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Safe and Healthy Sleep for Infants and Young Children, in
partnership with Region 9 Head Start Association

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- [Jessica] Hello and welcome to Early Childhood Education at continued.com. My name is Jessica Lewis and I'm excited to welcome you to today's session titled Safe and Healthy Sleep for Infants and Young Children in partnership with Region 9 Head Start Association. We are very happy to welcome back Charlotte Hendricks to share her knowledge and expertise with us. Before we get started, let me tell you a little bit about her. Dr. Charlotte Hendricks has promoted health education for young children, families and teachers for over 30 years and pioneered curriculum development and evaluation for preschool health education. Nationally recognized as a leader in her field, her career has spanned, public health, higher education, headstart in research. She often presents early childhood programs in its state and national conferences, delivering high energy presentations to illustrate practical and cost-effective approaches to best practice national standards in issues facing today's early childhood staff and families. Charlotte served as editor for Healthy Child Care Magazine for 16 years and has published extensively. Welcome everyone, we are so glad you're here. Charlotte, I'm going to turn it over to you now.

- Thank you Jessica and I'm glad to be back here. Today we're talking about Safe and Healthy Sleep for Infants and Young Children. These are my presenter disclosures. And the learning outcomes for this webinar are that first to list ways to reduce the risk of SUIDs which is Sudden Unexplained Infant Deaths and SIDS. Describe how to ensure a safe sleep environment for infants and young children. So many people when they think about safe sleep and childcare you only think about the infants but we're going to talk about in childcare, infants through preschool. And describe the sanitation practices to reduce the risk of disease transmission. Let's start with the infant sleep safety. Now Sudden Unexplained Infant Deaths or SUIDs are deaths that occur suddenly and unexpectedly in previously healthy infants. So this is a term that you may not have heard of. Most of us have heard of SIDS, Sudden Infant Death Syndrome. SIDS is one subgroup of SUID. So the whole term of SUID that includes accidental suffocation. There are about 3,500 SUIDs in the U.S. each year. But you can't really

categorize all infant deaths as either SUIDS or SIDS. It simply means that an infant died, it wasn't expected and it's usually after you've put them down to sleep. So we're going to talk about all those incidents. Often the SIDS it may be coded as SIDS or it may be coded as accidental suffocation or just unknown. Some of the risk factors for SIDS. If the baby is premature or the baby is low birth rate then that baby is at higher risk. If the mother smokes during pregnancy or is around secondhand smoke then that's a great risk factor. Smoking during pregnancy or exposure to smoke during pregnancy, one of the side effects of that very often is low birth rate. So, especially if you're doing home visits or you have a prenatal program such as an early headstart where you're working with pregnant mothers or if you're home visitors going out, talk to them about that. If they're smoking or if their spouse or significant other or some other visitors, anybody in the family or in the household is smoking encourage them to not do that because it's really putting that unborn baby at risk. The sleeping space other than a crib is a risk factor.

Very often people will put the babies to sleep on a bed or a couch or anything like that and that is highly dangerous. If the infant is sharing a bed with other children or with other adults, that's a risk factor. That's where it becomes often a what they call a rollover deaths. So if the infant is in the bed, the adult goes to sleep and just suddenly yeah, you know, flips over and does that well, they don't feel the baby and then they push a pillow in front of the baby or anything else and so that sometimes is categorized though as SIDS when they do the death report. The quality of supervision at the time of death is a risk factor. Also, this one's interesting that obesity, fatigue or drug and alcohol use by a person who is supervising or sleeping with the child. So the obesity well, if you are a large person and you roll over on a tiny little infant, you won't know it. Also, even in the childcare environment, if the person who is charged with watching the babies while they sleep is exhausted herself which if you're caring for children you're probably exhausted some of the time. But you might just say, oh, I'm just gonna close my eyes for a second and you can't do that. Or if the person is under the influence of

drugs or alcohol, then their decision making skills are not going to be top-notch, so that is a risk factor for SIDS. Here are some other risk factors, infants sleeping on their stomachs. In 1994, that's when they started the Back to Sleep campaign and it's putting infants to sleep on their back. So most people do that now. You still have some people who believe that oh, you can't do that, the infant will throw up or, you know, all kinds of risk factors, that is simply not true. Unless there's a medical reason the infant should sleep on their backs. One of the greatest risk factors is if the parent is putting the infant asleep on their back at home, then they bring them to child care and if the child caregiver puts that infant to sleep on its stomach, then it just intensifies the risk. So just as practice always put the infants to sleep on their back. Soft sleep surfaces whether it be a chair or a couch or an adult bed, feather beds would be terrible, water beds. I don't know if anybody even still has water beds but any kind of soft surface is not a good environment for the baby.

