



# Health Guidelines

## For Child Care Providers

Handout #35

*Healthy Children, Strong Families, Caring Communities*

Child care providers should perform a quick health assessment of each child every day upon arrival and departure. This allows you to make a judgment about what is typical for each child, rather than to diagnose an illness. It also identifies problems early.

Providers should do their quick-check not in a formal exam routine, but as a casual observation in their initial contact as they welcome each child. You are checking easily observable, simple signs of well-being. A health check is not a medical examination. It is not the way to enforce your policies with a parent. It is not a way to find reasons to exclude children. The goal is to know your child better and to provide quality care.

In a child care setting where lots of people are coming and going at the same time, it can be challenging to take a moment with each child. However, this welcoming routine can establish many things and is good child development policy. This contact helps you better understand each child, helps the child feel comfortable and good about themselves, reduces the spread of illness by excluding children with obvious signs of illness and fosters better communication with parents.

### Signs to Observe

When conducting a morning health check, you should watch for the following:

- General mood (happy, sad, cranky)
- Activity level (sluggish, sleepy)
- Skin color and temperature
- Unusual spots and rashes
- Swelling and bruises
- Sores
- Severe coughing, sneezing
- Discharge from nose, ears or eyes
- Breathing difficulties
- Unusual behavior



### ***Use all of your senses to check for signs of illness:***

**Listen** to what the child and parents tell you about how the child is feeling. Is the child's voice hoarse, is he having trouble breathing or is he coughing?

**Look** at the child at their level. Observe for signs of crankiness, pain, discomfort or tiredness. Does the child look pale, have a rash or sores, a running nose or eyes?

**Touch** the child's cheek and neck for warmth, clamminess or bumps as a casual way of greeting.

**Smell** the child for unusual odor in their breath, diaper or stool. This should be done in a discreet manner as you give each child a good morning hug.

