Institute of Child Nutrition
The University of Mississippi

The Institute of Child Nutrition was authorized by Congress in 1989 and established in 1990 at the University of Mississippi in Oxford and is operated in collaboration with the University of Southern Mississippi in Hattiesburg. The Institute operates under a grant agreement with the United States Department of Agriculture, Food and Nutrition Service.

PURPOSE

Improve the operation of child nutrition programs through research, education and training, and information dissemination.

VISION

Lead the nation in providing research, education, and resources to promote excellence in child nutrition programs.

MISSION

Provide relevant research-based information and services that advance the continuous improvement of child nutrition programs.

This project has been funded at least in part with Federal funds from the U.S. Department of Agriculture, Food and Nutrition Service, through an agreement with the Institute of Child Nutrition at the University of Mississippi. The content of this publication does not necessarily reflect the view or policies of the U.S. Department of Agriculture, nor does mention of trade names, commercial products, or organizations imply endorsement by the U.S. Government.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at https://www.usda.gov/sites/default/files/documents/usda-program-discrimination-complaint-form.pdf and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

(1) Mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410;

(2) Fax: (202) 690-7442; or

(3) Email: program.intake@usda.gov

The USDA is an equal opportunity provider, employer, and lender.

The University of Mississippi is an EEO/AA/Title VI/Title IX/Section 504/ADA/ADEA Employer.

Except as provided below, you may freely use the text and information contained in this document for non-profit or educational use with no cost to the participant for the training providing the following credit is included. These materials may not be incorporated into other websites or textbooks and may not be sold.

Suggested Reference Citation:

The photographs and images in this document may be owned by third parties and used by the University of Mississippi under a licensing agreement. The University cannot, therefore, grant permission to use these images. Please contact helpdesk@theicn.org for more information.

©2021, Institute of Child Nutrition, The University of Mississippi, School of Applied Sciences

04/27/2021
Employee Health and Personal Hygiene for Child Care Center Directors

Introduction
Child care center employees who are sick can transmit their illness to children and others by contaminating food they prepare or serve. This guide highlights three critical areas of food safety that can help prevent employees from contaminating food and possibly causing a foodborne illness outbreak among children and staff.

1. Employee health
2. Handwashing
3. Eliminating bare hand contact with ready-to-eat foods

Responsibilities of the Child Care Center Director

What are employee health and personal hygiene topics for which directors are responsible for training employees?

- The causes and symptoms of foodborne illness
- Employee responsibility to report symptoms and diagnosis of certain illnesses to the director
- Effective handwashing and appropriate times and tasks for which to wash hands
- Prevention of contamination of ready-to-eat food by properly using suitable utensils, such as single-use gloves, tongs, spatulas, deli tissue, or dispensing equipment

What policies and procedures for employee health and personal hygiene are the responsibility of directors?

- Training employees in safe food handling practices
- Excluding or restricting sick employees from work
- Knowing when to report an employee’s illness to the regulatory authority (i.e., the health department)
- Ensuring that hand sinks are supplied with warm water, soap, and paper towels or a hand dryer
- Posting signs for handwashing procedures at hand sinks in the bathrooms, and food preparation and service areas
- Providing employees with proper supplies, such as single-use gloves and aprons
- Revising policies when laws and regulations change

Should this guidance apply to all child care center employees?

Any person working with food, food equipment, utensils, or food-contact surfaces in the child care center should follow these health and personal hygiene guidelines. This may include unpaid staff, such as volunteers, or non-traditional food workers, such as teachers. Child care centers are unique because, in many cases, all staff members share some responsibility for feeding children.

Employee Health

Anyone who has signs or symptoms of illness, or who is infected with a foodborne illness, should report to the director as they may need to be excluded from preparing and handling food.

What is a foodborne illness?

A foodborne illness results from consuming foods or liquids that are contaminated.

What is a foodborne illness outbreak?

A foodborne illness outbreak is when two or more cases occur of a similar illness resulting from consuming a common food or drink.
Why is it important for a child care center employee to report symptoms or diagnosis of foodborne illness and exposure to foodborne illnesses?

