

Housatonic Child Care Center Child Illness Policy

Children attending a child care program are very susceptible to getting and spreading infectious diseases. If this will be your child's first experience with a child care setting, be prepared for frequent illness. Although this is certainly inconvenient for you, it will build a stronger immune system as your child gets older.

In order to ensure good health for the children and staff we request you check your child daily. While we expect colds during the year, children must be able to participate **fully** in all activities of the program.

HCCC understands that it is difficult for a parent/guardian to leave or miss work; therefore, it is suggested that alternative arrangements be made for occasions when children must remain at home or be picked up due to illness. Exclusion from the center is sometimes necessary to reduce the transmission of illness or because the center is not able to adequately meet the needs of the child.

Mild illnesses are common among children and infections are often spread before the onset of any symptoms. In these cases, we try to keep the children comfortable throughout the day, but will find it necessary to exclude them from the child care setting for the following reasons (this list covers most common illnesses, but is not inclusive of all reasons for exclusion).

Child's Exclusion Due to Illness

- **Fever** (100.5°) and not attributed to teething, and/ or inability to participate in the program.
 - Temperatures will be taken twice and by two different people twenty or more minutes apart to ensure accuracy.
 - *Infants less than 4 months of age will be excluded if they have a fever of 100.4° aural/ear and should receive medical attention as soon as possible.
 - *Any child with a fever of 104° will be excluded and should receive medical attention as soon as possible.
 - *Any infant younger than 2 months with a fever should get urgent medical attention.
- **Vomiting** – unless it is determined to be caused by a non-communicable condition and the child is not in danger of dehydration.
- **Diarrhea** — more watery stools or decreased form of stool that is not associated with change of diet. Exclusion is required for all diapered children whose stool is not contained in the diaper and toilet-trained children if the diarrhea is causing "accidents." Diapered children with diarrhea will be excluded if the stool frequency exceeds 2 or more stools above normal for that child.
- **Blood or mucus in the stools** not explained by dietary change, medication, or hard stools, and/or uncontrolled, unformed stools that cannot be contained in a diaper/underwear or toilet.
- A constant runny nose, which has a thick green or brown discharge. This is usually sign of an infection. Please keep your child home until the mucous is clear, or a doctor's note is available.

- Constant cough-uncontrolled or worse after play. This could be allergy or asthma related and your child may need medication. Please return with a doctor's note to assure that your child can fully participate in the program, with no restrictions or action plan needed.
- **Mouth sores** with drooling - unless the child's medical provider or local health department authority states that the child is noninfectious.
- **Abdominal pain** that continues for more than 2 hours or intermittent abdominal pain associated with fever, dehydration, or other signs of illness.
- **Rash with fever or behavioral changes**, until a physician has determined it is not a communicable disease.
- **Purulent conjunctivitis** (defined as pink or red conjunctiva with white or yellow eye discharge) until on antibiotics for 24 hours.
- **Communicable Disease** – please see the listing below
- **Lethargy** (prevents the child from participating comfortably in program activities).
- Illness that results in a greater need for care than our staff can provide without compromising the health and safety of other children.

In the event of the onset of an illness (fever, upset stomach, extreme congestion) a medical emergency or accident, Parents will be notified of all impactful possible medical concerns throughout the day. HCCC director or designee will work together with the parents to assess the child's ability to participate in the program.

Your child will be removed from the program area, and remain in the office until he or she is picked up. If medical treatment is required, we will call an ambulance to transport the child, with a staff member, to Sharon Hospital. **It is extremely important to keep your emergency childcare plans and/or contacts updated in the event that we cannot reach you. A new emergency card needs to be completed at the beginning of each school year.**

We ask that for your child's comfort and to reduce the risk of contagion, children be picked up within 1.5 hours of notification. Until then, your child will be kept comfortable and will continue to be observed for symptoms.

Children need to remain home for 24 hours without symptoms before returning to the program unless the center receives a note from the child's medical provider stating that the child is not contagious and may return to the center. In the case of a (suspected) contagious disease, rash or continuing symptoms, a doctor's note may be required before returning. Please contact the Director if you have any questions about your when your child can return to the center.

If your child has been ill during the night, i.e. nausea, vomiting, fever, sleeplessness, earache, sore throat, diarrhea, or has had any other problems that may render him or her at risk for a healthy day, **please do not bring him/her to the Center.** In this instance, even if your child wakes up appearing fine, they may have something contagious that may get worse as the day goes on. Call to let us know your child will be staying home. There may information we can give you about an illness making the rounds in the Center. Please let the staff know if you have given your child **any medication** before coming to the center, and the possible side effects of that medication.

