

## BUILDING A BUSINESS

### Prevent killer staph infections

A dangerous germ, originally found only in hospitals, is turning up with greater frequency in schools and day care.

Methicillin-resistant *Staphylococcus aureus*, or MRSA (pronounced mer-sa), is a type of staph bacterium. Staph bacteria cause skin and tissue infections, such as boils, but this particular strain has become resistant to a group of antibiotics known as methicillin, which includes penicillin.

MRSA turns minor abscesses and other skin infections into serious problems. If not treated quickly and aggressively, an MRSA infection can spread into bone and vital organs, threatening life.

MRSA, like other types of staph germs, is carried unknowingly, often in the nose. It is spread by direct contact of the germ with a cut or scrape in the skin or during contact with a contaminated object, such as a towel or toy.

### Prevent the spread

Health officials urge school and child care facilities to prevent the germ's spread by following simple guidelines.

### No better than ordinary soap

A recent study at the University of Michigan suggests that buying antibacterial soap is a waste of money. They're no more effective than plain soap at preventing infection.

**Source:** National Library of Medicine and National Institute of Health. Aug. 28, 2007. "Antibacterial Soap Claims Just Don't Wash," Medline, [http://www.nlm.nih.gov/medlineplus/news/fullstory\\_54112.html](http://www.nlm.nih.gov/medlineplus/news/fullstory_54112.html).

- Emphasize to employees and parents that hand washing is the single most important way to prevent infectious disease.
  - Treat any draining wound as a potential MRSA infection.
  - Keep employees with draining wounds or infections from having physical contact with children. Non-contact activities are OK if the wound is covered and the employee follows hygienic practices such as hand washing and bathing.
  - Wash dishes and utensils in the usual manner with soap and hot water or in a standard dishwasher.
  - Wash clothing and linens in the usual manner with detergent and hot water. If items are heavily soiled with body fluids, pre-wash the items first. Dry thoroughly at the highest setting possible.
  - When sending soiled items home, place them in a plastic bag or other waterproof container. Instruct parents to follow the precautions above in laundering.
  - Clean toys, tables, and other surfaces at least daily using a fresh solution of one part bleach and 100 parts water—that is, a tablespoon of bleach to a quart of water. After 24 hours, the solution weakens, so make it fresh before use.
  - Check children daily for any sores or wounds.
  - Do not share towels or other personal items.
  - Keep fingernails short (no longer than the tip of the finger). Ban artificial nails.
- If a child has a sore or wound:
- Encourage parents to have a physician perform a culture and susceptibility test (to determine which medicine can best kill a microorganism). Ask parents to inform you of the results.
  - If the physician does not prescribe an antibiotic, allow the child to enter day care.
  - If the physician prescribes an antibiotic, make sure the child takes all the medication, even after the infection appears to have healed. Follow instructions regarding dose and timing.
  - Don't share medicines, even topical ointments.
  - Follow the physician's instructions for care of wounds.
  - If the diagnosis is a MRSA infection, follow the physician's instructions on caring for the child and cleaning your facility.

### Reference

Texas Department of Health. "Information on Staphylococcal Infections for Day Care Administrators and Care Givers," [www.dshs.state.tx.us/idcu/health/antibiotic\\_resistance/mrsa/mrsa\\_daycareadmin.pdf](http://www.dshs.state.tx.us/idcu/health/antibiotic_resistance/mrsa/mrsa_daycareadmin.pdf).

## Protect against lead poisoning

Lead poisoning remains a threat, as shown most recently by massive recalls of toys imported from China. But the major source of elevated lead levels in blood may be the lead-based paint in houses and child care facilities built before 1978.

Although lead in paint is regulated today, many older homes have been painted, inside and outside, with lead-based paint. Some surfaces that get a lot of wear and tear, such as window sills, door frames, stair rails, porches, and fences, pose a particular hazard.

Lead can cause health problems in anyone, but it is especially damaging to children. That's because a child's brain and nervous system are especially sensitive to lead's effects. Lead ingested by a pregnant woman can harm her unborn baby. If not detected and treated early, a high lead level in the blood can cause brain damage, behavior and learning problems, and slow growth.

Children with lead poisoning usually get it by inhaling lead dust, which is often stirred up during paint removal and renovation. They can also ingest lead particles by putting their hands in their mouths after touching lead-contaminated objects.

If your program is housed in a pre-1978 building, consider the following:

- If the paint is in good condition, it does not present a problem.
- If the paint is peeling or cracking, it needs immediate attention. Contact your landlord or a professional trained in lead-based paint removal and cleanup.

- Scraping or sanding lead paint causes lead dust to form.
- Removing old paint improperly can result in a more immediate hazard than leaving it alone.
- Simply painting over lead-based paint is not enough.
- A contractor may recommend encapsulation rather than removal of old paint. Encapsulation uses a special paint, wall liner, or dry wall to cover surfaces painted with lead-based paint.
- Lead dust and paint chips can collect in the soil around the building

Your building can be checked in two ways:

- A *paint inspection* tells you the lead content of every painted surface. It won't tell you if it's a hazard or what to do about it.
- A *risk assessment* tells you if there is any serious lead exposure, such as lead dust and peeling paint. It also tells you what to do about it.

To locate a certified professional, contact the Texas Department of Health's Environmental Lead Program, [www.dshs.state.tx.us/elp/info.shtm](http://www.dshs.state.tx.us/elp/info.shtm).

If you suspect your building poses a hazard, take steps to reduce the risk.

- Clean window sills and similar surfaces weekly with warm water and an all-purpose cleaner. Thoroughly rinse rags, sponges, and mops after cleaning.
- Wash children's hands often, especially before eating and taking a nap.
- Wipe shoes on a mat before entering the facility. If the soil around the building is bare, plant grass to cover it and

reduce the risk of scattering lead particles.

- Serve children nutritious foods, especially foods high in iron and calcium such as spinach and dairy products. Children with good diets absorb less lead.

The American Academy of Pediatrics has recommended that all children be tested for lead when they are 1 or 2 years old. Testing is especially important for low-income children because 80 percent of children with high levels of lead receive Medicaid assistance.

## Find recalled toys

Find information about recalled toys from the Consumer Product Safety Commission Web site at [www.cpsc.gov/cpsc/pub/prerel/prerel.html](http://www.cpsc.gov/cpsc/pub/prerel/prerel.html). Search for recalls by month, toy category, or product number.

Treatment for lead poisoning depends on the level of lead in the blood. Children with a lower level may simply need to take iron supplements. Those with a higher level might need to be hospitalized to receive intravenous medication that would bring the level down.

## References

- Environmental Protection Agency: "Lead in Paint, Dust, and Soil: Basic Information," [www.epa.gov/lead/pubs/leadinfo.htm](http://www.epa.gov/lead/pubs/leadinfo.htm).
- Nemours Foundation. Oct. 5, 2005. "AAP: Toddlers Should Get Tested for Lead," [http://kidshealth.org/research/lead\\_testing.html](http://kidshealth.org/research/lead_testing.html).