Beanbag chairs would be one of the worst places you could have a baby to sleep. Loose bedding or toys or other objects in the crib is another risk factor because loose bedding, there have been instances where if the sheet on the bed is not tight fitting and it comes up on the corner, then the baby as he's moving around, especially when it's starting to roll over perhaps gets that bedding around him and it can cause suffocation. Toys, pillows, anything like that, bumper cribs, bumper pads in the cribs, all those things do not belong in the infant's crib. Also faulty design of the crib or the beds which could include loose hardware or cutouts, anything like that where the baby can get his head caught, it's dangerous. And here's another one that people don't think of but it's overheating. I don't know why people think that babies get cold but they're just like we are. With the baby, if he's just sleeping in footed pajamas and say he's all covered up like this, he's all cozy, he's fine. So you don't need to put blankets on him or three layers of clothing or anything else. That's even true when you have them out for a walk or you're going in the store or anything like that. I remember walking into Best Buy and there was this young man he was pushing his baby in a stroller and I

looked down at the baby and I looked at him and I said, your baby's overheating because he had come into a store while the man had taken his jacket off but the baby was still bundled up in a jacket with a blanket over him and in a stroller, like yeah, he's not that cold, you need to take some of those blankets and things off of the baby. Now, you need to lower the risk factors. One thing you can do when working with moms is to promote breastfeeding. So of course we want to promote it during pregnancy so that they're ready to begin breastfeeding when the baby is born. Now in childcare, we can help to encourage moms to continue to breastfeed. Breastfeeding can be an uncomfortable situation, especially for new moms who haven't done that before and they may feel like oh, I'm nervous about doing this and it's not going to be easy. We need to make it easy for them.

So provide breastfeeding mothers a comfortable place within your childcare environment with privacy, comfortable chairs, plain blankets and access to electrical outlets because they may be pumping. And another thing to do is to encourage families to schedule and go to all well-child visits. So if that infant is supposed to go back at one month, in two months, three months, whatever the healthcare provider has suggested, encourage the parents to make and keep those appointments to be sure that everything's okay with the baby. And very important to keep the environment smoke free and that includes your childcare staff vehicles and their clothing. Cigarette smoke just sticks to you, it gets in your hair, it's on your skin, it's on your clothes and when you're holding a baby up close that baby is right there smelling whatever is on your clothes. So keep that environment, not only the childcare environment smoke free but know your childcare workers, do they smoke? Are they living in households where there is smoking? Well, if so, then they need to be sure they have freshly laundered clothes when they come in. Perhaps give a lab coat or some other tunic that they put on that is clean, that is not exposed to smoke, so that whatever they are wearing when they're holding that baby, there's no smoke there. The same is true for other fragrances, perfumes, colognes, bath salts and some of those things. There's a lot of

fragrances and infants just don't need all those fragrances because they can become irritant especially if the baby has anything respiratory going on normally in their life and then you add that to it, it could cause problems that could then lead to that unexplained infant death. So that's what we want to do is protect these babies at all times. Look at your sleep position policy for your childcare program. Infants should be placed on their backs for every nap or sleep time. It's not just oh, I'm putting him down for two hours he's on his back, oh, it's just five minutes. No, always on their backs. If you have an infant, though, that he's getting a little bigger and he's starting to roll over and every time you put him on his back, he rolls over to a side or his tummy, then that's okay, he's ready for that. But you start with the infant on his back and then if he wants to move, let him move, but you're constantly watching him. Now, if there is a reason to have the infant in any other sleep position then you should require a signed waiver from the child's primary health care provider, that child's doctor if an alternate sleep position is required. Now this should not just be because the mother or the father wants it, it should be a medical reason. Anything other than on the back is medical reason.

Let's talk about the crib safety. What's interesting as I was working with Jessica on this PowerPoint and we were looking for some illustrations to put in that showed safe cribs. You can't find any in pictures because everybody wants these cute cribs with bumper pads and frou-frou stuff and mobiles and no, that's not what they need to be. It needs to be a place for the baby to sleep safely. First of all, every infant should have his or her own crib. You do not have five cribs and six babies. No, if you've got six babies, you have six cribs. Cribs are only for sleeping. They're not for playing, they're not for putting the baby in here while I go do something else, cribs are for sleeping. So there is no reason to attach a mobile or any play equipment to that crib. If the infant falls asleep in a safety seat, a chair or other furniture or equipment or perhaps the baby was sleeping in his car seat, and I love the car seats, the safety seats that we have now because you can do so many things with them. You can just push a button, unhook it,

bring the baby in, he comes in his little carrier, he snoozing on but as soon as he comes in, if he's still asleep and the mom says, oh just let him sleep. Right, you can let him sleep in the crib, take him out of that car carrier and put him in the crib on his back. When you purchase a crib, back in 2011 a lot of changes were made to the crib design, the crib safety so the CPSC which is Consumer Product Safety Commission in 2011 established these new guidelines and requirements. So at this point, if you buy a crib from a big box store or a department store and you know it's in the U.S. and you're buying a crib, that's from the U.S., it should meet those standards. However, if you are shopping, yard sales or somebody says, oh, I've got a crib that my child's grown now and you can have this crib, you need to look into that crib and see what the date is when it was purchased, when it was manufactured because before 2011 it is not going to meet those safety standards.

