proper diapering is the key to keeping children healthy and the environment sanitary. It is important to check infants and young children on a regular basis for diapering to prevent diaper rash, unnecessary leaks and discomfort for the child. The following steps need to be taken when diapering and will be located in all diapering areas for review:

- |         |   |
|---------|---|
| Step 1  | Put on disposable gloves or wash hands.   |
| Step 2  | Gather necessary changing supplies before starting the process.   |
| Step 3  | Always use designated changing area. Check to make sure changing surface is clean and dry before laying the child down.                       |
| Step 4  | Remove the child's diaper and wash the child's bottom with baby wipes, wiping front to back. Repeat this process with a clean wipe as needed. |
| Step 5  | Pat the child's bottom dry.   |
| Step 6  | Only use rash ointments if parents filled out a <u>Medication Permission and Instruction</u> form.  |
| Step 7  | Dispose of the soiled diaper or pull-up and wipes in a closed-lid container with a plastic liner.   |
| Step 8  | Allow the child to wash their hands at the sink with soap, if appropriate (see note).   |
| Step 9  | Use the three step process (soapy water, water, and then bleach solution) to sanitize all surfaces of the changing area.                      |
| Step 10 | Wash hands again thoroughly with soap and warm water. Dry them and shut the water off with the paper towel before throwing it away.           |

**Note:** For infants who are too heavy to hold for handwashing, children who cannot stand safely at the sink, or children who have special needs and do not have the developmental ability to stand and wash their own hands, a non-toxic disposable wipe may be used to wipe their hands.

**Potty Training.** Each child goes through the process of potty training. Toilet learning is planned cooperatively between the child's primary caregiver and the parent so that the toilet routine established is consistent between the center and the child's home if possible. By approaching the process on an individual basis for each child, frustration will be minimized. Potty training begins when the child is ready. This typically happens anywhere from age 1 ½ to 3 ½ years. It is important to keep in mind that it varies from child to child. Below are guidelines to follow during the potty training process:

- Be sure the child is ready before introducing potty training.
- Discuss a plan with the child and parent.
- Set potty training guidelines that have consistency between home and LLPP.
- Staff will give progress reports to parents.

**Bathrooms Visits.** Below are guidelines that need to be followed while in the bathrooms:

- After each child uses the restroom, check the toilet and floor for cleanliness.
- Use disposable gloves and the three-step process to clean soiled areas; wash hands after handling the soiled material.
- Help the child wash their hands with soap and water and dry their hands thoroughly.
- Check to make sure facilities are clean (i.e. paper towels are thrown away, sinks and counters are wiped off and step stools are wiped down).
- Wash hands before leaving the bathroom.

**Note:** The main door of each bathroom needs to remain open to meet safety and abuse prevention guidelines.



## Child Safety

**Emergency Procedures.** LLPP has written procedures for emergency situations including fire, tornado, serious accident/injury and man-made disasters, as well as a crisis management plan. Emergency procedures and evacuation plans are posted in each classroom. For detailed instructions on specific emergency procedures, please see the Crisis/Disaster Response Plan. Additional plans for Infants and Toddlers in emergency situations can be found in the Crisis/Disaster Response Plan.

**Child Incident/Accident (Non-Emergent).** In case of injuries, the incident is documented and a Child Incident/Accident Report is completed. The parent is informed as soon as possible by phone, allowing parents to be informed and involved in the decision making process regarding the incident/accident.

When the parent arrives to pick up the child, staff will have the parent sign the incident report. If the parent does not pick up the child, the incident report will not be sent home. Instead staff will call the child's parent and keep the incident report for the parent to sign the next time they are at the center. The parent keeps the white copy and the yellow copy is turned into the Site Director.

**Accident/Injury (Emergent).** All staff are trained in Pediatric, Child and Adult CPR and First Aid and Infectious Disease Control. The following procedure should be followed in the event of an accident or injury:

- Survey the scene to identify any potential dangers to yourself and others.
- Check for consciousness by tapping the child or rubbing the sternum asking, "Are you okay?"
  - Do not move the child, unless it is safe to do so or necessary in administering CPR or to clear the airway.
  - If a child is conscious but showing distress, look for signs of choking, dilation of eyes and unusual speech, or areas of injury.
  - If the child appears to be choking, follow the proper procedures for relieving infant choking (back blows) or child choking (abdominal thrusts).
  - If the child does not appear to be choking, but is unconscious, follow the steps for CPR as follows:
- Have another adult call for emergency personnel (911) and the child's parent. If alone with the child, conduct 5 sets of 2 rescue breaths and 30 compressions before calling for help.
- Ensure proper circulation by administering CRP if necessary and use an AED when available.
- Never leave a child unattended and stay with the child until emergency personnel or parent can get to the scene.
- Have another adult plan a quiet activity for the remaining children to keep them clear of the scene.

