

General Health & Safety Policies

- Every child must have a current physical exam, annual TB risk assessment or negative TB result, annual developmental assessment and up-to-date immunizations in order to enroll in our program. The Early Childhood Health Assessment Record should be used.
- Staff must be notified if your child is on medication (i.e., inhaler, nebulizer, EpiPen, Benadryl, penicillin, antibiotics, etc.)
- Tell staff if your child has any allergies, including food allergies.
- Put band-aids on all open cuts.
- If an illness or injury occurs at the center or a center-sponsored activity, a staff member who is certified by the American Red Cross will administer First Aid.
- Be sure we can reach someone at home or have a number where we can reach you, in case your child gets sick or injured during program hours.
- Tell us if your phone number or emergency numbers change.
- Keep your child at home if he/she is sick.
- Any child absent due to illness for (4) four consecutive school days or more needs a doctor's note to return to the center.
- A notice is posted to inform parents whenever a child or staff member at the center has a communicable disease. The notice tells parents/guardians what symptoms to watch for and gives directions as to what to do if their child gets the contagious (catching) disease.

TVCCA HEALTH MANAGEMENT PLANS

Every child with a diagnosed health condition (such as allergies, asthma, diabetes, seizure disorder, etc.) must have an individual care plan completed and signed by your child's doctor. This plan must include the care to be given to your child in an emergency, and will need to be updated whenever there is a change in your child's health needs.

MEDICATION

TVCCA Child Development staff will administer medication to children for whom a plan has been made. Staff is certified to administer oral, topical, inhalant medications as well as an Epi-Pen. We will need the following before any medication can be given:

- You will be asked to read and sign a TVCCA Medication Policy (and a TVCCA inhalation policy if your child needs medication for asthma)
- Your child's doctor will need to sign an Authorization for the Administration of Medication. This form must state that it is for child care personnel. Please understand your child may not be able to attend our program if he/she does not have the proper authorization.

- You will need to bring the medication to the center and show staff how to properly administer it. The doctor's Authorization for Administration of Medication must match exactly the prescription label on the medication.
- We cannot give the first dose of any medication to your child in case there are side effects. We do ask that you please work with your child's doctor to see if a dose schedule can be made that does not involve the hours the child is in the center. All children must be on any prescribed medication for a full 24 hours before returning to the center.

HOW DO DISEASES SPREAD?**MANY COMMON CHILDHOOD DISEASES ARE CONTAGIOUS**

That is, they spread from one person to another. Everyone knows that some illnesses (like Chicken Pox) can spread. But, many people don't know that diseases like Diarrhea, Hepatitis and Impetigo can also spread.

CONTAGIOUS DISEASES ARE SPREAD BY GERMS

Germs are so small that you cannot see them without a microscope. Yet, just a few germs on a hand or toy may be enough to spread a disease.

GERMS ARE SPREAD THROUGH BODY SECRETIONS

Intestinal tract infections spread through stool. Respiratory tract infections are spread through coughs, sneezes, and runny noses. Other diseases are spread by direct contact.

PEOPLE CAN SPREAD GERMS WITHOUT BEING SICK THEMSELVES

A person with a disease is often contagious even before they develop symptoms. Sometimes people, especially young children, spread disease germs to their families and caregivers without ever getting sick themselves. Because of this, steps to prevent the spread of contagious diseases, must always be followed --not just when a person is obviously sick.

TO PREVENT DISEASE AND PLAN AHEAD

- Exchange important information with your TVCCA Child Development staff when you enroll your child.
- Provide important phone numbers on the Parent Authorization Form.
- Update this information for your center/group, so they can reach you in an emergency.
- Be sure your child receives all immunizations on schedule.

Some people think that vaccine preventable diseases no longer exist or are no longer problems...this is not true! Cases still occur - these diseases are no longer widespread because people are being immunized. If people stopped getting these protective shots for themselves and their children, these diseases would once again become common problems.

Young children in childcare groups have a higher risk for catching a disease. All children in child care centers need to have all immunizations to protect themselves, their families, the other children, and the center staff.