So be very, very cautious of any donated or secondhand cribs that you might acquire. Read the instructions, that's another reason to purchase the crib new because it does come with a manufacturer's instructions. A lot times cribs can be broken down so that you can store them until the next baby and then the next one and the next one comes along. So be sure that you have assembled the cribs properly and that all the hardware is securely fastened. Make sure all those screws and bolts are tight. Do not use a crib if it is broken or if it has been modified in any way. So if someone said, oh this headboard's a little too high, I'm going to cut it down, you cannot use any kind of modified cribs. Evacuation cribs are also important in the childcare environment and I'll talk about that in a later slide. But if you have evacuation cribs, they can be used for sleeping just like your regular cribs and they must also meet the CPSC 2011 and ASTM standards. If it's meeting CPSC standards then you're okay. On your cribs the mattresses that are in the crib should be supported completely. So make sure that they fit in there, that they're firmly supported underneath the mattress so they're not going to slip or slide or fall in and they should be very firm and they must fit tightly. So gaps no longer than two fingers between the crib and the mattress. The good thing is that

makes it much more safe. Sometimes difficult part about that is it makes it really hard to change those sheets sometimes because you're trying to wrestle with that tight crib. If sheet goes on too easily and the mattresses loose, you need a new mattress that fits better. So it should be very tight and secure in that crib. The crib sheets must fit securely. So when you buy the sheets get the proper size, they should be almost difficult sometimes to get on. I remember that from trying to change the crib sheets in the middle of the night. You know babies wet, they do things and two o'clock in the morning you're changing your crib sheets and it's difficult but you want crib sheets that are on there. Once they're on there they stay, the elastic around the bottom is secure and they aren't going to slip off. Avoid any blankets, pillows, bumper pads or stuffed toys. When these recommendations came out, it was a little difficult for me because I grew up in a generation where we had the cute bumper pads and we had the little receding blankets and baby blankets that your mother or your grandmother made and they were just so pretty and you felt good when you use them.

And then I'd walk into a childcare and there's a crib with a mattress, period. Has a sheet on it, that's it, nothing else. And it does look a little institutional to me but it's safe and it's what they need and that's how it should look when you go in and look at a crib. You should have a good sturdy crib with a firm mattress fitting in there and a nice clean sheet right on it, nothing else. The room that the babies are sleeping in and of course the caregivers in there with them, it should be a comfortable temperature for an adult in lightweight clothes. So if you're the caregiver and you're wearing like what I have, just a nice, I've got a short sleeve shirt on and some jeans. And if the room temperature is comfortable for me then it's going to be comfortable for the baby. Dress the infant in footed pajamas because those little feet and toes can get cold and they're just dressed in only perhaps one more layer that I'm wearing. So while I'm wearing a thin short sleeve shirt that infant might be in a little warmer, a little heavier cotton or plan with something, footed pajamas. So they don't need a blanket, they don't need a lot more clothing than we do. Swaddling infants is something that it's been around for

generations. And a lot of parents swaddle infants. And sometimes there's a reason for, especially preemies or in the first month they're home, you might want to swaddle them because it helps them to sleep, it gives them a nice, cozy feeling. But in the child care environment, it is not necessary and it's not recommended. If the parents swaddle babies and they're doing that at home, they need to make sure that they're doing it correctly that the swaddling is not too tight. And when a baby is old enough that he's trying to roll over then you stop swaddling. If a parent says I normally swaddle my baby at night to help him sleep and I want you to do that in childcare, be aware, it is not recommended. So you deal with everything on a case by case basis. It may be there's a medical reason that it is needed but you need to check that out on an individual basis and it's not something that's recommended generally. Let's talk about where to place the crib.