**\* ALWAYS WEAR GLOVES WHEN BLOOD IS PRESENT \***

Until the arrival of the parent, a physician, an ambulance or paramedics, the child's teacher or Site Director will make decisions regarding care of the child. LLPP is not responsible for medical bills incurred because of accident or injury while a child is in attendance. All serious injuries requiring medical attention are required to be reported to the Office of Children and Adult Licensing. **Please report any phone number changes on your Child Information Record so that you can be reached in an emergency.** Child information records containing these contact numbers are located in the director's office in the binder marked "CHILD INFORMATION RECORDS." Each classroom also has an Emergency Binder (or Crisis Notebook) located near the first-aid supplies.

All staff involved must fill out a Child Incident/Accident Report which includes: the child's first and last name, the date and time of the incident, the time the parent was called and what the parent was told. Descriptive language will be used when documenting the incident; what led up to the incident, the cause of injury and the actual injury. Staff will not name any other child involved in the accident or speculate if they did not see the incident. The incident report will specify what First Aid was given to the child. If the injury requires medical attention, the Site Director will verbally report the incident to the licensor within 24 hours and complete a written Incident, Accident, Illness, Death or Fire Report from the Michigan Department of Social Services (DSS-4603) within 72 hours. **ANY medical care received as a result of accident or injury is considered emergency care even if brought in later by the parent, and the licensing consultant must be informed by above process.**

**First Aid Kits.** In order to be effective in minimizing injury when an accident occurs, staff are trained in Pediatric, Child and Adult CPR and First Aid and Infectious Disease Control, and have access to a first-aid kit and AED machine. Each classroom is equipped with a first-aid kit containing the following supplies:

Adhesive tape, sterile gauze pads and rolled gauze in assorted sizes, adhesive bandages in assorted sizes, elastic bandages, adhesive cloth tape, cold pack, disposable gloves, scissors and tweezers, and a CPR Micro shield clear mouth barrier.

**Child Abuse/Neglect.** LLPP staff members are required by law to report suspected incidents of child abuse/neglect. If child abuse is suspected, staff members are legally mandated to make appropriate calls to authorities. If abuse by a relative is suspected, staff must **immediately** call Child Protective Services - Centralized Intake for Abuse and Neglect at **(855) 444-3911**. The information given by phone and report needs to be provided by the individual who actually has observed the injuries or had contact with the child regarding the complaint. Staff will also complete a Report of Actual or Suspected Child Abuse or Neglect (DHS 3200) and submit it to Centralized Intake for Abuse and Neglect.

If abuse by a non-relative is suspected, local law enforcement is contacted at **(800) 249-0911** in Ottawa County and **(269) 673-3899** in Allegan County.

Community services are available to families seeking help or interventions; please see the Site Director or the parent resource list on pgs. 12 & 13.

**Prohibited Materials.** Materials that have a warning label stating they are toxic cannot be used. Classrooms are not allowed to have children use items such as shaving cream, balloons, hair gel/spray or any other materials labeled “keep out of reach of children” during instruction or play.

**Garbage and Refuse.** Garbage shall be stored in watertight containers with tight fitting covers. Garbage containers shall be clean and free of residue. Walls, floors, and cabinets around the garbage container shall also be cleaned.

**Electrical Service.** All electrical outlets in child use areas for children who are not yet School-Age shall be made inaccessible to children by covering them with safety caps. Power strips must be no longer than six feet and must be equipped with a surge protector. Power strips may not be connected to another power strip.

**Ventilation and Screening.** Windows used for ventilation shall be supplied with screening. Windows without screens cannot be opened. Propping doors open for ventilation is prohibited.

**Fire Safety.** Combustible materials must be kept to a minimum in classrooms. Combustible items may not be hung from ceilings and large cloth items (drapes, banners, bulletin boards, etc) must be treated with an approved fire retardant. No more than twenty percent of wall space may be covered with combustible material such as artwork and posters. Fire exits must be kept clear at all times, including snow in winter weather.

**Integrated Pest Management Program.** Site Directors will post notification for parents annually in September stating that they will receive advanced notice of a pesticide application. In the instance that LLPP would need to use a pesticide to treat an infestation, Site Directors will notify parents a minimum of three days prior to a scheduled application via a posting on the front door and by memo located next to the sign-in/sign-out sheets of each classroom. These advanced notifications will contain information about the pesticide being applied, including the target pest or purpose, approximate location and date of the application, contact information, and a toll-free telephone number for a national pesticide information center that is recognized by the Michigan Department of Agriculture. Liquid spray and aerosol insecticide applications will not be performed in a classroom unless the classroom will be unoccupied by children for a minimum of four hours following the application or longer if required by the pesticide label use instructions. Notification requirements do not apply to bait or gel pesticide formulations.

