

## **CCDP HEALTH POLICY & GUIDELINES**

All CCDP programs adhere to the Medical Administration Policy and Guidelines required by our licensor the Office of Children and Family Services (OCFS).

This Health Policy & Guidelines applies to all well children and children taking medication from the ages of 6 weeks to 12 years enrolled in CCDP programs as well as all CCDP employees.

\*All children must have current health and immunization records on file. Please update the staff when your child receives further immunizations after admission.

\*If a child should become ill at our program the child's parent or guardian will be called, and must come for the child as soon as possible.

\*Weather permitting the children will be spending a reasonable amount of time outside. Please dress your child appropriately. If a child is well enough to be at our program, then he/she is well enough to go outside. We feel fresh air is beneficial to the child(ren) and outdoor play is an important part of our curriculum and it is required by New York State licensing.

\*Please do not give ill children Tylenol or any fever reducer before sending them to child care. If your child is ill, please keep him/her home.

\*An extra set of clothes, for your child, should be left at the childcare at all times.

### **CHRONIC ILLNESS**

Children with a chronic illness such as asthma, diabetes, febrile seizures, should have written instructions by a physician regarding any special procedures, observation, or treatment. MAT paperwork needs to be updated every 6 months.

Allergies need to be documented by a physician. If a child is on a special diet, i.e., milk free, the center needs a written note by a physician so that the special diet can be provided or the food can be brought from home.

### **MEDICATION**

Written permission from a physician must accompany any medication (prescription and non-prescription) that is to be administered at childcare. The medication must be in the original container. The note must have the child's name, name of the medication, time to be given, amount to be given, and number of days to be given. Medication must be for a specific condition accompanied by above note. The center will provide you with the necessary medication form.

### **EXCLUSION**

Children shall be excluded from group care when one or more of the following situations occur:

- Symptoms of acute or contagious illness
- Medical attention is needed

Children are able to return to the center when:\*

- Children are symptom-free for 24 hours
- Depending upon the type of communicable disease, a note from the physician may be required prior to a child's return

\* ***We reserve the right to ask for doctor's notes***

**OR**

- After the treatment and/or medication, prescribed by the physician, meets the time specifications stated in our HEALTH CODE. (In most cases children may return 24 hours after treatment has begun.) Please refer to the HEALTH CODE for the time specifications

NOTE: Parents who are asked to pick up an ill child at childcare will receive an ILLNESS NOTICE (a copy is attached). This form can be helpful to parents because it states the child's symptoms and our health policy requirements regarding those symptoms.

## **HEALTH POLICY**

### **CHICKENPOX**

- A. Symptoms
  1. Pimple type sores, which develop into water blisters and then crust over
  2. May be accompanied by fever
  3. Mild respiratory symptoms may occur
  
- B. May return to Childcare
  1. After most sores have dried and crusted, typically after 7 days
  2. No new lesions have appeared for 3 days

### **COLD - ADVANCED**

- A. Symptoms
  1. Thick nasal drainage
  2. Sore throat
  3. Fever
  4. Cough
  
- B. May Return to Childcare
  1. Symptoms disappear
  2. Doctor's written permission to return
  3. No fever for 24 hours without Tylenol or other fever suppressant

### **COLD - COMMON**

- A. Symptoms
  1. Nasal congestion
  2. Sneezing
  3. Slight Cough
  
- B. May Be At Childcare

### **CONJUNCTIVITIS (PINK EYE)**

- A. Symptoms
  1. Red, itchy eyes
  2. Drainage may be clear or contain pus
  3. Eyelids may become swollen or crusty
  
- B. May return to Childcare
  1. After symptoms have cleared
  2. Or with Dr.'s written permission
  3. Or 24 hours after treatment begins

**COUGH - ADVANCED**

- A. Symptoms
  - 1. Cough interfering with eating, breathing, sleep, or normal activity level
  - 2. May become croopy / whooping sound
  - 3. Mucous may be discharged
  
- B. May Return to Childcare
  - 1. Symptoms disappear
  - 2. Doctor's written permission to return

**DIARRHEA**

- A. Symptoms
  - 1. Gas, stomach cramps
  - 2. Nausea
  - 3. Loose, runny stools

**\* Parent is contacted after 2<sup>nd</sup> incident, child goes home after 3<sup>rd</sup> incident**

- B. May return to Childcare
  - 1. When symptom free for 24 hours, on a regular diet (no Pedialyte)

**EAR INFECTION**

- A. Symptoms
  - 1. Ear drainage
  - 2. Constant pulling on ear, fussiness or complaining of a sore ear
  - 3. Cold symptoms
  - 4. Not interested in eating, difficulty sleeping, playing, etc.
  
