

Last Revised: October 1, 2020

SUBJECT: Policy and Procedure (PAP) #2

Illness and Exclusion at Milestones CDC Inc.

REFERENCE: CA LIC 101226.1

National Health and Safety Performance Standards, Caring for Our Children-3rd Edition,

Standard 3.6.3 Medications

Centers for Disease Control and Prevention (US CDC) (Updated July 1 2020)

PURPOSE: This PAP ensures proper exclusion for illness and defines conditions that require

exclusion from care for children and staff in Milestones CDC Inc. Programs

APPLICABILITY: This PAP applies to all Children enrolled in the Milestones CDC Inc. Programs, as well as

all Classroom, Kitchen, and Administrative Staff.

## POLICY:

- a. If a child is unable to participate in activities at Milestones CDC Inc. not limited to, but including, going outside daily, they must be excluded from group care. We do not have the authority through the CA Community Care Licensing Division to care for mildly ill children.
- b. Notes from physicians/health care providers/nurse practitioners must be current, and must not be signed by a relative of the child. Note must specifically address the condition the child was absent for or sent home for, rather than a vague, "Child is able to be in care".
- c. Notes from physicians/health care providers/nurse practitioners cannot override best practices or policy standards put forth by the National Health and Safety Performance Standards, Caring for Our Children-3rd Edition or CA Community Care Licensing
- d. Immunizations are required for all children. The California State Board of Health states that parents of all children enrolled at Milestones shall furnish written evidence that the child has been immunized against diphtheria, pertussis (whooping cough), tetanus, measles (Rubeola), HiB (influenza), Rubella and polio (Blue card PM286).
- e. Physical examination It is required that a report of a recent physical examination be given to the childcare facility as part of the enrollment process. This form (LIC701) must be updated annually

within 2 months of Jan 1 of each year.

- f. Communicable Disease Parents as well as school personnel must work together to control communicable disease effectively. Parents should keep the child at home when he has a fever, colds, rash or other symptoms of communicable disease, especially when the child needs additional attention or special accommodations while in care.
- g. Each child is briefly examined upon arrival to the center. If health is in doubt, the child will not be admitted for that day. Please observe your child for signs and symptoms of illness prior to arrival to the center. Signs of illness are as stated within this policy. Your child may return to the center 24 hours after the symptoms stop. If your child is sent home from care by the Center, your child must remain at home until 24 hours after symptoms stop. This is a firm policy, and there is no room for negotiation. Our intent is to keep all the children well, including your child.
- h. Parents must notify Milestones when their child has a contagious illness. If your child does become ill while attending Milestones he or she will be isolated from the other children and you will be contacted to come and pick him/her up from the center. If a child develops any of the following symptoms during the day, the child will be taken to an isolation area. When a child is separated due to illness, the parent or emergency contact must come to pick up the child within 1 hour. If the child is diagnosed with having a Communicable Disease, parents are required to inform the center immediately by telephone. A doctor's note must accompany the child upon returning to the center and must include the date that the child may return when a child has been diagnosed with a communicable illness.
- i. The following information is not meant to diagnose any specific disorder. The purpose of this sick policy is to assist in ensuring that the health and well being of all children is maintained by consistently managing communicable illnesses and mildly ill children. Children will be excluded from the center if they are (a) not well enough to participate in the normal activities including going outside, (b) if existing staff is unable to care for the sick child without compromising the needs of the other children in the group, or (c) the following symptoms or diagnosis of disease occur:
- Fever (temperature above 101°F [38.3°C] orally, above 102°F [38.9°C] rectally, or 100°F [37.8°C] or higher taken axillary [armpit] or measured by an equivalent method including touchless forehead methods) AND behavior change or other signs and symptoms (e.g., sore throat, rash, vomiting, diarrhea). An unexplained temperature above 100°F (37.8°C) axillary (armpit) or 101°F (38.3°C) rectally in a child younger than six months should be medically evaluated. Any infant younger than two months of age with any fever should get urgent medical attention. Body temperature of 102 F (38.9 C) (oral) or 103 F (39.4 C) (rectal or by ear) or 101 F (38.3 C) (axillary), or higher. (A) For an infant two months of age or under, body temperature of 101.5 F (38.6 C) (rectal or by ear) or higher. Body temperature of 101 F (38.3 C) (oral) or 102 F (38.9 C) (rectal or by ear) or 100 F (37.8 C) (axillary), or higher, with stiff neck, lethargy, irritability or persistent crying.