## Food Service and Sanitation

**Food Service and Nutrition.** Providing children meals and snacks with proper quantity and nutritional quality promotes optimum nutrition which supports growth and development in all children. Meals and snacks provided by the center shall meet the meal pattern guidelines set forth by the Child and Adult Care Food Program (CACFP) operated by the Michigan Department of Education. Please consult the Parent Handbook for food items provided by LLPP. All parents will also need to sign the Parent Providing Food Agreement included in the enrollment pack. Water will also be available throughout the day to all children over 12 months at his/her request. Menus are posted in eating areas and are available for parents to take home. Meals and snacks must meet the USDA meal pattern requirements below:

<p><b><u>Breakfast</u></b> Milk Fruit and/or Vegetable Grain</p>	<p><b><u>Lunch</u></b> Milk 2 Fruit/Vegetable Grain Meat or Meat Alternate</p>	<p><b><u>Snack- 2 of 4 groups</u></b> Milk Fruit/Vegetable Grain Meat or Meat Alternate</p>
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*See Additional Information for Infants / Toddlers included in the Parent Handbook.*

LLPP is a peanut and tree nut free environment. Children with special needs may have individual requirements relating to allergy, diet, swallowing and other feeding needs. Parents of children with a special need will complete a Special Needs and Allergy Emergency Plan with written instructions identifying necessary precautions/treatments. Dietary restrictions and foods to be omitted from the diet, should be included as well as suitable substitutions. Individual children’s food allergies shall be posted in eating areas.

**Special Occasions and Food Service.** As a licensed childcare facility, we are required to follow strict guidelines for food service. In the instance of special occasion days, such as birthdays and holidays, we ask that “treats” are limited to non-food items. If a classroom wishes to incorporate special snacks into the celebrations, a parent sign-up for food items, approved by the Site Director, will be provided. If a food item is brought as a treat, it should be individually wrapped and it will be sent home with the children so that the parent can choose whether to give it to the child and determine any potential allergic reactions.

**Food and Equipment Preparation and Storage Areas.** Food contact surfaces are to be smooth, nontoxic, easily cleanable, durable, corrosion resistant and nonabsorbent. Food preparation surfaces must be sanitized before and after each use, which includes classroom tables used for food service. Each site will have a schedule for cleaning the refrigerator in the lunchroom or kitchen area. Carpet is prohibited in food preparation areas. Each refrigerator shall have an accurate working thermometer. Fresh, whole fruits and vegetables may be unrefrigerated for up to 3 calendar days. Unpackaged bulk foods shall be stored in clean, covered containers which are dated and labeled. Food not subject to further washing or cooking before serving shall be stored in a way that protects it from cross-contamination from food requiring washing or cooking. Packaged food shall not be stored in contact with water or un-drained ice (i.e. lunches in cooler with melted ice). Poisonous or toxic materials shall not be stored with food, food service equipment, utensils or single-serving items. Cleaning products or poisonous materials cannot be stored above or in the same storage unit as food or food preparation materials. Containers of food shall be stored a minimum of 6 inches off the floor.

**Food Supplies.** Food shall be in sound condition, free from spoilage, filth, or other contaminations and be safe for human consumption. Products that are home canned are not allowed, as contents and safe cooking guidelines cannot be verified. Food shall be prepared with the least possible manual contact, using suitable utensils, and surfaces that have been washed, rinsed, and sanitized. **Food service gloves must be used by staff members preparing, handling or serving food items.** Serving utensils shall be used by staff or provided to children who serve themselves. Food already served and handled by the consumer may not be served again, unless food is in a wrapper such as single service crackers. Raw fruits or vegetables shall be thoroughly washed before being cooked or served. Open containers of milk and all opened food shall be labeled with the date and time opened and used within 7 days of opening.

## Additional Information Regarding Infant and Toddler Care

For information regarding infant and toddler health provisions, see the Additional Information for Infants / Toddlers in the Parent Handbook.

### Parent Resources

**Help Me Grow Ottawa.** Help Me Grow connects families with children birth through age five to free local resources helping children grow up healthy and ready to succeed in school. Some ways Help Me Grow supports families include:

- Up-to-date information on childcare, kindergarten tips and free or low-cost quality preschool
- Free and convenient access to the nationally recognized [Ages and Stages Questionnaire\(ASQ\)](#) in English and Spanish to check-in on your child’s development
- Answers to prenatal and pregnancy questions
- Links to local playgroups, library happenings and other parenting resources including home visiting services

If your child’s teachers, caregivers, or doctors have concerns about your child’s behavior, development, learning or wellbeing, call 844-233-2244 or visit [www.hmgottawa.org](http://www.hmgottawa.org) to be connected to helpful services in the community.