Let's talk first about where you do not want to place the crib. Don't put the crib right beside the door if parents come into the room. Now a lot of childcare is the parents bring the child into one area, receiving area and they never actually go into the baby's room but other childcare or home childcare environments, the parent comes right in and brings the baby in and the cribs are right there. The reason I say you don't put it right beside the door is because that's where my child's crib was and I walked in one day and I looked and there was a rock in his crib. It wasn't very big rock, but it was still a rock and I'm like, ooh, why is there a rock in my baby's crib? That's a good choking hazard, I don't wanna rock in his crib. It turned out that another parent coming in had baby in one hand and diaper bag in the other hand and set the diaper bag in my baby's crib. Well, she put her baby someplace else. So I told them to move my baby's crib. But you need to be sure that parents are not coming in or staff members. You don't come in and set your person to crib, cribs are only for the babies to sleep and nothing else ever goes into the crib, nothing contaminates the crib. Do not put cribs under shelves that are holding objects or near unsecured cabinets, anything that could fall and injure the child, you don't want the crib there. Especially in Californian areas

that are prone to earthquakes and ground tremors, you don't want anything holding objects or if you're even near train tracks or anything else where there might be vibration, sometimes those objects they just generally start to move towards the edge of the shelf and then when you're not expecting it, they go over the edge. So not near any unsecured furniture, cabinets or shelves. And of course do not place cribs anywhere near hanging window cords, electrical cords, baby monitor cords or strings such as the mobiles because in that string, you know, it's just around the baby's neck and then you have well, you would know what caused the strangulation. It wouldn't be an unexplained death, that it would be an unexpected one, you do not want that. Now on the evacuation cribs, as I said, they can be used for infants to sleep in and you need to have enough evacuation cribs for the number of children that you are caring for.

So while your cribs may all be in the infant room. If you also were caring for toddlers, let's say you have five infants and you also have five toddlers in the other room, you need two evacuation cribs in that infant room so that one can be used to put five infants in one and you put five toddlers in the other one and you can evacuate those children very, very quickly in case of an emergency. When you are setting up your sleep environment, always think about what if, what if there were a fire? What if we had lockdown? What if there were an earthquake? Any kind of emergency situation that could occur, can I get these infants out of the room? Can I get these infants, toddlers and preschoolers out safely? So that's what evacuation cribs are used for. And again, be sure that they meet all the CPSC standards. Now you place them for easy access to the doorway. So again, I do not recommend putting cribs right beside the door but those evacuation cribs should be the ones closest so they do have easy access to the doorway. Pacifiers, I just love pacifiers. They were my lifesaver when my child was an infant. I counted one time we had 14 pacifiers in his crib, we got a good night's sleep that way, if he, you know, one fell out, he just reached over, he could always find another one and 10 years, 15 years later, we were still finding pacifiers occasionally behind a drawer or under a chair cushion. I love pacifiers. And some babies like them,

some babies do not. There is some limited research that shows that pacifiers may reduce the risk of SIDS. It says even if it falls out after the infant's asleep because as they're sucking on that pacifier, they're doing that kind of motion, they're swallowing and it's part of their development. So that sucking reflex is a very healthy reflex for babies. So it may or may not reduce the risk of SIDS. If the baby doesn't want one, don't force it but if they maybe does like the pacifier, I'm all for them. I've never seen the kid that had to go to college with this pacifier, they will outgrow them eventually. So if parents are worried about that, pacifiers are a good thing. But in the crib, you can just have the pacifier loose, it does not need to be attached to the baby's clothing. And certainly if you are attaching a pacifier, it should be on that very short ribbon. You can get really good pacifier clips that will clip to the baby's clothing, short string that reaches the mouth easily. I saw one of the worst pacifier clips I've ever seen when I was on a flight coming from Europe and I looked over and they had a pacifier that honest, it wasn't a string, it was on a little length of beads and then it was pinned and I thought, okay, the pin's going to stick the baby, if it breaks those beads are choking hazard.

So there are different products they're sold by craft people or in other countries that are not considered to be safe. So in the crib, the pacifier should not really be attached. Never prop bottles or allow an infant to take a bottle to bed. The problem is while they're sleeping or they go to bed, they got that bottle, it goes back in their throat, they can choke on it, also there's research to indicate that it can add to, increase the risk of ear infections. So you do not want to ever let a baby take a bottle to bed even if it's only water in it just not a practice that has ever done. Sleep supervision. There needs to be a caregiver who is trained in safe sleep practices, always present and alert during nap time or when babies are asleep. That is not a time for you to take a break, don't be playing on your phone and playing games, don't be talking on the phone or anything like that. You're there to take care of these infants and that's your job and that's what you should be doing. So you're constantly going, checking on them. If by some miracle

all the babies are asleep at one time, wouldn't it be wonderful and you've got the lights turned down a little bit, the room lighting still has to allow you to walk over and see each infant. See their face, their skin color, check on their breathing. So position your cribs so that you can easily access and visually as well as pick up the babies, it's has to be easy for you, the caregiver to check on each infant. Let's talk a little bit about sanitation and I'll also talk about this later in this webinar when we talk about the toddlers and preschoolers. First thing in sanitation is that each child has his or her own crib. You should clean and disinfect the cribs weekly or anytime they're soiled. Or if for example, you have one set of children that come in the morning and you have different infants that come in in the afternoon then you must clean and disinfect those cribs between use by different children. You should follow your current local, state and federal recommendations for sanitation, that's a challenge at this time. I've done a lot of training on sanitation in childcare and I used to talk about cleaning, sanitizing and disinfecting.