Required Conditions for a Child to Return to the Center

Children who have been excluded may return when:

- They are free of fever, vomiting, and diarrhea for a full 24 hours.
- Readmission after diarrhea can occur when diapered children have their stool contained by the diaper (even if stools remain loose) and when toilet-trained children do not have toileting accidents.
- They have been treated with an antibiotic for a full 24 hours.
- They can participate comfortably in all usual program activities, including outdoor time.
- They are free of open, oozing skin conditions and drooling (not related to teething) unless:
 1. The child's health-care provider signs a note stating that the child's condition is not contagious, and;
 2. The involved areas can be covered by a bandage without seepage or drainage through the bandage.

If a child has been out of the center due to any of the reasons above or any other reason deemed necessary by the child's medical provider, please let the center know. It may be beneficial to share this information with families in the center. If so, your family information will remain confidential; however, this will help staff and families observe the other children for symptoms and could assist their medical provider in making a diagnosis.

If a child is excluded because of a reportable communicable disease, a doctor's note stating that the child is no longer contagious and may return is required.

Communicable Diseases

The following is a list of communicable diseases or infectious diseases most common to preschoolers. Please notify the Center as soon as possible if you believe your child is ill with one of these diseases so they can take the necessary steps to protect the other children.

Chicken Pox: Small pink spots, which become raised and turn into water blisters. The blisters break and scabs form. The incubation period is usually 14 days. The child must be excluded from the center until all lesions have dried or crusted (usually 6 days after onset of rash).

Fifth's Disease: Coughing, high temperature, swollen glands, flushed puffy face, often described as a "slapped face" look. There is sometimes a measles-like rash over entire body.

Impetigo: Impetigo is a highly contagious skin disease. Spots usually appear on the face, nose, and mouth. There are raised blister like areas containing fluid, which is yellowish in color. They are usually spread from one part of the body to another. Specific medication will clear the condition rapidly. Child should be excluded from school until 24 hours after treatment has been started.

Head Lice: Severe itching of the scalp. The lice are small, flat and gray-white in color and difficult to see. The eggs (called nits) are small and white and firmly attached to strands of hair, (unlike dandruff). Caution your children about using combs, brushes and hats that belong to others. Children may not attend school until they have been treated and are free of lice and nits.

Meningitis: This is a highly communicable disease. The onset is sudden vomiting, fever, headache and stiff neck.

Pink Eye: This is a condition where the eye will itch, burn and tears. The whites of the eyes become a reddish/pink color, matter collects in the corner of the eyes, and many times in the morning the lids will be stuck together. A yellowish crust is present along the lids. **This is very contagious.** The child is kept home until the eyes are clear or 24 hours after medication has started.

Ringworm: A contagious disease of the skin, hair and nails. Consists of one or more rounded, scaly, elevated reddish patches - itchy and painful. Medication is needed to clear the condition.

Scabies: Contagious skin disease with severe itching, especially at night. The rash resembles gray, slightly elevated lines of pores in the skin. Also, small red pimples are present. Scratching causes the pimples to bleed and scab. It usually starts on the hands, between the fingers on the wrists and under the arms. Responds quickly to medication. The child needs to stay at home until 24 hours after treatment has been started.

Scarlet Fever: There is a sudden onset - fever, sore throat, headache and vomiting. A red raised rash, usually on neck and behind the ears, chest and back are present. Incubation is 2-4 days. The child should be seen by a doctor for treatment in order to prevent complications to the heart and other areas. The child must be kept home until the doctor gives permission to attend.

Strep Throat: The symptoms are the same for Scarlet Fever but the rash is sometimes missing. The child is kept at home until 24 hours after treatment has been started and the doctor gives permission to attend. Strep infections can be hard to define since some children have little or no symptoms. Please have any sore throat checked by a doctor to rule out strep. Strep is a very contagious infection. Some strep infections manifest themselves as a body rash; therefore any unidentified rash requires suspicion.

Coxsackie Virus can produce a wide variety of symptoms. About half of all kids infected with Coxsackie virus have no symptoms. Others suddenly develop high fever, headache, and muscle aches, and some also develop a sore throat, abdominal discomfort, or nausea. A child with a Coxsackie virus infection may simply feel hot but have no other symptoms. In most kids, the fever lasts about 3 days, and then disappears.

Whenever you are in doubt about any of these illnesses, please call your doctor for advice or call the Director. We see many of these illnesses in the center and may be able to guide you as well in what may be going around in the center. Our policies are set for the well-being of your child and meant to help, rather than cause any inconvenience. HCCC will do its best to keep you informed of any illness that may be impactful to the center.

Signature

Date