Purpose
This section provides rules and information about diapering children in care.

General Information
This section applies to all diapered children regardless of their ages.

Disposable training pants, such as Pull-Ups, are considered diapers and all the rules apply.

Diapers such as, A g-diaper (http://www.gdiapers.com/), are part disposable and part reusable. Child care provider should not flush the insert, but treat them as disposable diapers and properly dispose of them as required by rule. The outside plastic lining should be treated as a cloth diaper.

When the rule refers to soiled diapers it means diapers that have been used.

If the center diapers children, the following applies:
(1) Caregivers shall change children's diapers at a diaper changing station. Diapers shall not be changed on surfaces used for any other purpose.

Rationale / Explanation
The use of a separate area for diaper changing reduces the contamination of other areas in the child care environment. Using diaper changing surfaces for any other purpose increases the likelihood of contamination and the spread of infectious disease agents. CFCO, 3rd Ed. pg. 249 Standard 5.4.2.4

Enforcement
Level 1 Noncompliance if diapers are changed in a food preparation or eating area. Level 3 Noncompliance otherwise.

Assessment
Children who are too large to be changed at the diapering station, such as older children with disabilities, may be changed on a nap mat or other smooth, waterproof surface placed on the floor, provided the surface is thoroughly cleaned and sanitized after each diaper change. When this is the case, children should still be changed next to the diaper changing station and not in any other area of the room.

Potty training children can be changed in the bathroom, but the required procedures for handwashing and disposal of diapers or pull-ups must be followed.

If a potty training child has a toileting accident, that child may be changed on a mat on the bathroom floor if the mat is always cleaned and sanitized afterward. The mat may not be stored behind the toilet.

(2) Each diapering station shall be equipped with railings to prevent a child from falling when being diapered.
Rationale / Explanation
The purpose of this rule is to prevent injury to children due to falls from the diaper changing station. Data from the Consumer Product Safety Commission shows that falls are a serious hazard associated with diaper changing tables. Some changing tables have straps that are intended to prevent children from falling, but these straps can trap soil and contaminants, making them difficult to disinfect, so they should not be used. CFOC, 3rd Ed. pgs. 106-107 Standard 3.2.1.4

**Enforcement**
Always Level 2 Noncompliance.

Assessment
Diapering stations with a molded edge that prevents children from falling are acceptable, unless the diapering mat is thick enough that it is flush with the molded edge, so that the molded edge does not protect children from rolling or falling off the changing table.

A railing can be a molded edge that prevents children from rolling off the changing table.

(3) Caregivers shall not leave children unattended on the diapering surface.

Rationale / Explanation
The purpose of this rule is to prevent injury to children due to falls from the diaper changing station. CFOC, 3rd Ed. pgs. 106-107 Standard 3.2.1.4

**Enforcement**
Level 1 Noncompliance if there are no railings and a child is left unattended on the diapering surface. Level 2 Noncompliance otherwise.

(4) The diapering surface shall be smooth, waterproof, and in good repair.

Rationale / Explanation
The purpose of this rule is to ensure that diapering surfaces can be adequately cleaned and disinfected, in order to prevent the spread of disease-causing agents. It is difficult, if not impossible, to disinfect porous surfaces or surfaces that cannot be completely cleaned. CFOC, 3rd Ed. pg. 249 Standard 5.4.2.4

Even a small crack somewhere on the diapering surface could allow bacteria to grow.

**Enforcement**
Always Level 2 Noncompliance.

Assessment
A smooth waterproof surface means one that does not absorb liquid or retain soil. In good repair means that there are no tears or holes in the waterproof surface, which makes it difficult to adequately sanitize the surface.

Diaper mats may be repaired with vinyl glue as long as the glue is waterproof when dry.

Providers can repair rips and tears on diapering surfaces with plastic and/or duct tape, as long as the duct tape is on the bottom and not where the child will be changed.
(5) The provider shall post diapering procedures at each diapering station and ensure that they are followed.

