

# PROCEDURE

Cancels: NEW

See also: POL 10.1.24; RCW 43.216; 110-300; 110-301

Approved by: Travis Hansen

## PRO 10.1.24 APPROVING SANITIZERS OR DISINFECTANTS

Action by:

Action:

Licensors

1. **Receives** interest from early learning or school-age provider about using a product, including wipes, other than bleach to sanitize or disinfect.
2. **Discusses** WAC requirements with provider and **directs** provider to form *DCYF 15-965 Sanitizer/Disinfectant Approval Request* for paper submission or **directs** to submit via portal.
3. **Receives** *Sanitizer/Disinfectant Approval Request*, and 2 mandatory attachments including: safety data sheet (SDS), and copy or photo of label to include directions for use for the proposed product.
  - 3a. If a paper form is incomplete, **returns** to provider.
  - 3b. If a paper form is complete, **writes** the WA Compass provider case number on the form and **sends** form to Health Specialist.
  - 3c. If received via portal, **skips** to **step 4**.

Health Specialist

4. **Reviews** *Sanitizer/Disinfectant Approval Request* and **researches** proposed product, if necessary.
5. **Approves** or **disapproves** use of product, **completes** *Sanitizer/Disinfectant Approval Request*.

Licensors

- 5a. If paper form, **sends** completed form to licensors within 10 business days.
6. **Documents** request and decision details in WA Compass within 10 business days.
  - 6a. If paper copy, **copies** completed *Sanitizer/Disinfectant Approval Request* and **places** copy in licensing file. **Sends** original to provider.

## Violation of Approved Sanitizer or Disinfectant:

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7. **Finds** a violation of the use of an approved sanitizer or disinfectant and **creates** inspection report to document noncompliance.
8. **Consults** with Health Specialist about violation and **discusses** next steps with Supervisor.
  - 8a. If alternate plan needed, **communicates** plan with provider. If provider voluntarily decides to use bleach instead of following alternate plan, **completes** *DCYF 15-926 Rescission of Approved Sanitizer or Disinfectant* letter and **sends** it certified-return receipt to provider. **Updates** status per WA Compass User Manual.
  - 8b. If rescission needed, **completes** *DCYF 15-926 Rescission of Approved Sanitizer or Disinfectant* letter and **sends** it certified-return receipt to provider. **Updates** status per WA Compass User Manual.
9. **Sends** a copy of letter to Health Specialist and **places** a copy of letter in licensing file.
10. **Documents** in WA Compass within 10 business days.