- Undiagnosed acute rash of two weeks or less in duration.
- Open lesions of the skin or mucous membranes.
- Diarrhea is defined by watery stools or decreased form of stool that is not associated with changes 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 soiled pants or clothing. In addition, diapered children with diarrhea should be excluded if the stool frequency is two or more watery stools above normal for that child. Readmission after diarrhea can occur when diapered children have their stool contained by the diaper (even if the stools remain loose) and when toilet-trained children are continent, barring any other symptoms. Special circumstances that require specific exclusion criteria include the following (2):
  - Toxin-producing E. coli or Shigella infection, until stools are formed and the test results
    of two stool cultures obtained from stools produced twenty-four hours apart do not
    detect these organisms;
  - Salmonella serotype Typhi infection, until diarrhea resolves. In children younger than five years with Salmonella serotype Typhi, three negative stool cultures obtained with twenty-four-hour intervals are required; people five years of age or older may return after a twenty-four-hour period without a diarrheal stool. Stool cultures should be collected from other attendees and staff members, and all infected people should be excluded;
- Blood or mucus in the stools not explained by dietary change, medication, or hard stools;
- Vomiting more than two times in the previous twenty-four hours, unless the vomiting is determined to be caused by a non-infectious condition and the child remains adequately hydrated:
- Abdominal pain that continues for more than two hours or intermittent pain associated with fever or other signs or symptoms of illness;
- Mouth sores with drooling unless the child's primary care provider or local health department authority states that the child is noninfectious;
- Rash with fever or behavioral changes, until the primary care provider has determined that the illness is not an infectious disease;
- Active tuberculosis, until the child's primary care provider or local health department states the child is on appropriate treatment and can return;
- Impetigo, until treatment has been started;
- Streptococcal pharyngitis (i.e., strep throat or other streptococcal infection), until twenty-four hours after treatment has been started;
- Head lice until after the first treatment;
- Scabies, until after treatment has been given;
- Chickenpox (varicella), until all lesions have dried or crusted (usually six days after onset of rash);
- Rubella, until six days after the rash appears;
- Pertussis, until five days of appropriate antibiotic treatment;
- Mumps, until five days after onset of parotid gland swelling;
- Measles, until four days after onset of rash;
- Hepatitis A virus infection, until one week after onset of illness or jaundice if the child's symptoms are mild or as directed by the health department. (Note: immunization status of child

care contacts should be confirmed; within a fourteen-day period of exposure, incompletely immunized or unimmunized contacts from one through forty years of age should receive the hepatitis A vaccine as post exposure prophylaxis, unless contraindicated.) Other individuals may receive immune globulin. Consult with a primary care provider for dosage and recommendations;

- Any child determined by the local health department to be contributing to the transmission of illness during an outbreak.
- Other conditions may be determined by a qualified staff person on an individual basis.

UPDATE: Effective 7/1/2020- Due to concerns about containing the COVID19 outbreak of 2020 and beyond, Milestones CDC Inc has a "no symptom" policy. For specific situations, reach out to your child's center as we do have specific symptom guidelines based on best practices which may change under advisement from the CDC of Dept of Public Health. Additionally, children must be fever-free for 24hours without medication. A "go-home" temp is now 100.4 or higher. If a child has the symptoms of, or is suspected of having COVID19, or has been in direct contact with a person known to have COVID19 infection, that child must be excluded until a negative COVID19 test is obtained, or see Center Director for current guidance, or a diagnosis that does not require exclusion by the child's licensed physician. If the child does not meet criteria for COVID19 testing, written documentation must be provided to Milestones CDC Inc. This policy will be in place until further notice. Any conflicting information in this Policy will always revert to the stricter guideline.

Aimee Walker	 Date
Executive Director	
Milestones CDC Inc.	