**Rationale / Explanation**
The purpose of this rule is to ensure that all caregivers are aware of and follow correct diaper changing procedures, in order to prevent the spread of disease-causing agents. *CFOC, 3rd Ed. pgs. 106-107 Standard 3.2.1.4, pg. 428, Appendix D*

**These procedures are not required by Child Care Licensing.** The American Academy of Pediatrics and the American Public Health Association recommend the following diapering procedures:

1. Before you bring the child to the diaper changing area, wash your hands and bring the supplies you will need to the diaper changing area, including: a clean diaper, clean clothes (if needed), wipes removed from the container, disposable gloves (if you will use them), and diaper cream on a tissue or paper towel.
2. Carry the child to the changing table, keeping soiled clothing away from you and from any surface that cannot be easily cleaned and disinfected.
3. Unfasten the soiled diaper but leave it under the child. Lift the child's legs as needed and use the disposable wipes to clean the child, wiping from front to back, using a fresh wipe each time. Put the soiled wipes into the soiled diaper, or directly into a plastic-lined, hands-free covered container.
4. Fold the soiled diaper surface inward, and put the soiled diaper into a plastic-lined, hands-free covered container. If reusable cloth diapers are used, put the soiled diaper and its contents, without rinsing, into a plastic bag or a plastic-lined, hands-free covered container.
5. If gloves were used, remove them and put them into a plastic-lined, hands-free covered container.
6. Use a disposable wipe to clean the caregivers hands, and another wipe to clean the child's hands. Put the soiled wipes into a plastic-lined, hands-free covered container.
7. Slide a clean diaper under the child and use the tissue or paper towel to apply any necessary diaper cream. Dispose of the tissue or paper towel in a plastic-lined, hands-free covered container, then fasten the diaper.
8. Wash the child's hands and return them to the group.
9. Clean the diaper changing surface.
10. Sanitize the diaper changing surface.
11. Wash your hands.

**Enforcement**
Always Level 3 Noncompliance.

**Assessment**
Changing a child's clothing due to a toileting accident is not diapering a child. Therefore, the provider would not be required to post diapering procedures.

It is permissible for caregivers to use clean cloth rags or wash cloths for each diaper change instead of using disposable diaper wipes to clean children after diaper changes.

(6) Caregivers shall clean and sanitize the diapering surface after each diaper change.

**Rationale / Explanation**
The purpose of this rule is to prevent the spread of disease-causing agents. *CFOC, 3rd Ed. pg. 249 Standard 5.4.2.4*
Enforcement
Level 2 Noncompliance if there are visible feces left on the diapering surface after a diaper change.

Level 3 Noncompliance otherwise.

Assessment
If there are feces on the diapering surface after a diaper change, the surface must be cleaned before the sanitizing solution is applied.

If a disposable, non-permeable diapering pad that is thrown away after each diaper change is used as the diapering surface, the surface under the pad does not have to be cleaned and sanitized after each diaper change.

Cleaning is removing the dirt or feces and sanitizing is killing the germs. The entire diapering surface must be cleaned and sanitized after each use.

Providers may use any sanitizing agent as long as the manufacturer's instructions are followed. The caregiver must leave the product on the surface for the amount of time listed on the instructions.

A finding will not be issued if there is a small crack on a hard surface. If there is a crack on a changing pad, the surface is not waterproof and cannot be sanitized and a finding will be issued.

(7) Caregivers shall wash their hands before and after each diaper change.

Rationale / Explanation
The purpose of this rule is to prevent the spread of disease-causing agents. CFOC, 3rd Ed. pgs. 106-107 Standard 3.2.1.4, pgs. 110-111 Standard 3.2.2.1

Enforcement
Level 2 Noncompliance if a caregiver does not wash her/her hands after a diaper change when the diaper was soiled with feces.

Level 3 Noncompliance otherwise.

Assessment
Hand sanitizers may be used to meet the hand washing requirements for adults and children age 2 and older without visibly dirty hands.

(8) Caregivers shall place soiled disposable diapers in a container that has a plastic lining and a tightly fitting lid.

Rationale / Explanation
The purpose of this rule is to prevent the spread of disease-causing agents. Separate, plastic-lined waste containers that do not require touching with contaminated hands and that children cannot access encloses odors and prevents children from coming into contact with body fluids. CFOC, 3rd Ed. pgs. 106-107 Standard 3.2.1.4, pg. 226 Standard 5.2.7.4

Enforcement
Level 2 Noncompliance if soiled diapers are not put into any container (for example, they are left sitting on the diaper changing station, the floor, or a counter).
Level 3 Noncompliance otherwise.

**Assessment**
If changing tables have containers that are completely enclosed, they are considered having a tight fitting lid.