## Exclusion/Readmission Due to Illness

Disease	If a child in your care has been diagnosed with this disease, you should ...	When to allow a child to return
<b>Bacterial Meningitis</b>	<ul style="list-style-type: none"> <li>• Exclude the child from child care. (In most cases, the child will be hospitalized.)</li> <li>• Immediately contact your health Department to report the case of meningitis.               <ul style="list-style-type: none"> <li>•• Ask whether you need to contact the parents of the other children in your facility. If so, in cooperation with the Health Department, contact the parents of the children in your facility.</li> <li>•• Follow any preventive measures the Health Department recommends.</li> </ul> </li> </ul>	When the Health Department tells you it is safe.
<b>Chickenpox</b>	<ul style="list-style-type: none"> <li>• Temporarily exclude the sick child from the child care setting.</li> <li>• Notify parents.</li> </ul>	6 days after the rash begins or when blisters have scabbed over
<b>Diarrheal Disease</b>	<ul style="list-style-type: none"> <li>• Temporarily exclude the sick child from the child care setting.</li> <li>• Carefully follow the group separation, handwashing and cleaning procedures.</li> <li>• If you know the diarrhea is caused by bacteria or a parasite such as shingella campylobacter, E. coli, Cryptosporidium, salmonella or giardia, ask the Health Department:               <ul style="list-style-type: none"> <li>•• Whether other ill and well children and adults should be tested.</li> <li>•• When to allow the sick child to return to child care.</li> </ul> </li> </ul>	When the child no longer has diarrhea. However, some of these diseases require negative stool cultures; allow the child to return when the Health Department tells you it is safe.
<b>Diphtheria</b>	<ul style="list-style-type: none"> <li>• Temporarily exclude the sick child from the child care setting.</li> <li>• Immediately contact the Health Department to ask what additional preventive measure should be taken.</li> <li>• Observe all children and adults for sore throats for 7 days.</li> <li>• Anyone developing a sore throat should see a physician.</li> <li>• Advise parents that their child should see a physician if:               <ul style="list-style-type: none"> <li>•• The child develops a sore throat.</li> <li>•• The child is incompletely immunized against diphtheria.</li> <li>•• Carefully follow good hygiene procedures.</li> </ul> </li> </ul>	When the Health Department tells you it is safe.
<b>Epi-glottis</b>	<ul style="list-style-type: none"> <li>• A child diagnosed with this disease will probably be hospitalized.</li> <li>• Contact your Health Department and ask what preventive measures to take.</li> <li>• Carefully follow good hygiene procedures.</li> <li>• IMPORTANT: H-flu is not the same germ as flu influenza. H-flu can cause SERIOUS ILLNESS in young children. If a case of H-flu occurs in your facility, TAKE ALL ACTIONS ABOVE.</li> </ul>	Not due to H-flu: When treating physician tells you it is safe. Due to H-flu: When the Health Department tells you it is safe.
<b>Hand, Foot &amp; Mouth Disease</b>	<ul style="list-style-type: none"> <li>• Exclude if child has open, draining lesion on hand or has lesions in the mouth AND is drooling.</li> </ul>	When lesions heal or drooling ceases.
<b>Head Lice</b>	<ul style="list-style-type: none"> <li>• Temporarily exclude the sick child from the child care setting.</li> <li>• Contact your Health Department or health consultant for advice about examining, treating and readmitting exposed children and adults.</li> <li>• Check the other children and staff for lice or nits (eggs of lice).</li> </ul>	24 hours after treatment or after all nits have been removed.
<b>Hepatitis</b>	<ul style="list-style-type: none"> <li>• Temporarily exclude the sick child from the child care setting. Immediately notify your Health Dept. (They may recommend immune globulin shots, and possibly vaccination for children and adults and additional preventive measures.) Ask for specific recommendations on notifying parents and on exclusion policies. Follow good hygiene procedures.</li> </ul>	1 week after illness begins (onset of jaundice or yellow appearance.)
<b>Influenza</b>	<ul style="list-style-type: none"> <li>• In the absence of an epidemic, influenza is difficult to diagnose and usually the diagnosis comes after the end of the infectious period, so exclusion will be impractical.</li> </ul>	N/A
<b>Measles</b>	<ul style="list-style-type: none"> <li>• Temporarily exclude the sick child from the child care setting.</li> <li>• Immediately notify the Health Department.</li> <li>• Identify children and adults not immunized. Make sure they get vaccinated and/or exclude them from the child care setting until 2 weeks after rash appears in the last child who had measles.</li> </ul>	5 days after rash appears and the Health Department tells you it is safe.
<b>Mumps</b>	<ul style="list-style-type: none"> <li>• Temporarily exclude the sick child from the child care setting.</li> <li>• Carefully follow good hygiene practices.</li> <li>• Notify Health Department</li> </ul>	9 days after swelling begins.
<b>Pertussis (Whooping Cough)</b>	<ul style="list-style-type: none"> <li>• Temporarily exclude the sick child from the child care setting.</li> <li>• Immediately notify your Health Department.</li> <li>• Exclude, until diagnosed by a physician, any other child who develops a cough within 2 weeks of the initial case.</li> <li>• Carefully follow good hygiene practices.</li> </ul>	5 days after antibiotics are begun and the Health Department tells you it is safe.

## Exclusion/Readmission Due to Illness

Disease	If a child in your care has been diagnosed with this disease, you should ...	When to allow a child to return
<b>Pinworms</b>	<ul style="list-style-type: none"> <li>Temporarily exclude the sick child from the child care setting.</li> </ul>	24 hours after treatment and bathing.
<b>Pneumonia</b>	<ul style="list-style-type: none"> <li>A child diagnosed with this disease will probably be hospitalized.</li> <li>Contact your Health Department and ask what preventive measures to take.</li> <li>Carefully follow good hygiene procedures.</li> <li><b>IMPORTANT:</b> H-flu is not the same germ as "flu" or influenza. H-flu can cause <b>SERIOUS ILLNESS</b> in young children. If a case of H-flu occurs in your facility, <b>TAKE ALL ACTIONS ABOVE.</b></li> </ul>	Not due to H-flu: When treating physician tells you it is safe. Due to H-flu: When the Health Department tells you it is safe.
<b>Ringworm</b>	<ul style="list-style-type: none"> <li>Temporarily exclude the child if the lesion cannot be covered.</li> </ul>	If unable to cover lesion, after treatment begins and the lesion starts to shrink.
<b>Rubella (German or 3-day measles)</b>	<ul style="list-style-type: none"> <li>Temporarily exclude the child from the child care setting.</li> <li>Immediately notify your Health Department.</li> <li>Advise any pregnant women in the facility who are not known to be immune to see their physicians.</li> <li>Carefully follow good hygiene.</li> </ul>	6 days after rash appears and Health Department says it is safe.
<b>Scabies</b>	<ul style="list-style-type: none"> <li>Temporarily exclude the child from the child care setting.</li> <li>You may contact the Health Department for advice about identifying and treating exposed child and adults.</li> </ul>	24 hours after treatment has begun.
<b>Streptococcal</b>	<ul style="list-style-type: none"> <li>Temporarily exclude the sick child from the child care setting.</li> <li>Contact your Health Department if 2 or more children are diagnosed with strep throat.</li> </ul>	24 hours after antibiotics are begun.
<b>Active Tuberculosis TB Infection</b>	<ul style="list-style-type: none"> <li>Immediately notify your Health Department</li> <li>Children with TB may usually remain in child care after treatment as long as they are receiving appropriate treatment.</li> </ul>	When the Health Department tells you it is safe.