An employee who is experiencing symptoms of or has been diagnosed with a foodborne illness has the potential to contaminate food, utensils, equipment, and surfaces that come into contact with food. A child that eats contaminated food or comes into contact with contaminated food, utensils, or surfaces may become sick.

Directors should explain to employees the importance of reporting specific symptoms and diagnoses of, or exposure to, a foodborne illness. An example of an Employee Health and Personal Hygiene Agreement is provided in Appendix A of this guide to help employees understand their responsibilities related to their health. This information should be part of each employee’s orientation and reviewed with the employee at least once each year.

What symptoms of illness should be reported to the director?

- Vomiting
- Diarrhea
- Jaundice (yellowing of the skin and/or eyes)
- Sore throat with fever
- Infected wounds or lesions on hands, wrists, or exposed body parts

What diagnosed illnesses should be reported to the director?

Employees should always inform the director when they have one of the six reportable foodborne illnesses.

- Norovirus
- Hepatitis A virus
- Shigellosis (Shigella spp.)
- E. coli infection*
- Typhoid fever (caused by Salmonella Typhi)
- Salmonellosis (Salmonella, nontyphoidal)

*E. coli (Escherichia coli) consists of a diverse group of bacteria. Shiga toxin-producing E. coli (STEC) causes a disease commonly associated with foodborne outbreaks. Employees need to report a diagnosis of STEC infection. Examples include E. coli 0157:H7, 0145, 026, 0111, and 0103.

Where can I find more information about these illnesses?

Fact sheets on norovirus, hepatitis A virus, shigellosis, E. coli infection, typhoid fever, and salmonellosis (the six reportable foodborne illnesses) are available through the Institute of Child Nutrition (ICN).

Does a child care center employee need to report exposure to certain illnesses?

Yes, an employee should report to the director when they have been exposed to one of the six reportable foodborne illnesses through:

- An outbreak
- A household member
- A household member attending or working in a setting with an outbreak

Employees are not required to report when they have been exposed to Salmonella, nontyphoidal (salmonellosis).

What should the child care center director do when an employee reports a diagnosis of foodborne illness or displays symptoms?

The director is responsible for taking action to prevent the employee from transmitting the disease to children and other staff by excluding or restricting the employee. In some cases, the director may be required to report certain illnesses and symptoms to the health department.
What is an exclusion?

An exclusion means a child care center employee is not permitted to come to work.

What is a restriction?

A restriction means a child care center employee’s activities are limited to prevent the risk of transmitting a disease through food. A restricted employee cannot handle food or clean equipment, utensils, or linens. Job duties for employees who are restricted may include working in non-food cleaning or maintenance tasks.

How does the child care center director decide what action to take when an employee reports a symptom or diagnosis?

Appendix B provides guidance that will assist directors in deciding whether it is necessary to exclude or restrict an employee from work. Because state or local regulations may be different, the director should contact the health department about local regulations.

Children in child care centers are a highly susceptible population because of their young age and underdeveloped immune systems. That means they may be more likely than other groups, such as healthy adults, to become ill. A director typically must exclude, rather than restrict, a sick employee from work.

Who can exclude or restrict a child care center employee?

The director has the authority to exclude or restrict an employee from work. The local health department may also have the authority to exclude or restrict an employee who has symptoms of or has been diagnosed with a foodborne illness. It is recommended that the director works with the health department in these situations.

When can an excluded or restricted child care center employee return to work?

In most cases, the director removes, adjusts, or retains the exclusion or restriction. In some cases, approval from the local health department or a medical provider is required to remove an exclusion or restriction. Appendix B provides guidance on the appropriate time to remove an exclusion or restriction, and allow the employee to return to work. The director should consult with the local health department to address questions about when an excluded or restricted employee can return to regular work.

Handwashing

Child care center directors are responsible for ensuring that employees are properly washing their hands by routinely monitoring handwashing practices. Employees should be trained in effective handwashing practices when they are hired and retrained periodically throughout the year. They should also be trained when handwashing should occur. An example of an Employee Health and Personal Hygiene Agreement is provided in Appendix A to help employees understand their responsibilities related to handwashing.

Why is handwashing important?