Diaper containers that have flip tops or swinging lids are considered tight fitting lids.

(9) The provider shall daily clean and sanitize containers where wet and soiled diapers are placed.

**Rationale / Explanation**
The purpose of this rule is to prevent noxious odors and the spread of disease. *CFOC, 3rd Ed. pg. 226 Standard 5.2.7.5*

**Enforcement**
Always Level 3 Noncompliance.

(10) If cloth diapers are used:
(a) they shall not be rinsed at the center; and

**Rationale / Explanation**
Containing and minimizing the handling of soiled diapers so they do not contaminate other surfaces is essential to prevent the spread of infectious disease. Rinsing a cloth diaper or putting stool into a toilet in the child care center increases the likelihood that other surfaces will be contaminated. *CFOC, 3rd Ed. pg. 105 Standard 3.2.1.2.*

**Enforcement**
Always Level 3 Noncompliance.

(10) If cloth diapers are used:
(b) after a diaper change, the caregiver shall place the cloth diaper directly into a leakproof container that is inaccessible to children and labeled with the child's name, or a leakproof diapering service container.

**Rationale / Explanation**
Containing and minimizing the handling of soiled diapers so they do not contaminate other surfaces is essential to prevent the spread of infectious disease. *CFOC, 3rd Ed. pg. 105 Standard 3.2.1.2.*

**Enforcement**
Always Level 2 Noncompliance.

**Assessment**
Providers may use any leakproof container to store soiled or wet cloth diapers, including bags lined with plastic.

(11) Caregivers shall change children's diapers promptly when they are wet or soiled, and shall check diapers at least once every two hours.
Rationale / Explanation
The American Academy of Pediatrics and the American Public Health Association recommend checking children’s diapers at least once every hour, and whenever the child indicates discomfort or exhibits behavior that suggests a soiled or wet diaper. The reason for this is because the frequency and severity of diaper rash is lessened when diapers are changed more often. CFOC, 3rd Ed. pgs. 105-106 Standard 3.2.1.3

Enforcement
Always Level 3 Noncompliance.

Assessment
The caregiver does not need to wake sleeping children to check/change their diapers.

It is up to the provider to decide how they will check diapers. However, the provider must change children’s diapers if wet or soiled.

This rule will be out of compliance if, during the interview, the caregiver states they do not check diapers every two hours.

(12) Caregivers shall keep a written record daily for each infant and toddler documenting their diaper changes. The record shall be completed within an hour of each diaper change, and shall include the child’s name, the time of the diaper change, and whether the diaper was wet, soiled, or both.

Rationale / Explanation
The purpose of this rule is to ensure that children’s diapers are changed as needed, including during caregiver shift changes. It also allows parents to know when their children’s diapers were changed, and can alert both parents and caregivers to any changes in the child’s bowel movement pattern. CFOC, 3rd Ed. pgs. 105-106 Standard 3.2.1.3.

Enforcement
Always Level 3 Noncompliance.

Assessment
Provider may keep electronic records, such as baby-connect.com, as long as it includes all of the required information.

If an infant or toddler’s parent is a caregiver who is in the same room as his/her child, records do not need to be kept. However, if the parent is working in a different part of the facility, the caregiver must complete a record for the child.

(13) Caregivers whose designated responsibility includes the care of diapered children shall not prepare food for children or staff outside of the classroom area used by the diapered children.

Rationale / Explanation
The purpose of this rule is to ensure that caregivers who diaper children do not potentially contaminate the food for all children in the center by diapering children and then preparing food for the children in the center. An exception to this rule may be made for a staff member who cooks food immediately upon entering the center, such as making breakfast, and who then assumes caregiver duties for diapered children only after finishing food preparation duties.
In such cases, the caregiver may never go back to food preparation outside of the classroom on any given day after they have assumed caregiving duties for diapered children.  *CFOC, 3rd Ed. pgs. 188-189 Standard 4.9.0.2*

**Enforcement**  
Always Level 3 Noncompliance.

**Assessment**  
When the total enrollment of the center is eight or less and there is only one group of children at the center, the caregiver can use the kitchen as a classroom and that caregiver can prepare food and diaper children.  When there are more than eight children enrolled or two or more groups of children at the center, the caregiver cannot use the kitchen as a classroom and prepare food and diaper children.