Well, COVID-19 has changed everything. You clean and you disinfect, there's no such thing as the sanitation now, it's called disinfection. And it seems to be changing on a regular basis. I'm sure that many childcare and headstart programs have been closed due to the COVID-19. As you reopen, follow your local, state and federal recommendations for sanitation as you reopen and be aware. Until then, one of the references that I had at the end is the Caring For Our Children standards for health and safety and that's what I generally present. But be aware that those are not updated on a daily basis, I'm sure they will be updated as we go through COVID. But for now, follow anything that you hear from your health department, your state and local, federal recommendations. Finally, be sure to advise parents about safe sleep. You're doing everything you can to keep these infants safe while they're in your care in childcare but it's also your responsibility to work with parents and help them to be comfortable with and to know as much as they can and do practice safe sleep at home. Room sharing is advised for the first six to 12 months but be sure they understand that room sharing,

that means you can have a bassinet or porta crib or the crib in your bedrooms, that does not mean bed sharing. I have seen advertisements for a safe bed share, it's like a little box that you put in the bed with a parent, that idea. Depends on how it would be made but I would never do that with an infant because if the infant's in your bed even if you've got a little box around them, it is not safe. So discourage that, babies need to have their own crib. Never place an infant sleep on a soft surface whether it's in the childcare or at home and encourage parents, it's okay to bring the infant into your bed that you're feeding the baby or breastfeeding, you're comforting a child that's crying. But if there's any possibility that you the parent may fall asleep, then it's important that when you're in that bed with that baby that you're propped up with no pillows around, you know sheets or other items that could possibly cover your infants face and neck and or overheat the infant. But if you're really tired and I know that happens, it's the middle of the night you get up, you're feeding the infant but sometimes you'll go to sleep.

So just be sure that your bed is also as safe as can be in case you fall asleep. Best thing is, don't fall asleep, put the infant in their crib. Let's go to toddlers and preschoolers and their nap time. As with the infant, it's essential that every child have their own cot, sleeping bag, bed, mat or a pad, you do not share those. Children should not sleep on a bare, uncovered surface. So just because you have carpeting that does not mean it is a good sleep area. They need to have a mat or a cot or something else between them and whatever little covering you have. If your floor is cooler than 65 degrees such as it's a concrete floor and it's in the winter, you know sometimes floors just feel cold, then the mats and sleeping bags should not be placed directly on that floor, they need to be on an elevated cot. All the furniture and sleep surfaces must be in compliance with the current CPSC and ASTM safety standards. You can always go to the CPSC website and just type in childcare cots, mats, sleeping. There's a lot of different terms you could use if you're wanting to see what those safety standards are. And be aware of any recalls. So if you had purchased a

crib or a cots or beds, and there's any chance that it may have been recalled, just put that on your email list, get onto the CPSC recalls and be aware of anything that comes up. Now toddlers and older children may have small pillows or they may have special sleep toys. I'm gonna back up here because I want to show you something. When I say sleep toys, how about this one? Don't you just love this little guy? He's all round and fuzzy, he's got a smiley face, everything sewn on. If a child brings a sleep toy with them, be sure that it is a safe one. So no button eyes that are going to come loose and be a choking hazard, no strings on it. You want something that's nice and safe. Also, I have my little pillow here. This is a little travel pillow, cute little pillow case for it. But if a toddler wants to have a small pillow that's okay. Not in the infant cribs but we're talking about toddlers and older children now. All right, placement. This is something else that may change with COVID-19 in reopening guidelines, so be aware of that. But the Caring For Our Children guidelines are that cots or mats are placed at least three feet apart. And then as you're placing them, you place them head to toe so that one child's hand is here then there, that's the other child's feet, head to toe. By doing that it reduces the transmission of respiratory secretions through breathing or coughing and it also reduces the interaction between children you know, otherwise you just oh, they talk, talk, talk, talk and there's no nap time.