Proper handwashing helps to prevent foodborne illness. Handwashing is critical to preventing the transmission of pathogens (germs) that cause illness. A child care center employee can transfer germs from hands to food or food contact surfaces. Children that subsequently eat contaminated food may become sick.
What can the child care center director do to facilitate proper handwashing?

The director should ensure that employees have easy access to hand sinks. Hand sinks must be kept clean and supply warm, running water. Each day, the director should verify that each hand sink has soap and paper towels, or another approved drying device. Handwashing signs should be posted at each hand sink.

How should child care center employees wash their hands?

Effective handwashing includes scrubbing, rinsing, and drying the hands. There are six steps to properly washing hands.

1. Wet hands with clean, running water and apply soap.
2. Rub hands together to make a lather and scrub them well. Scrub the backs of hands, between fingers, and under nails.
3. Continue rubbing hands for at least 20 seconds. Need a timer? Hum the “Happy Birthday” song from beginning to end twice.
4. Rinse hands thoroughly under running water.
5. Dry hands using a paper towel or air-dry them.
6. Avoid re-contaminating hands when turning the water off and discarding paper towels. Turn the water off using a paper towel, or a similar barrier. Trashcans with foot-pedal operated lids are preferable.

When employees are assisting a child in handwashing, they should either hold the child (if an infant) or have the child stand on a safety step at a height at which the child’s hands can hang freely under the running water. They should assist the child in performing all of the above steps and then wash their own hands.

When should child care center employees wash their hands?

- When arriving for the day
- When moving from one task to another
- When entering a food preparation area
- Before, during, and after preparing food
- Before serving food
- Before putting on new, single-use gloves, and between glove changes
- Before handling clean dishes or utensils
- When changing food preparation tasks, such as between working with ready-to-eat and raw foods
- After handling soiled dishes or utensils
- After touching bare, unclean body parts, for example, parts other than clean hands and clean, exposed portions of arms
- After using the toilet
- After changing diapers or cleaning up a child who has used the toilet
- After blowing their nose, coughing, or sneezing
- After touching an animal or animal waste
- After handling pet food or pet treats, including visits to petting zoos
- After touching garbage
- When leaving for the day

Can hand sanitizers be used in place of adequate handwashing in food preparation areas?

No. Hand sanitizers do not take the place of adequate handwashing.

Eliminating Bare Hand Contact with Ready-To-Eat Foods

Ready-to-eat foods can be consumed without further cooking or washing. A child care center employee can contaminate ready-to-eat foods with their bare hands, which can contribute to foodborne illness in children. When handling ready-to-eat foods, employees should always wash their hands and use suitable utensils, such as single-use gloves, tongs, spatulas, deli tissue, or dispensing equipment.

Is it necessary to use single-use gloves when handling ready-to-eat food?

A barrier, such as single-use gloves, is necessary when working with ready-to-eat foods. Single-use gloves, along with handwashing, can be effective in preventing germs on the hands from contaminating food. However, gloves are effective in preventing contamination only if used properly.
If single-use gloves are not available, child care employees can use suitable, clean utensils to handle ready-to-eat foods. These utensils may include tongs, spatulas, deli tissue, or dispensing equipment.

**How should single-use gloves be used?**

Glove use should not take the place of handwashing. Child care center employees should properly wash their hands before putting on new single-use gloves. Employees should:

- Wear single-use gloves, or use another suitable utensil, when preparing and serving ready-to-eat foods.
- Change single-use gloves between tasks, such as between working with ready-to-eat and raw foods.
- Replace single-use gloves that are torn, damaged, or contaminated.
  - Single-use gloves may become contaminated when:
    - Sneezing, coughing, or touching skin and hair
    - Touching equipment, such as door handles
    - Handling other food
    - Conducting other tasks
- Do not wash or reuse single-use gloves.
- Cover an infected wound or lesion with a waterproof covering and a single-use glove.
- Ensure that single-use gloves fit properly.
- Consider using non-latex gloves to address latex allergies.

