

SICK CHILD POLICY

A. **HEALTH REQUIREMENTS:** All children entering my childcare home must be up to date on all shots unless there is a medical reason (documentation is required). All children also must have had a well child check within six months before enrolling into my childcare.

If a child is ill in any way, I will not, under any circumstances, be able to keep him/her. This rule is enforced not only for my protection but it is for the other children in my care as well. It is my policy to notify parents immediately when a child becomes ill and to make arrangements for the child to be picked up. I will need for the child to be picked up within 1 hour of my phone call.

B. **SICK/EXCLUSION POLICY:** I have sought the advice of fellow childcare providers, and have come up with the following sick policy. For the health of not only my family, but also other children in my care and their families, this policy will be strictly enforced.

If a child is ill, you will need to call me by 9:00 pm the night before or a minimum of one hour before your contracted arrival time. Should your child become ill during his/her time in my home, you will be notified and I will determine the best way to handle the situation, which may include your child being sent home. It is in everyone's best interest that a sick child stays home. If a child has any of the symptoms listed below, they will not be permitted to attend care until 1 full day has passed AFTER the last incidence of fever, vomiting, severe diarrhea, or until 36 full hours AFTER medical treatment has begun as prescribed by a physician. The symptoms include:

- Fever
- Skin rash other than diaper rash or prickly heat – child will not be allowed to come for care until a medical exam (written documentation from physician required) has indicated it is not a communicable disease.
- Diarrhea – increased number and water content of stools that cannot be contained within the diaper or underwear.
- Vomiting
- Any parasitic infestation (lice, scabies, etc.)
- In the event of head lice, children must be treated and nit free BEFORE returning. If a case is found in my home, a notice will be given to all parents and all heads in my home will be checked.
- Pink eye
- Chicken Pox – until all blisters have dried and formed scabs, usually about 6 days after the onset of the rash.
- Any other communicable disease (tuberculosis, etc.)
- **NOTE:** A good rule of thumb to follow is if you have to give your child any medication to relieve any of the above-mentioned symptoms before you bring them, **PLEASE KEEP THEM HOME or ask my advice!**
- **Ask yourself: are you medicating your child when you are home with them? If so, why? Are you bringing that same medicine for them to take during the day?** Have you advised me that you are administering medicine while the child is not in attendance if you did not bring the medicine with you for use while your child is here?
- Pediatricians tell me that the first two days of illness are generally the most contagious time. Although winter runny noses are somewhat unavoidable, please use your best judgment, and call me if you are unsure. **If you repeatedly attempt to bring an obviously ill child, this may be grounds for immediate termination of childcare services.**
- Further, there are times when a child is not that ill, but is uncomfortable and really needs the comfort of home. For example, until 36 hours after the first dose of antibiotic to treat ear infection; or when irritability, a strong cough, and/or a thick nasal discharge are present. **At those times, I will strongly urge you to keep your child at home, and may insist on it.** I ask that when deciding if your child should come, please give consideration to the health of the other children and myself. Again, **If you repeatedly attempt to bring an obviously ill child, this may be grounds for immediate termination of childcare services.**

Children suspected of having a communicable disease will not be able to come to my home. In the event a communicable disease develops during the day, the child's parents will be contacted immediately for the child to be picked up. Children must leave my home within 1 hour of my phone call.

When your child is sent home from care for any one of the **FOLLOWING** reasons listed **Below** you must provide me with a doctor's referral and signed by the physician – a note written on a physician's letterhead is also acceptable. Additionally, I you and I must discuss that you intend to return the child to care before they are allowed to return.

COMMUNICABLE DISEASES:

1. Chicken Pox
2. Pink Eye
3. Any parasitic infestation (lice, scabies, etc)
4. Molluscum Contagiosum (childhood warts)
5. Hand, Foot and Mouth Disease

Many times when a young child is ill they may NOT exhibit "classic" signs of the illness (fever, vomiting, etc.) but will be excessively fussy and/or require constant cuddling and attention. While I believe in providing as much cuddling as desired, if a child is ill and requires my undivided attention this distracts from my ability to provide quality care to all the children in the group. Therefore, if your child reaches a point when he/she requires constant attention, will not play, cries continuously, whines and wants to be held constantly, etc., then your child will need to be home.

*You should expect that any time a new child is introduced to the group, colds and other minor illnesses are likely to occur until everyone's immune systems have adjusted to the new exposures.

*Please advise me whenever a member of your family has an illness so that I can be alert to the possibility of symptoms developing in the child or group. DO NOT bring your child if any other member of your family has the NORO VIRUS.

Children may return to my care only at such time as they will no longer endanger the health of the other children. They must be able to participate in daily activities and the following conditions must have been met:

- Absence of Fever for 36 hours
- Nausea, vomiting or diarrhea has subsided for 36 hours
- Children must have been on antibiotics for a period of 36 hours
- Physician has approved readmission to care
- Chicken pox lesions are completely crusted over
- Scabies are under treatment
- Lice are under treatment and no nits are present on hair
- Pinworm treatment has occurred 36 hours before readmission
- Lesions from impetigo are no longer weeping
- Conjunctivitis has diminished and been treated to the point that the eyes are no longer discharging
- Molluscum Contagiosum is kept covered by clothing or band aids supplied by you.
- The child has completed the contagious stage of the illness

Please note: NO child will be readmitted after a communicable disease without a statement from a medical facility or physician and a prior agreement with me for them to return.

C. MEDICATIONS:

Due to recent changes in Daycare Liability Insurance offered in Michigan I CANNOT administer prescription or even some non-prescription medication to your child. As a rule all medications must be given by you prior to arrival. If the medication is a 4 or 6 hour dose, please be sure to make arrangements to stop by before nap to administer the necessary dose.

For non-prescription medication, the following can be supplied by you for the duration and method of administration specified on the manufacturer's label for the age, and or weight, of the child needing the over the counter medical help. Over the counter medications supplied by you may include any of the following:

- Earloop face mask for coughing & sneezing
- Diaper Ointments
- Spray Suntan lotion
- Bug spray – (no DEET)
- Topical ointments

I will administer these types of medications as long as it is listed on the NON-PRESCRIPTION MEDICATION RECORD form in your file. **You must provide medications for your own child** and although I do have some non-prescription medications on hand, I keep them for emergency purposes ONLY. Additionally, all non-prescription medications may not be administered for more than five consecutive days. All non-prescription topical ointments, creams or lotions may not be administered for more than seven consecutive days when used for skin irritations.

Although I am trained in infant and child CPR, basic first aid and recognition of communicable childhood diseases, I do not pretend to be a doctor, and will not under any circumstances provide any medications, including vitamins. The State requires the "**MEDICATION PERMISSION AND INSTRUCTIONS (BCAL-1363)**" form or a "**NON-PRESCRIPTION MEDICATION RECORD**" form to be properly filled out. I will not send a child home with a common cold unless accompanied by a fever or other severe symptoms such as severe coughing, a runny nose that can't be contained and is being rubbed on toys and other children, or a thick nasal discharge that impairs breathing.

Colds and flu's spread quickly in a tight knit environment such as mine; therefore, if your child arrives and is in (or develops) an obvious need of a non-prescription medication to minimize their severe cold/flu symptoms, and you have failed to administer it, you will be called and asked to administer it in 1 hour. You will alternatively be given the opportunity to keep your child home until he or she is no longer presenting severe cold/flu symptoms so as to endanger others by not having the appropriate non-prescription relief.

Mothers Signature: _____

Date: _____

Fathers Signature: _____

Date: _____

Providers Signature: _____

Date: _____