- B. May Return to Childcare
  - 1. 12 hours after treatment begins
  - 2. Child must be fever free for 24 hours, without Tylenol or other fever suppressant

**FEVER**

- A. Symptoms
  - 1. 101 degree temperature or more (auxiliary)
  
- B. May Return to Day Care
  - 1. Fever free for 24 hours without any fever suppressant

**FIFTHS DISEASE**

- A. Symptoms
  - 1. Lace-like rash with red checks
  
- B. Child does not need to be excluded, as the infectious period precedes rash, unless other symptoms are present

## **HAND, FOOT, AND MOUTH DISEASE**

- A. Symptoms
  - 1. Spots on hands, feet and around or inside mouth
  - 2. Sometimes on buttocks
  - 3. Fever
  
- B. May Return to Childcare
  - 1. 24 hours after fever breaks
  - 2. Open sores should be covered
  - 3. Sores in the mouth should not cause discomfort when eating or drinking

## **HEAD LICE**

- A. Symptoms
  - 1. Lice (bugs), or nits(eggs) in child's hair
  - 2. Itchy scalp
  
- B. May Return to child care
  - I. First Incidence
    - 1. 24 hours after treatment has been administered
    - 2. Eggs and nits are completely removed by a specially designed nit comb
    - 3. Home must be treated
    - 4. Must be seen by a MAT trained staff
    - 5. Need to retreat hair after 7 days of first treatment
    - 6. Child will be checked daily for two weeks
  - II. Second Incidence
    - 1. Parents will be asked to meet with Administrator for support with handling lice
    - 2. Follow steps above
  - III. Third Incidence within 30 days
    - 1. Family may be asked to leave if they are not cooperating with administration

## **IMPETIGO**

- A. Symptoms
  - 1. Red, round rash
  - 2. Sores that don't heal and increase in size, may have drainage
  - 3. Maybe itchy
  - 4. May have flat honey colored crust
  
- B. May return to Childcare
  - 1. After using medication for 24 hours (keep covered)

### **MUMPS/MEASLES**

- A. Symptoms
  - 1. Inflamed glands
  - 2. Swelling of throat
  - 3. Eruption of rash
  - 4. Slight fever
- B. May return to Childcare
  - 1. With mumps - after swelling subsides (approximately 9 days after swelling began)
  - 2. With measles - approximately 6 days after rash began

### **PINWORMS**

- A. Symptoms
  - 1. Small worms that infect rectum and intestines
  - 2. Usually found in stools
  - 3. Rectal itching, especially at night
- B. May Return to Childcare
  - 1. After treatment begins
  - 2. Doctor's written permission to return

### **PNEUMONIA**

- A. Symptoms
  - 1. Wheezing
  - 2. Severe coughing
  - 3. Rasping when breathing
- B. May Return to Childcare
  - 1. Doctor's permission

### **RASH**

- A. Symptoms
  - 1. Spreading of unusual spots or cluster of spots
- B. May Return to Childcare
  - 1. When symptoms disappear or with Doctor's written permission

### **RINGWORMS**

- A. Symptoms
  - 1. Raised, scaly ring shape lesions on skin
- B. May Return to Childcare
  - 1. After treatment has begun (keep covered)

## **SCABIES**

- A. Symptoms
  - 1. Severe itching
  - 2. Rash (little red bumps) - Predominantly between fingers, axilla creases, may be on other parts of the body
- B. May return to Childcare
  - 1. After treatment has been administered
  - \* Treatment of scabies also requires the home to be treated

## **STREP THROAT / SCARLET FEVER**

- A. Symptoms
  - 1. Red painful throat
  - 2. Trouble swallowing
  - 3. Fever
  - 4. Swollen glands
  - 5. Peeling skin
  - 6. If scarlet fever, rash feels like sand paper
- B. May Return to Childcare
  - 1. 24 hours after treatment begins and temperature returns to normal

## **TEETHING**

- A. Symptoms
  - 1. Child has discomfort with gums and mouth area
- B. May Be At Childcare
  - 1. Tylenol for discomfort only

**\* NOTE: Child may not be at Childcare if he or she has fever of 101 degrees or more**

## **THRUSH**

- A. Symptoms
  - 1. White film covering inside of mouth
- B. May Return to Childcare
  - 1. 24 hours after treatment begins

## **VOMITING**

- A. Symptoms
  - 1. Child vomits 2 times in a 24 hour period or may be sent home after one time if other symptoms are present
- B. May return to Childcare
  - 1. 24 hours after symptoms have disappeared and child is on a regular diet (no Pedialyte)

**YEAST INFECTION (BOTTOM)**

- A. Symptoms
  - 1. Bright, red, irregular shaped pustules
  
- B. May Return to Childcare
  - 1. When symptoms disappear, or 12 hours after treatment begins

**OTHER ILLNESS WILL BE EVALUATED BY THE CENTER AS THEY OCCUR**