So you're reducing that interaction and promoting the settling down and relaxing for sleep. Also, this three feet ensures visibility and easy access to children. And you must always had clear pathways to the exits. Anytime you're setting up your childcare environment, whether it's for play time, food, eating, nap time, always be aware of emergency procedures. And it's a good idea to even occasionally have a fire drill or something during that time so that you can see how are children going to react when they are awakened and the fire alarm is going off. Will they be able to get out safely and are they going to be disoriented because they've been asleep? And it's also important for the staff to recognize this. So as you do emergency drills, just keep in mind that nap time is also part of the entire childcare day and you should always

prepare for that. All right, just like with cribs you don't put them near windows and cords. With toddlers and preschoolers they're going to be curious about other things. So as you can see here with this picture I've got. You look at this, this is an outlet and I've got the little, these things, those little caps they fit in, they stick right into your outlet, they're very easy to use. But as you notice, this one is not correct because you can see that the hole right there, it's a three prong outlet is uncovered whereas this one, all three holes are covered. So when you put these on, there is a right side up, there's a wrong way to do it, so put that on. If now this one, there's an outlet behind there that's not ever used. So it simply has a solid face cover on it. If you have outlets near their nap area and you're not using those outlets, then have some type of cover on there that the children will not play with. Children, child it's not sleeping, is going to find those little plastic things like this and they're going to pull them out and play with them so make it so they can't do that. I remember we had one child in Head Start and she was over there and I was just in observing the room that day but she was laying there on her mat, very happily just plugging and unplugging the record player or whatever, appliance, it was right there but she was just happily playing with it, plugging it in, unplugging it.

So I brought it to the teachers attention and he moved that appliance. Also with placement. Again, with all of the concern about respiratory diseases and transmission, people are coming up with a lot of different ways to provide separation. So we're seeing the Plexiglas in front of all of the cash registers and between office cubicles, but in childcare that is not what we're doing. You do not want to get screens to separate sleeping children. If you have screens up between the the cots or the cribs or anything, you won't be able to see every child. You can't just stand in one place and look around and see everybody. So they're affecting your visual supervision, they also will interfere with your immediate access to the child and they could potentially injure a child if they fall over. And screens like that, especially at the folding screens, they can fall over quite easily. You need to always have clear pathways to your exits. So when you place in

your cots or your mat and again practice emergency drills to see how everything works. Now your storage. So a lot of different types of cots and beds and all that you can buy and fortunately the ones that you can purchase now they stack neatly on top of each other and that way it saves space. I have seen cots that were not stacked securely and then just kind of propped against the wall, that's not a good situation. You want to be sure that when the cots are not in use they are stacked, they are out of the way, they will not tip over, they are not in the pathway, they're not in the area that children are playing. So they may be a corner of the room that you have but always have those cots stored securely. Now, each child's sheets, blankets, pillows, if they have their special sleep toys, those should be stored in the child's individual cubby. You don't throw them all into a big basket or hang them on hooks where they're touching, they need to be secured in a child's cubby. If you want to have little cloth bags that you put everything in and hang those bags that's different, but find a way that you can store these and keep them separated from other children's.

Okay, we're gonna talk about sanitation again. Your mats and your cots should be made with a waterproof material that can be easily washed and disinfected. And if you have pads they should be enclosed in washable covers or you can get the quilted pads with a little built in pillow and you can throw those into the washing machine. Be sure that the sleeping pads are long enough for the child's full length. So you don't want their head hanging off the end or their feet hanging off the other end. So get them so they're long enough. Provide clean sheets and sleep garments or blankets to maintain adequate warmth for your toddlers and preschoolers. If you have pillows, they should have removable and washable cases. And now with your sleep items, whether it's the pacifier that's asleep item or you know, my friendly little guy here, where's your space? There he is, hello. Whatever it is like that, it's only used at nap time. So a child may have their favorite blankie or Lammy or ball or whatever it is that he or she wants to sleep with and you tell them, "It's okay, nap time you can get Fred out of the closet "and sleep with Fred but when that time is over, "Fred goes back into the cubby,"

because you don't want to be sharing those personal items. Also asleep item like that is very special to that child, it's his and his alone. And so children learn to share when they're in childcare and they're sharing all of the things that are in the childcare environment. But they don't have to share and we don't want them to share their special sleep item. Not only because it's good for them, it's their security thing but also you're reducing the disease transmission. Again, the state, local state and federal recommendations for cleaning may change in response to this COVID-19, so [cdc.gov](https://www.cdc.gov) is the best source of information that we have at this time and it's updated regularly. So I recommend that you go to that, [cdc.gov](https://www.cdc.gov) and just look to see what different recommendations are out there. And you should create and follow a daily checklist for cleaning and disinfecting surfaces. So, normal routine cleaning with soap and water is the best thing you can do. Soap and water, you know, you have a scrubbing, whatever you're doing out here, how you're doing, whether it's laundry detergent, you're throwing things in the laundry or you're wiping off the cart with soap and water, that's going to decrease germs, it kills a lot of germs. It doesn't kill every germ but it's killing them and it's removing them. So wash and disinfect the cots and the bedding weekly and when soiled or between uses, if it's used by different children and then launder the items according to the manufacturer's instructions.