The following chart lists the immunizations your child needs. Please arrange to take your child to the doctor to receive these immunizations on schedule. Please tell us when your child has received an immunization, so that his/her record can be updated. Children enrolled must have either documentation of an annual influenza vaccination or a valid exemption on file to be able to attend from January 1 through March 31. Children who are not fully immunized will be excluded whenever a vaccine-preventable disease to which they are susceptible occurs.

RECOMMENDED IMMUNIZATION SCHEDULE

Birth - 2 months	- Hep B #1 (HepatitisB)
1 - 4 months	- Hep B #2 at least 1 month after Hep B #1
2 months	- DTaP #1 (Diphtheria, Tetanus, & Pertussis) IPV #1 (Polio) Hib #1 (Haemophilus Influenzae Type B) PCV #1 (Pneumococcal Conjugate vaccine) and RV #1 (Rotavirus)
4 months	- DTaP #2, IPV #2, Hib #2, PCV #2 and RV #2
6 months	- DTaP #3, Hib #3, PCV #3 and RV #3
6 - 18 months	- Hep B #3, IPV #3, and 2 doses of Influenza (Flu) given at least 4 weeks apart
12 - 15 months	- Hib #4, PCV#4, and MMR # 1 (Measles, Mumps & Rubella)
12 - 18 months	- Varicella (Chicken Pox)
12-23 months	- 2 doses of Hep A #1 (Hepatitis A) given at least 6 months apart
15 – 18 months	- DTaP #4
Annual Vaccine	- 1 dose of Influenza for all enrolled children
4-6 Year Booster	- DTaP, IPV, MMR & Varicella

FOLLOW YOUR CENTER'S POLICIES WHEN ILLNESS OCCURS

This next section will tell you what to do if your child is exposed to a contagious disease, develops symptoms of a contagious disease, or is diagnosed by a physician as having a contagious disease. **Please remember that center policies supercede a doctor's medical note.**

INFORM YOUR CENTER IF YOUR CHILD HAS BEEN EXPOSED TO ANY CONTAGIOUS DISEASE

This includes the following: Chicken Pox - Diarrhea - Infectious Diarrhea (including Salmonella - Shigella - Giardia - Enterovirus - Rotavirus - E. Coli – (Campylobacter) - Fifth Disease - Diphtheria - Hepatitis - Head Lice - Hib Disease - Impetigo - Measles - Mumps - Pertussis (Whooping Cough)-

Rubella - Strep Throat - Scarlet Fever - Scabies - Ring Worm - Pinworm - Bacterial Meningitis - Conjunctivitis (Pink Eye).

If we know your child has been exposed to a contagious disease, we can be especially alert about his/her hand washing and other preventative measures. In certain cases, you may want to take special measures to prevent your child and others from actually developing the disease

KEEP YOUR CHILD AT HOME IF HE/SHE DEVELOPS ANY OF THESE SYMPTOMS OR IS DIAGNOSED AS HAVING ANY OF THE FOLLOWING CONTAGIOUS DISEASES AND CONSULT YOUR HEALTH CARE PROVIDER AS NEEDED.

BREATHING (DIFFICULT OR RAPID)

This is especially important in an infant under 6 months old. Child must remain home until symptoms disappear! Or we need a note from your physician deciding they may return to the center, without danger to themselves or to the other children and staff.

CHICKEN POX

It usually begins with a mild fever and itchy rash. The rash starts with crops of small red bumps on the stomach or back and spreads to the face and limbs. The red bumps rapidly become blistered, oozy, and then crust over. Your child can safely return to the center when all blisters are dried up and crusted over.

COUGHING (SEVERE)

Child gets red or blue in the face and/or child makes high pitched croupy or whooping sound after he coughs. Child must remain home until symptoms disappear! Or child may return with a note from your physician stating he/she can return to the center, without danger to himself/herself or to the other children and staff.

DIARRHEA

Diarrhea diseases spread very easily among young children. If parents keep children with diarrhea at home, all children will get diarrhea less often. Children with 2 or more episode of diarrhea in 24 hours must stay home and cannot return until the diarrhea is gone without the use of medication..

DIARRHEA CAUSED BY (GIARDIA, SHIGELLA, SALMONELLA AND CAMPYLOBACTER)

Symptoms include fever, severe cramps, vomiting, headache and loose stools. Your child can safely return when he/she has a note from your doctor stating he/she is under care and is free of contagious disease.