**Other Considerations**

**Can child care center employees who are responsible for changing diapers also handle food?**

For best practices in food safety, employees responsible for preparing or handling food should not change diapers. Staff members who work with diapered children should not prepare or serve food for groups of children. If staff members need to perform both tasks, they should thoroughly wash their hands after changing a diaper and again before handling food. Diapers should be changed in designated areas that are separate from food storage, preparation, and service areas.

**Should children wash their hands before eating?**

Yes, children should wash their hands before they eat. A child care center employee assisting a child in handwashing should help the child wash their hands and then wash their own hands.

**Are there any exceptions to excluding a child care center employee with symptoms of vomiting or diarrhea?**

Yes, the director does not need to exclude an employee with symptoms of vomiting or diarrhea due to a noninfectious illness, for example, pregnancy. The employee must provide the director with written medical documentation that states that the symptom is from a noninfectious condition.

**Are there other symptoms of illness that should be considered?**

Yes, child care center employees experiencing persistent sneezing, coughing, or a runny nose that causes discharge from their eyes, nose, or mouth should not work with food or clean dishes and utensils.

**What other factors should the child care center director consider?**

The director should encourage employees to:

- Keep their fingernails trimmed, so they are easy to clean.
- Do not wear nail polish or artificial nails when working with food. If an employee chooses to wear nail polish or artificial nails, they should wear single-use gloves when working with food.
- Remove jewelry before preparing food.
- Wear clean clothes to prevent contamination of food.
- Wear a hair restraint, such as a hair net or hat, while preparing food.
References


Healthy Schools, Healthy People, It’s a SNAP. (n.d.). *Handwashing facts*. www.itsasnap.org


Appendix A

Sample Child Care Center Employee Health and Personal Hygiene Agreement

The purpose of this agreement is to inform employees who will be working with food, of their responsibilities in preventing the transmission of foodborne illness.

I agree to report to the child care center director:

- Any of the following symptoms while at work or outside of work, including the date when I first experienced the symptoms:
  - Vomiting
  - Diarrhea
  - Sore throat with fever
  - Jaundice (yellow tint to skin and the whites of the eyes)
  - An infected wound, or lesion containing pus, on the hand, wrist, or an exposed part of the arm or body

- Recent, current, or future medical diagnosis of either myself or a household member due to one of the following (include the onset date):
  - Norovirus
  - Hepatitis A
  - Shigelllosis (*Shigella* spp.)
  - *E. coli* infection*
  - Typhoid fever (*Salmonella* Typhi)
  - Salmonellosis (*Salmonella*, nontyphoidal)

- Recent, current, or future exposure by myself or a household member to an outbreak due to (include the date exposed):
  - Norovirus
  - Hepatitis A virus
  - *Shigella* spp. (shigellosis)
  - Shiga toxin-producing *Escherichia coli* (STEC) (*E. coli* infection*)
  - Typhoid fever (caused by *Salmonella* Typhi)

Employees are not required to report when they have been exposed to *Salmonella* (nontyphoidal) (salmonellosis).

*Escherichia coli* (*E. coli*) consists of a diverse group of bacteria. Shiga toxin-producing *E. coli* (STEC) causes a disease commonly associated with foodborne outbreaks. Employees need to report a diagnosis of, or exposure to, STEC infection. Examples include *E. coli* 0157:H7, 0145, 026, 0111, and 0103.

I have read (or had explained to me) and understand that once I have reported the above, it is the director’s responsibility to determine if I can work with food and/or stay at work. The director may seek advice from the health department.

- An exclusion means I will not be permitted to come to work.
- A restriction means my activities in the child care center will be limited. I will not be able to work with food, clean equipment, utensils, or linens.
- The director can remove, adjust, or retain the exclusion or restriction. In some cases, the director may need medical documentation, or approval from the health department, to remove an exclusion or restriction.
I agree to wash my hands:

- When arriving for the day
- When moving from one assigned task to another
- When entering a food preparation area
- Before, during, and after preparing food
- Before serving food
- Before putting on new, single-use gloves, and between glove changes
- Before handling soiled dishes or utensils
- When changing food preparation tasks, such as between working with ready-to-eat and raw foods
- After handling soiled dishes or utensils
- After touching bare, unclean body parts, for example, parts other than clean hands and clean, exposed portions of arms
- After using the toilet
- After changing diapers or cleaning up a child who has used the toilet
- After blowing their nose, coughing, or sneezing
- After touching an animal or animal waste
- After handling pet food or pet treats, including visits to petting zoos
- After touching garbage
- When leaving for the day