So we want you to use the warmest, appropriate water and dry the items completely. Again, it comes up about the fragrances. You don't need to have the laundry detergents that have all the lasting fragrance, it will stay there for a month. No, there's a reason that when you go into the baby department and you're looking at the different products, they have laundry detergents that are free of any fragrances and gentle for baby skin, they give you all these wonderful little marketing things but what they're saying is there's no fragrance in it, that's a good thing. Same thing with toddlers and preschoolers, if you're washing things, you don't need fragrance because some children may have asthma or other respiratory illnesses or allergies and those fragrances can really cause some problems that we don't need. Now, the most of your

common Environmental Protection Agency, EPA registered household disinfectants are effective for disinfecting. They kill 99.9% of germs, you can read it on every bottle will say that kills 99% of germs. There's always one little germ that can possibly get through but most of your EPA registered disinfectants are effective. Now, other disinfectants can you use? The first one. If you think about it, good old bleach. Bleach has had an interesting history in child care because in teaching about sanitation, I used to always talk about the bleach solution and how easy it is to use. But then in the last 10 to 15 years, people were going away from bleach and they wanted to use what's known as green sanitation. And so different products for coming out. Now with the environment that we're in now you're hearing a lot more about bleach. Bleach is an excellent disinfectant, a third cup of bleach edit to a gallon of cool water and that's what you use. Notice it's cool water, not warm water or hot water. A couple of things you have to do though, you have to mix the bleach solution daily. It breaks down after about eight to 10 hours. If you have it sitting in sunlight, it breaks down. But if you're using bleach solution and I'm not saying that's what you should use, I'm saying that is one of your options and it will kill germs. But if you use the bleach solution then you put it into a spray bottle, you must label that bottle clearly, bleach solution, put the ratio on there and then this should be stored out of children's reach. There are other disinfectants you can use. And we're hearing you probably have a hard time finding them if you'd look for them in the stories but isopropyl alcohol, rubbing alcohol. Now if you look at this when it says 91%, most of them will be 70%. It's interesting with the alcohol because 70% alcohol is actually more effective at quickly killing germs than the 91%.

So alcohol when it's at the manufacturers and bottled, they mix it with a particular type of purified water. So it's not that you can just add water to it to dilute it. This is when you buy these, don't make your own, don't try to make your own solution. Try and find something that has been appropriately calibrated for actually killing germs. But the difference in the 70 and the 91 is it 70% it will kill germs in about 10 seconds. If you

use the 90% it actually, the germs recognize it as oh no, here's something that's going to hurt us, let's protect ourselves and they actually form a protective coating. So while it will kill germs, it takes longer. So that's why the 70% is perfect. And again, you can just pour the alcohol in a spray bottle and you can spray it. A couple of the pros and cons on this. Now, the bleach it's very inexpensive, easily accessible, you have to mix it every day, so it's a good disinfectant. The disadvantage to bleach though is that some children or adults, it may be an irritant to them, their respiratory, just the smell of it and you have to mix it every day. The pros and cons of the alcohol. Alcohol, well let me back up. Bleach, it takes anywhere from 10 minutes to up to an hour for it to kill germs, so you have to spray it till it's wet and then let it work. With the alcohol, advantages to alcohol is at the 70% or so it will kill germs in about 10 seconds, so it's very quick, you don't have to mix it with anything. You can put it in that model to keep it there, just keep using it until you've used up what you need and one of the disadvantages to alcohol is it is flammable. And if you continue to use that alcohol, like you've got a particular service that you're disinfecting continually throughout the day, it can cause some damage to rubber and certain plastics. Now, another disinfectant. Some of our local distilleries here in Kentucky have gone from moonshine to sanitizer, it's been a very interesting process. But this is this is alcohol antiseptic, 80% topical solution. So it's hospital grade sanitizer, it's the ethyl alcohol. And no, you cannot drink it even though it's being processed by a distillery. Do not drink the alcohol, bad thing, do not drink it. It is a disinfectant just like your isopropyl or your rubbing alcohol. But that is a solution that you may find and again, just put it in a spray bottle, it's going to kill the germs just like the isopropyl alcohol does.

So it's another solution to your disinfecting process. Remember, never ever combine any cleaning or disinfectant products. Bleach especially when it's mixed with different products, especially ammonia it causes toxic fumes, you do not ever mix cleaning or disinfectant products. And keep all of your cleaning and disinfecting products out of children's sight and out of reach. And after all of that, you have to relax. So remember,