**2-1-1.** If you need immediate assistance or wish to speak with someone about your needs, dial 2-1-1 which is an access point for persons needing health and human service programs. Please also feel free to ask your Site Director for assistance in finding available services for your family.

**Area Resources.** Below is a list of valuable community resources. For more information, see the parent table or connect with your Site Director.

Allegan Co. Community Mental Health 3285 122nd. Ave., Suite 200 Allegan, MI 49010 (269) 673-6617	Provides managed mental health care to individuals, children, or families with mental illness or developmental disabilities.
Allegan Co. Department of Health and Human Services Children’s Protective Services 3255 122nd. Ave. Allegan MI 49010 (269) 673-7700	Department of Health and Human Services (formally FIA). Provides a large variety of programs related to family health concerns, including adult and child protective services. Other services are Children’s Special Health Services, Healthy Kids, Maternity Outpatient Medical Services & Healthy Kids for Pregnant Women at (269)673-5540.
Allegan Co. Health Department 3255 122nd. Ave., Suite 200 Allegan, MI 49010 (269) 673-5411	Maternal/Infant Support Services, Vision and Hearing, Sexually Transmitted Infection - counseling, testing and treatment, Communicable Disease/TB control, Immunization and TB testing, Clinic for International Travel & Health Promotion Education. Lead Testing.
Allegan Co. United Way 650 Grand Street Allegan, MI 49010 (269) 673-6545	Information and referral services to local, regional and state human service agencies.
Bethany Christian Services 11335 James Street Holland, MI 49424 (616) 396-0623	Counseling services and therapy for individuals, child, adolescent, families. Pregnancy and adoption services.

<p>Children's Advocacy Center 12125 Union Street, Holland, MI 49424 (616) 393-6123</p>	<p>Services for abused children and their families.</p>
<p>Community Action House 345 W.14<sup>th</sup> Street Holland, MI 49423 (616) 392-2368</p>	<p>Clothing distribution, food pantry, community kitchen, homelessness prevention, guaranteed security deposit, home ownership counseling, case management, and doctors with a heart.</p>
<p>Greater Ottawa County United Way 115 Clover Street, Suite 300 Holland, MI 49423 (616) 396-7811</p>	<p>Provides information and referral services to improve educational success, household financial stability, healthy lifestyles, and ensures basic needs are met.</p>
<p>Healthy Kids Dental Program Department of Health and Human Services <a href="https://www.michigan.gov/mdhhs/assistance-programs/healthcare/childrenteens/hkdental">https://www.michigan.gov/mdhhs/assistance-programs/healthcare/childrenteens/hkdental</a></p>	<p>Across the state of Michigan, Healthy Kids Dental is available to children who have Medicaid and are under the age of 21. And finding dental care is easy with HKD, because eight out of 10 dentists across the state accept it.</p>
<p>Holland Community Health Center 336 South River Ave. Holland, MI 49423 (616) 394-3788</p>	<p>Provides high-quality, culturally sensitive, health care for men, women, and children regardless of insurance status.</p>
<p>Holland Hospital- Behavioral Health Services 854 South Washington Street Holland, MI 49423 (616) 355-3926</p>	<p>Outpatient and Inpatient mental health counseling services.</p>
<p>Ottawa Area Early On &amp; Infant Development Program 100 Pine Street, Suite 300 Zeeland, MI 49464 (616) 895-4303 or (877) 702-8602, ext. 4751</p>	<p>Early intervention for infants (ages 0 – 3 yrs old).</p>
<p>Ottawa Co. Community Mental Health 12265 James Street Holland, MI 49424 (616)393-5681</p>	<p>Provides managed mental health care to individuals, children, or families with mental illness or developmental disabilities.</p>
<p>Ottawa Co. Department of Health and Human Services (DHHS) 12185 James Street. Suite 200 Holland, MI 49424 (616) 394-7200</p>	<p>Child welfare services including: Children's Protective Services, Foster Care, Adoptions, Juvenile Justice and Youth Programs.</p>
<p>Ottawa County Department of Public Health 12251 James Street Holland, MI 49424 (616) 396-5266</p>	<p>Maternal/Infant Support Services, Vision and Hearing, Sexually Transmitted Infection - counseling, testing and treatment, Communicable Disease/TB control, Immunization and TB testing, Clinic for International Travel and Health Promotion Education.</p>
<p>Resilience Advocates for Ending Violence 411 Butternut Holland, MI 49424 (616) 392-2829</p>	<p>Domestic abuse and sexual assault/abuse support and advocacy services for all victims. Emergency shelter for victims of domestic violence. Formerly called the Center for Women in Transition.</p>