

If you went home tonight and heard on the nightly news about an outbreak of a deadly flu virus and realized that you had sent a child home with the same symptoms that day, would you panic and freak out? Or would you feel calm and assured because you know that you ALWAYS follow the correct procedures to prevent the spread of communicable disease in your classroom?

**You don't catch a cold from being out in the cold.** And despite what many people think, bacteria do not cause colds, viruses do—some 200 different strains of them. Coronaviruses are responsible for most colds in winter and early spring. Any virus you're exposed to spreads the same way—by direct contact. If someone sneezes or coughs in your direction, you can breathe in the virus. The virus can also survive outside the body for up to three hours—on toys, tabletops, keyboards, hands, and other surfaces you and the children are likely to touch. If you pick up the virus and rub your eyes or nose before you wash your hands, you've given the bug a free ride to your mucous membranes where it will start replicating with a vengeance!

All young children are susceptible to illness because they have not yet been exposed to many of the most common germs and they have not built up resistance or immunity to them. They also have habits that promote the spread of germs. Close contact between the large number of children in the child care setting increases exposure. They rub their eyes. They use their hands to wipe and pick their noses. They do not wash their hands often enough or well enough. **Bottom line: more kids = more germs!**

**Two of the Major Ways for the Spread of Illnesses or "Routes of Transmission"** 1) Through direct contact with the infected person's skin. Skin infections such as impetigo, ringworm, herpes simplex, scabies and head lice are examples of illnesses and infestations that may be spread by direct contact with infected skin area and fluid from infected sores or infested articles.  
2) Through the air or "respiratory transmission" (passing from the lungs, throat or nose of one person to another person through the air). Respiratory illnesses such as the common cold, measles, whooping cough, chickenpox, flu, meningitis, strep throat, etc., are all spread through microscopic, contagious droplets of fluids from the nose, eyes or throat. When an infected person talks, coughs, sneezes or blows his/her nose, infectious droplets get into the air where they can be breathed in by another person. Droplets can also land on hands or objects such as toys or food, and can be touched, mouthed or eaten by other persons. When the germs in these infected droplets come in contact with the nose, eyes or mouth of an uninfected person, they can multiply in his/her nose and throat and cause infection.

**Most illnesses are contagious before their signs and symptoms appear.** It is possible to pass the germs without having the symptoms and/or to continue passing them even after recovering from the illness. **Good hand washing is the first line of defense against the spread of many illnesses**, from the common cold to more serious illnesses such as meningitis, bronchiolitis, influenza, hepatitis A, and most types of infectious diarrhea. The fingertips, between fingers and the backs of hands are the areas most frequently missed by both adults and children when they wash their hands. **Teach children to wash their hands making enough suds to completely cover their hands with "bubble gloves" and to rub front, back and in between for 20 seconds. Some teachers mix half soap and half water in a squirt bottle so the kids can make their "bubble gloves" while they are waiting in line for the sink. Then when they get to the sink, they just need to thoroughly rinse their hands.** Antibacterial soap is not required or necessary because both bacteria and viruses are common causes of illnesses, and antibacterial soaps are designed to kill bacteria—not viruses or fungus. They are not usually applied in a way that allows them to work properly, since they are not left on the skin long enough before being rinsed off. There is little or no evidence of the antibacterial products offering any additional protection against bacteria. On the contrary, antibacterial products may add to the existing problem of antibiotic-resistant bacteria.

**Another great idea for the classroom is visit the thrift store for plastic tissue box covers.** The decorative ones can be pricey, but are drastically marked down at the thrift store. Think about it, children do not usually reach for a tissue until after they have sneezed or their nose is running and they have wiped it with their hand. You get the picture. Then they spread germs to the tissue box. A cardboard tissue box can be one of the germiest places in your classroom! A plastic tissue box cover can be cleaned and disinfected a few times a day as you are also wiping down doorknobs, keyboards, tabletops and toys. Keep a separate tissue box for yourself out of children's reach.

**Disinfecting is the third step in sanitizing after washing the item with water and soap. You can NEVER wipe anything to dry it - except your hands of course. Sanitizing requires a four-step process. For the sanitizing process to be effective, you must follow these steps in order:**

- (1) Wash with water and soap;
- (2) Rinse with clear water;
- (3) Soak in or spray on a disinfecting solution and allow to sit for at least two minutes. Rinse with cool water only those items that children are likely to place in their mouths; and
- (4) Allow the surface or article to air-dry.



Preventing colds and flu shouldn't be an afterthought, as they can quickly spread through the entire class once one child is infected. The best prevention is protection – and fortunately, there are things you can do to help yourself, your family and the children in your classroom stay healthy.