I understand that effective handwashing includes scrubbing, rinsing, and drying hands. When washing my hands, I agree to:

1. Wet my hands with clean, running water and apply soap.
2. Rub my hands together to make a lather and scrub them well, making sure to wash the backs of my hands, between my fingers, and under my nails.
3. Continue rubbing my hands for at least 20 seconds. (The length of time it takes to hum “Happy Birthday” song from beginning to end twice.)
4. Rinse my hands thoroughly under running water.
5. Dry my hands using a paper towel or air-dry them.
6. Avoid re-contaminating my hands when turning the water off and discarding paper towels. Turn the water off using a paper towel, or a similar barrier.

I have received the following fact sheets for:

- Norovirus
- Hepatitis A virus
- Shigellosis
- *E. coli* infection
- Typhoid fever
- Salmonellosis

I understand that touching ready-to-eat food with my bare hands is not safe. I agree to wear single-use gloves or use other suitable utensils when working with ready-to-eat food. I understand that failure to comply with the terms of this agreement could lead to action by my employer that could affect my employment and may involve legal action.

Signature of Child Care Center Employee  Date
## Appendix B
### Table 1: Requirements for Symptomatic, Undiagnosed Child Care Center Employees

<table>
<thead>
<tr>
<th>Symptoms</th>
<th>Exclusion or Restriction</th>
<th>Removing Exclusion or Restriction</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vomiting</td>
<td>Exclude</td>
<td>Symptom-free for at least 24 hours</td>
<td>An employee with symptoms of vomiting or diarrhea due to a noninfectious illness does not need to be excluded. The employee must provide the director with written medical documentation that states that the symptom is from a noninfectious condition.</td>
</tr>
<tr>
<td>Diarrhea</td>
<td>Exclude</td>
<td>Symptom-free for at least 24 hours</td>
<td>Written medical documentation must indicate that the employee is free of, or has received antibiotic treatment for, a <em>Streptococcus pyogenes</em> (“strep”) infection. Most strep infections cause mild illnesses, such as “strep throat,” or impetigo. Occasionally, these bacteria can cause severe and even life-threatening diseases; potential symptoms must be addressed.</td>
</tr>
<tr>
<td>Sore throat with fever</td>
<td>Exclude</td>
<td>When written medical documentation is provided.</td>
<td></td>
</tr>
<tr>
<td>Jaundice</td>
<td>Exclude</td>
<td>Consult with the local health department</td>
<td></td>
</tr>
<tr>
<td>An infected wound, or lesion containing pus (such as a boil), on the hands, wrist, or exposed portion of the body</td>
<td>Restrict</td>
<td>When the affected area is properly covered with an impermeable cover (e.g., a finger cot).</td>
<td>If the wound or lesion is on the hand or wrist, a single-use glove must also be worn over the impermeable cover</td>
</tr>
<tr>
<td>Diagnosis</td>
<td>Exclusion or Restriction</td>
<td>Notes</td>
<td></td>
</tr>
<tr>
<td>----------------------------</td>
<td>-------------------------</td>
<td>----------------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td><strong>Norovirus</strong></td>
<td>Exclude</td>
<td>Consult with the local health department</td>
<td></td>
</tr>
<tr>
<td><strong>Hepatitis A</strong></td>
<td>Exclude</td>
<td>Consult with the local health department</td>
<td></td>
</tr>
<tr>
<td><strong>E. coli infection</strong></td>
<td>Exclude</td>
<td>Consult with the local health department</td>
<td></td>
</tr>
<tr>
<td><strong>Shigella spp. (shigellosis)</strong></td>
<td>Exclude</td>
<td>Consult with the local health department</td>
<td></td>
</tr>
<tr>
<td><strong>Typhoid fever</strong></td>
<td>Exclude</td>
<td>Consult with the local health department</td>
<td></td>
</tr>
<tr>
<td><strong>Salmonella, nontyphoidal (salmonellosis)</strong></td>
<td>Exclude</td>
<td>Consult with the local health department</td>
<td></td>
</tr>
</tbody>
</table>