nap time is when children are getting to relax and de-stress and that's what you want to help them do. So as you think about you're putting the babies down in their cribs or you've got the toddlers going into nap time, have some transition there, play some soft music, turn the lights lower, do not turn the lights out but you can just dim the lights a little bit, read a story. You have a little routine on nap time and help the children relax and de-stress. And the most important thing for children to know is that it's okay you can sleep now, I'm watching over you. So you're helping them to relax and to feel safe and secure and it gives you a few minutes to sit back and say, I'm doing a good job and the children are safe and life is good. Some of the references that I used to this, healthychildren.org is a good one. That's an organization, it's affiliated with the American Academy of Pediatrics. The Caring For Our Children, CFOC three, that is the guidelines for out of home childcare, health and safety. Again, these may change with all of the changes from COVID but they are excellent guidelines not only for safe sleep, but other things. The Head Start website you can go to type in sleep resources and get good resources there. If you want to check out CDC, the Centers for Disease Control that is cdc.gov. If you type in COVID-19 Reopening Guidance for Cleaning and Disinfecting that's where I found some good information on how to clean and disinfect. And then EPA, the environmentalprotectionagency.gov they had six steps for safe and effective disinfectant use. So again, thank you so much for coming and watching this and I wish you all a good day and happy nap time with your children.

- [Jessica] Excellent. Thank you so much Charlotte. I did have a question that I wanted to ask. When you were talking about the toddlers and preschoolers and the temperature of the floor, if it's a concrete floor to have a mat or something. I know personally, I don't think those little mats and the kindergarten mats and things like that would be very much protection, I wouldn't wanna sleep on that. So if a facility just has mats, is it okay to just use a mat instead of a cot if they do have that hard or concrete floor as long as the temperature is warmer?

- It's not recommended. There's no restriction on that. I looked up with the Caring For Our Children and some other resources to see what is the best thing for nap time and the only restriction was that if the floor is cold, you cannot put the mat directly on it. But especially if you look at your pre-K programs, if they're in the public schools, they don't have cots, they just say, oh, it's nap time. It's at least a little better than what we used to do which is put your head on your desk and take a snooze. But there's no restrictions on that other than the temperature of the floor. I agree with you though. It's much better if they are elevated on a cot, it's safer, less disease, you're not putting the mat right where all of the children's shoes have been. So I do agree with you on that but I did not find any restriction.

- [Jessica] Okay, that's good to know. And then another thing thinking about the disinfectants because with COVID and for those of you that are listening and it is past 2020, as we're recording this we are in the middle of the COVID-19 outbreak which is why Charlotte made several references throughout. But as of right now, we're using a lot of different sanitizers, we're using hand sanitizer. Any suggestions if the teacher or children have reactions to bleach solution or any kind of the sanitizers cleaning agents, any suggestions if there's reactions or allergies such as that?

- That's an excellent question. The first thing is that you should know the children who are enrolled in your program and do a thorough enrollment process of asking does this child had any allergies, asthma, any prior problems that we've note, that you've noticed as a parent that your child reacted to anything? If you know that you have a child who has any type of respiratory problems or an allergy to things like that, then you would want to avoid probably the bleach. The alcohol as a disinfectant does not have a strong fumes and is maybe less likely to cause the irritation but you need to check with the parents and if a child does have something then also check with that child's doctor. With your cleaning, do not use fragrances. So sometimes when you're mopping the floor, there's some that I've seen in the stores and I walked into a Head

Start program where they work, mopping the floor and I thought, well, it smells good but it certainly does smell a lot of good here. They were using a cleaning supply that was full of perfumes and that is going to trigger irritation not only in children but also in adults. The reason that you're constantly watching children while they're napping, checking their skin color, checking their breathing looking for anything, if you started noticing that a child does not seem to be doing as well as he should be, he's coughing, sneezing, no sound stuff, anything like that, then there might be a reaction to all of the cleaning and disinfecting products that we have. And in that case, best thing for that is going to be ventilate, ventilate the room and remove the irritant as much as possible. And think what have I been using that could possibly be irritating this child? So is it that there's somebody who's come in and there's smoke on. A visitor may even come in and their clothing smells like smoke and that can cause irritation or it could be that in the hallway they're doing disinfecting. When you are disinfecting, do not use the aerosol sprays like the Lysol that comes in a spray can and people go, they spray it all over the place, it's not going to help with killing germs and it is an irritant and it can cause a lot of problems with the breathing and the respiratory and a lot of reactions. So that's the reason when you are disinfecting use a pump spray bottle like this because then you can trigger where it's going, it's not being airborne as much.

- [Jessica] Great. And I was thinking kind of along those lines. I just wanted to mention when you talked about placement of cots and cribs and things like that, as well, as you know, you were talking about things smelling of smoke and if children come in and their diaper bag or backpack smells with smoke, I know personally, I'm very sensitive to cigarette smoke. So if that were to come in and a child's cot were placed near those that could also have an effect. So that's just another thing to be aware of. So I appreciate you bringing all of those things up. This was great and very timely, although something that will be used continuously and say sleep is needed for all ages. So thank you so much Charlotte. We appreciate you sharing all of this great information. Thanks to all of you out there for joining us. Everyone have a great day.

- Thank you.