

Mustard Seed Medical Policies

Below are procedures followed by Mustard Seed staff in the event of an emergency or during the nOfficial course of the day. They are reprinted here for your information.

A. Nurse Consultant _____ Phone: _____

Address _____

B. Emergency Telephone Numbers:

Fire 911
Police 911
Rescue 911
Poison Center 526-2121

C. Hospital(s) Used for Emergencies:

1. Overlake Hospital Phone: 462-5200
1035 -116th Avenue NE, Bellevue
2. Children's Hospital Phone: 526-2222 (ER)
4800 Sandpoint Way, Seattle 526-2000 (Info)

D. Emergency Procedures

1. Minor Emergency
 - a. Staff trained in first aid will take appropriate action and refer to Multimedia Standard First Aid manual and/or the Childhood Emergency Quick Reference Guide.
 - b. Record incident on accident log kept in the kitchen.
 - c. Report incident to parent when the child is picked up
2. Life Threatening Emergencies
 - a. Staff calls 911.
 - b. Staff stays with injured/ill person.
 - c. As soon as possible, contact parent or emergency contact number.
 - d. Serious injury/hospitalization will be reported to the daycare licenser at 721-4092.

E. Emergency Procedures if Parent Cannot be Contacted

All attempts will be made to contact parents and/or emergency numbers listed on the child's registration fOfficial. In any situation where the parent or emergency person cannot be contacted, the Mustard Seed staff will proceed with Emergency Medical Personnel in the best interest of the child.

F. Health Records

Completed forms for health history, immunization records, consent for emergency care, authorization to take the child out of the facility, etc., are required for enrollment in the Mustard Seed.

G. Procedures for Isolating Ill Children

To prevent exposing your child, as well as others, to communicable illnesses, children will not be permitted at the Center with any of the following:

1. Fever of 101F (axillary) or higher.
2. Vomiting on two or more occasions within the past 24 hours.
3. Diarrhea three or more watery stools in a 24 hour period.
4. Body rash not associated with diapering, heat or allergy.
5. Eye discharge or pink eye.
6. Fatigue that prevents participation in regular activities.
7. Lice, nits, scabies and ringworm.
8. Sore throat-especially if accompanied by fever.
9. Appearance or behavior such as unusually tired, pale, lacking appetite, difficult to wake, irritability maybe sufficient to exclude a child from group care.

H. Handwashing

1. Staff will wash hands after diaper changes or toileting; after coming into contact with bodily fluids (stool, urine, blood, drool, mucus); before food preparation and before eating.
2. Children will be directed or assisted to wash their hands after toileting and before eating or cooking activities. Soap, running water and individual towels will be available for staff and children.

I. Diaper Changing

1. Staff person washes hands.
2. Staff person gathers necessary materials.
3. Staff person puts gloves on.
4. Diaper is changed. Children are not left unattended.
5. Diaper is disposed. Cloth diapers will be placed in plastic bag and sent home.
6. Pad/changing table is sanitized with chlorine bleach solution of 1T bleach/quart of water.
7. Staff person washes child's hands if he/she touched diaper area.
8. Staff person discards gloves.
9. Staff person washes hands.

J. Food Sanitation

1. Leftover food is covered, dated and stored in the refrigerator.
2. Foods brought from home are labeled with the date and child's name.
3. Baby bottles are labeled with the date and the child's name.
4. Eating surfaces are cleaned before and after use by the staff person responsible for the meal or snack.

K. Nutrition

1. Snack menu is prepared by the Program Director or designee, and posted weekly in the kitchen.
2. Snack menu is kept on file for at least 6 months.
3. Food allergies are posted in the kitchen to help with food preparation.

L. Injury Prevention

1. Program Director or designee surveys the facility monthly to check for safety hazards.
2. Records of each survey are filed in the office.
3. Hazards are reported to the school owner so that a plan can be made to correct the problem.
4. In order to identify problem areas, the Program Director reviews accident/illness logs every 6 months.

M. Disinfection and Laundering

1. Toys are disinfected daily or when obviously dirty.
 - a. Toys are washed with warm, soapy water and dipped in disinfectant solution of 1 T chlorine bleach to 1-gallon water.
Toys are allowed to air dry.
 - b. Toys that are dishwasher safe will be run through full wash and dry cycles of the dishwasher.
 - c. Cloth toys are machine-washed and air or machine dried.
2. Bedding is stored in hallway and bedroom closets. Mats are kept on closet shelves.
3. Mustard Seed laundry is washed weekly.
4. Bathrooms are cleaned daily.
5. General cleaning of the Center's facility and furnishings is performed daily by assigned staff.
6. Mop water obtained from the utility room is disposed of in the utility room. Cleaning agents are stored securely in the kitchen or on high shelves.