### Requirements for Exposed Child Care Center Employees

*Employees exposed to norovirus, Hepatitis A, Typhoid fever, Salmonella, nontyphoidal (salmonellosis), Shigella spp.*, or E,coll infection through an outbreak, a household member, or a household member attending or working in a setting with an outbreak, must be restricted from working and allowed to only return when cleared to do so by the local health department. Written medical documentation must indicate that the employee is free of, or has received antibiotic treatment for, a *Streptococcus pyogenes* (*strep*) infection. Most *strep* infections cause mild illnesses, such as "strep throat," or impetigo. Occasionally, these bacteria can cause severe and even life-threatening diseases; potential symptoms must be addressed.

### Requirements for Diagnosed Child Care Center Employees

<table>
<thead>
<tr>
<th>Diagnosis</th>
<th>Exclusion or Restriction</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Norovirus</strong></td>
<td></td>
<td>Consult with the local health department</td>
</tr>
<tr>
<td><strong>Hepatitis A</strong></td>
<td></td>
<td>Consult with the local health department</td>
</tr>
<tr>
<td><strong>E. coli infection</strong></td>
<td></td>
<td>Consult with the local health department</td>
</tr>
<tr>
<td><strong>Shigella spp. (shigellosis)</strong></td>
<td></td>
<td>Consult with the local health department</td>
</tr>
<tr>
<td><strong>Typhoid fever</strong></td>
<td></td>
<td>Consult with the local health department</td>
</tr>
<tr>
<td><strong>Salmonella, nontyphoidal (salmonellosis)</strong></td>
<td></td>
<td>Consult with the local health department</td>
</tr>
</tbody>
</table>
## Requirements for Diagnosed Child Care Center Employees

<table>
<thead>
<tr>
<th>Diagnosis</th>
<th>Exclusion or Restriction</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Norovirus</td>
<td>Exclude</td>
<td>Consult with the local health department</td>
</tr>
<tr>
<td>Hepatitis A</td>
<td>Exclude</td>
<td>Consult with the local health department</td>
</tr>
<tr>
<td>E. coli infection</td>
<td>Exclude</td>
<td>Consult with the local health department</td>
</tr>
<tr>
<td>Shigella spp.</td>
<td>Exclude</td>
<td>Consult with the local health department</td>
</tr>
<tr>
<td>Typhoid fever</td>
<td>Exclude</td>
<td>Consult with the local health department</td>
</tr>
<tr>
<td>Salmonella, nontyphoidal</td>
<td>Exclude</td>
<td>Consult with the local health department</td>
</tr>
</tbody>
</table>

### Escherichia coli (E. coli)

Escherichia coli (E. coli) consists of a diverse group of bacteria. Shiga
toxin–producing E. coli (STEC) causes a disease commonly associated
with foodborne outbreaks. Employees need to report a diagnosis of a
STEC infection. Examples include E. coli 0157:H7, 0145, 026, 0111,
and 0103.

## Requirements for Exposed Child Care Center Employees

Restrict employees exposed to norovirus, hepatitis A virus, shigellosis, E. coli infection, typhoid fever through an outbreak or a household member. Consult with the local health department to determine when to remove the restriction and allow regular work.

*Written medical documentation must indicate that the employee is free of, or has received antibiotic treatment for, a Streptococcus pyogenes ("strep") infection. Most strep infections cause mild illnesses, such as "strep throat," or impetigo. Occasionally, these bacteria can cause severe and even life-threatening diseases; potential symptoms must be addressed.*

An employee with an infected wound, or lesion containing pus (such as a boil), on the hands, wrist, or exposed portion of the body may continue to work if the affected area is properly covered with an impermeable cover (e.g., a finger cot). If the wound or lesion is on the hand or wrist, a single-use glove must also be worn over the impermeable cover. If the wound or lesion is not properly covered the employee’s work must be restricted.