

Illness Policy for Children

Although some illnesses do not require exclusion, sometimes illness requires a child or staff member to be excluded from care to prevent the spread of infection to other children and staff and to allow the child time to rest, recover and be treated for the illness. This policy outlines illnesses and situations that require exclusion and those that do not.

Temporary Exclusion is recommended when

- The illness prevents the child from participating comfortable in activities as determined by staff.
- The ill child requires more care than the staff can give, which may result in compromising care for other children.

A child will be temporary excluded when the child has any of the following conditions, unless a health professional determines the child's condition does not require exclusion-

- 1) Appears to be severely ill
 - (For this purpose, severely ill would include: lethargy, uncontrolled coughing, excessive irritability or persistent crying, difficulty breathing and/or wheezing)
- 2) Has a fever AND behavior change OR one or more of the below symptoms or illnesses.

(For this purpose, fever is defined as temperature above 101° orally, Or 100° or higher if taken auxiliary (armpit) or any equivalent method)

- **Diarrhea:** after two instances and for this purpose is defined by more watery stools (decreased form of stool that is not associated with changes in diet, or medications) and increased frequency of passing stool. Children may return once the reason for change in bowel has been resolved and if the change is not due to salmonella Shigelloses or E. coli infections.
- Blood in stool: not explained by dietary changes medication or hard stools.
- **Vomiting:** there are many reasons children vomit, from eating something that does not agree with them to any number of illnesses. Child will be excluded if he/she has vomited two or more times. The child can return after vomiting has been resolved for 24 hours or until a health professional determines the cause for vomiting is not contagious and the child is not in danger of dehydration.
- **Abdominal pain (persistent):** that pain continues for more than 2 hours or intermittent pain associated with fever or other signs or symptoms.
- Conjunctivitis (Pink Eye): A child will be excluded only for bacterial conjunctivitis (red eyes, green or yellow discharge). They may return 24 hours after treatment has started and are able to participate in activities. Other forms do not need to be excluded (allergy or viral cause).
- **Hepatitis A:** Child will be excluded until 1 week after onset of viral illness or until after immune serum globulin has been given to children and staff in the program, as directed by the local health department.
- Impetigo: Child will be excluded until 24 hours after treatment has begun.
- **Measles:** Child will be excluded until 5th day after rash disappears or local health department states patient is noninfectious.
- **Mouth Sores:** Child will be excluded if mouth sores are coupled with drooling, unless a health care provider determines that the sores are not contagious.

- Impetigo: Child will be excluded until 24 hrs. after treatment begins.
- Mumps: Child will be excluded until 9 days after onset of parotid gland swelling.
- **Pertussis (Whooping Cough):** Children will be excluded until five days of appropriate antibiotic has been completed or until local health department states that the child in non-infectious.
- Rash: With fever and/or behavior change.
- **Hand, Foot and Mouth:** Children will be excluded until sores have dried and crusted and there is not fever.
- Rubella: Children will be excluded until 6 days after the onset of the rash.
- Scabies: Children will be excluded until after treatment has been completed.
- **Streptococcal pharyngitis (Strep Throat):** Children will be excluded until 24 hours after treatment has started and cessation of fever.
- **Tuberculosis:** Children will be excluded until the child's physician or local health department authority states the child is non-infectious.
- Varicella-zoster (Chicken pox): Children will be excluded until all the lesions have dried and formed scabs usually within six days of onset of rash.
- Any child determined by the local health department to be contributing to the transmission of illness during an outbreak.

Following an illness or injury, children will be readmitted to the program when they no longer have the above symptoms, have begun appropriate treatment and/or no longer have significant discomfort and well enough to participate.

The Director/Acting Director will have the final determination on whether a child who is ill will be permitted to remain in the program for the day. Parents/guardians may be required to bring a doctor's note in order for the child to return to the program.

Children with the above signs and symptoms will be separated from the group and cared for in the office. Parent/guardian or emergency contact will be notified by the Director/Acting Director to pick up the child. The Director/Acting Director will complete the Symptom Record and give to parent and keep a copy of the child's file. Any exceptions to our illness policy will require a written notice from a licensed health care professional stating that the child is not contagious.

Conditions that DO NOT require exclusion

When a child becomes ill but does not require immediate medical help, a determination must be made whether the child requires exclusion. Most illnesses do not require exclusion.

- Common Colds, Runny Noses, and Coughs
- Fever without any signs of symptoms of illness. *Fever is an indication of the body's response to something, but it is neither a disease nor a serious problem by itself.

(For this purpose, fever is defined as temperature above 101° orally, or 100° or higher if taken auxiliary (armpit) or any equivalent method)

- Watery eye discharge without fever, eye pain, or eyelid redness
- Yellow or white eye drainage that is not associated with pink or red conjunctiva (i.e., the whites of the eyes).
- Rash without fever and behavioral changes.
- Thrush (i.e., white spots or patches in the mouth)
- Fifth Disease (slapped cheek disease, parvovirus B19) in a child without immune problems.

If a child or staff member is found to have a communicable disease, a notice will be posted on the door of all classrooms. Additionally, families who have provided an email address will receive email notification of the illness.