FEVER

If your child has a fever, he/she must stay home the entire next day and remain at home until the fever is gone without the use of medication. A fever is defined as a temperature of 101F or above for all children.

FIFTH DISEASE

First stage of illness consists of headache, body ache, sore throat, low grade fever, chills, and bright red rashes on the cheeks. Your child can safely return to the center when he/she has a note from your doctor or symptoms are gone.

HAND, FOOT, MOUTH (Cocksackie)

Usually begins with a moderate fever. Small, round blisters develop inside mouth – usually on tongue and inside of cheeks, or on lips, gums and roof of mouth. Small round fluid filled blisters may appear on palms and soles and between fingers and toes. Spreads through direct contact and is most contagious in first week during mouth sores stage. Child may return with a note from your doctor that states he/she is not contagious.

HEAD LICE (PEDICULOSIS)

The major symptom of head lice is itching caused by the bites of the louse. There is persistent scratching of the head and back of neck. Our Little Learner’s Policy requires treatment, complete lice removal and combing of the hair to remove nits before allowing a child to return to center. A child must be checked for new nits or lice for ten (10) days after treatment begins.

IMPETIGO

This is a very common skin infection and may start as oozing at injured spot on the skin. The face is often involved. The rash looks oozy, red and round and may have a flat honey colored crust, and may be itchy. Your child can safely return to the center **AFTER** treatment has begun and he/she has a note from your doctor that states he/she is not contagious.

PINK EYE (CONJUNCTIVITIS)

The white part of the eyes become pink or red, the eyes may hurt, feel itchy and produce lots of tears and discharge. In the morning the discharge may make the eyelids stick together. Your child can safely return to the center 24 hours after medication has begun and with a note from your doctor stating he/she is not contagious.

PINWORM

For some people, it may cause intense itching; while in others, it may not. Your child can safely return to the center with a note from your doctor stating he/she is not contagious.

RINGWORM

Ringworm appears as a flat, growing ring shaped rash. The edges of the circle are usually reddish and may be raised and itchy. Scalp infection begins as a small bump and spreads outward. On feet, the skin between the toes scales, cracks and blisters. Your child may return to the center with a note from your doctor stating he/she is not contagious.

SCABIES

There is an itchy rash, consisting of red bumps and burrows (short, wavy, dirty looking lines in the skin). The areas most

commonly involved are the sides of the fingers, wrist, elbows, underarms, and belt lines. Your child can safely return with a note from your doctor stating he/she is not contagious.

SKIN OR EYES (YELLOWISH)

These may be signs of Hepatitis. Your child must remain home until symptoms disappear! Or we need a note from your physician stating he/she can return without danger to himself/herself or to the other children and staff.

STREP THROAT

Symptoms include sore throat, fever, tender swollen neck glands, headache, stomachache, and sometimes occur with cough, runny nose or other symptoms. Any child who has a positive culture or test for strep infection may return 24 hours after medication has begun and with a note from your doctor stating he/she is not contagious.

VOMITING

Vomiting is a common symptom of many contagious diseases. Children with 2 or more episodes of vomiting in 24 hours must stay home the entire next day and cannot return until the vomiting is gone without the use of medication.

UNUSUAL SPOTS OR RASHES/ SORE THROAT OR TROUBLE SWALLOWING / INFECTED SKIN PATCHES, CRUSTY, BRIGHT YELLOW, DRY OR GUMMY AREAS OF SKIN / UNUSUALLY DARK TEA COLORED URINE / GRAY OR WHITE**STOOL**

Child must remain home until symptoms disappear! Or we need a note from your child’s physician stating he/she can return to the center, without danger to himself/ herself or to the other children and staff. Bringing your child with any of these symptoms in to the center may cause other children to get sick. If all parents keep sick children at home, everybody’s children will stay healthier. In the end, this will mean fewer lost workdays and fewer illnesses for parents, too!

Revised 6/19

Performance Standards: 1304.20(a)(1), 1304.20(e), 1304.22(a), 1304.22(b), and 1302.22(c)