## Examples of How Some Childhood Disease are Spread

How the Disease is Spread	Behaviors that Spread	Examples of Diseases	Possible Symptoms
<b>THROUGH AIR OR RESPIRATORY SYSTEM</b>			
<ul style="list-style-type: none"> <li>Breathing germs in the air</li> <li>Contact with infected saliva and mucous</li> </ul>	<ul style="list-style-type: none"> <li>Coughing or sneezing into the air</li> <li>Kissing on the mouth</li> <li>Sharing mouthed toys</li> <li>Wiping noses without thorough handwashing</li> <li>Poor ventilation</li> </ul>	<ul style="list-style-type: none"> <li>Cold</li> <li>Flue</li> <li>Measles</li> <li>Pink eye</li> <li>Chickenpox</li> <li>Tuberculosis (TB)</li> </ul>	<ul style="list-style-type: none"> <li>Coughing</li> <li>Fever</li> <li>Rash</li> <li>Runny nose</li> <li>Sore throat</li> <li>Earache</li> </ul>
<b>THROUGH STOOL OR ORAL TRANSMISSION</b>			
<ul style="list-style-type: none"> <li>Mouth contact with items and hands contaminated by infected stool</li> </ul>	<ul style="list-style-type: none"> <li>Diapering and toileting or food preparation without thorough handwashing</li> <li>Sharing mouthed toys</li> <li>Unsafe food preparation</li> <li>Not disinfecting diapering areas</li> </ul>	<ul style="list-style-type: none"> <li>Salmonella</li> <li>Shingella</li> <li>Giardia</li> <li>Pinworms</li> <li>Hand, foot &amp; mouth disease</li> <li>Hepatitis A</li> <li>Polio</li> <li>E.coli</li> </ul>	<ul style="list-style-type: none"> <li>Stomach ache</li> <li>Nausea</li> <li>Vomiting</li> </ul>
<b>THROUGH DIRECT CONTACT</b>			
<ul style="list-style-type: none"> <li>Contact with infected hair, skin and objects</li> </ul>	<ul style="list-style-type: none"> <li>Touching skin or hair which is infected</li> <li>Sharing clothin, hats and brushed which are infected</li> </ul>	<ul style="list-style-type: none"> <li>Herpes</li> <li>Ringworm</li> <li>Scabies</li> <li>Head lice</li> <li>* Impetigo</li> <li>Chickenpox</li> </ul>	<ul style="list-style-type: none"> <li>Rash</li> <li>Oozing sores</li> <li>Itching</li> <li>Visible nits or eggs</li> </ul>
<b>THROUGH BLOOD TRANSMISSION</b>			
<ul style="list-style-type: none"> <li>Contact with infected blood and sometimes other body fluids</li> </ul>	<ul style="list-style-type: none"> <li>Sexual contact</li> <li>Changing bloody diapers without gloves</li> <li>Providing first aid without gloves</li> <li>Getting infected blood and body fluids into broken skin, eyes or mouth</li> </ul>	<ul style="list-style-type: none"> <li>HIV/AIDS</li> <li>Hepatitis B</li> <li>Cytomegalovirus (CMV)</li> </ul>	<ul style="list-style-type: none"> <li>Fatigue</li> <li>Weight loss</li> <li>Yellow skin</li> <li>Weakened immune system</li> </ul>

# Notice of Exposure to Contagious Disease

Dear Parent or Guardian:

Your child may have been exposed to the following contagious disease

\_\_\_\_\_

on \_\_\_\_\_

The signs of disease you should watch for are: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Which may appear in \_\_\_\_\_ days (incubation period). If your child develops these signs, do not bring him/her to child care until you have contacted your health provider for instructions.

The disease is contagious \_\_\_\_\_ and spread by \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please take appropriate precautions to avoid its spread.

Should you have any questions, please call your health care provider.

Additional comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_ Program \_\_\_\_\_

Phone(s): \_\_\_\_\_