



## NECDC HEALTH & SAFETY POLICIES

### FOR PARENTS

“The risk of transmission of the agents that cause infectious diseases is increased when children are gathered into groups for any reason. This risk is particularly significant in day care because of the many close physical interactions between children and adults.

The majority of daycare programs attempt to exclude ill children. However, illness among young children is frequent and many parents want to bring mildly ill children to day-care programs. This results in a struggle between staff and parents and a desire for absolute criteria to use to determine when a child’s illness requires exclusion.

Day cares expect parents to keep sick children home. In turn, parents expect day-care programs to care for mildly ill children so they can attend work. The fact is that children acquire their illnesses from day-care contacts. The resulting tensions strain parent/staff relationships and can negatively affect the quality of the day-care experience.

Unfortunately, absolute criteria for exclusion of ill children does not exist. Day-care programs base their exclusion policies on two issues: (1) risk of transmission of infectious diseases and (2) the demand of sick children for increased adult attention, which may exceed the resources of the day-care program” (Quoted from Pediatrics in Review)

The health policy for NECDC is designed to best meet the needs of our children, parents and staff. The policy has been in place since the center opened in 1948, but we keep rewriting it in attempt to clarify and better define these policies. We consult with doctors, nurses and other health care professionals in formulating our health policies. No policy will eliminate the problem of illness endemic to group care – especially of young children – no policy will satisfy all the populations the center serves, and no policy can entirely eliminate the element of subjective judgment inherent to individual situations.

Center health policies may differ from your child’s pediatrician’s opinion. Group care conditions differ vastly from individual care situations. NECDC’s Policy **may override** your child’s doctor’s recommendation.

POLICY INFORMATION FOR PARENTS  
*(Minnesota Rules, part 9503.0090, subpart 1)*

Health consultation. NECDC contracts with MN Child Care Health Consultant who reviews the center's health policies and practices to certify that the following health policies are adequate to protect the health of children in care.

NECDC provides care to infants, toddlers and preschoolers. The Health Consultant reviews our infant classroom monthly and does a full center review annually. The health consultant will notify the center if there are proposed changes to be made in the centers health policies or practices or an outbreak of a contagious reportable illness. The Health Consultant works directly with DHS Division of Licensing for child care programs to ensure new changes are communicated.

**Health information at admission:**

Before your child is admitted to NECDC, a current physical examination or well child check of the child signed by the child's source of medical care is required.

This information must include the date of the child's most recent physical exam (within six months), and be signed by the child's source of licensed health care. Your child may be excluded if their physical has expired until an updated physical has been submitted.

**Reexamination:**

NECDC requires a new health record/summary for children already enrolled in the program at a minimum, an updated report of physical examination signed by your child's source of health care is required at the following ages:

**4 months, 6 months, 9 months, 12 months, 15 months, 18 months, 2 years, 2½ years, 3 years and 4 years.**

**Immunization Record:**

This record must give dates (month, day, and year) of immunizations your child has received. It must be current and is due on admission. Records must be updated whenever your child receives additional immunizations. If your child does not get specific immunizations you must sign a waiver that is notarized and dated annually.

**Dietary modification:**

If your child requires special dietary needs written permission from the child's primary care provider and parent/legal guardian is required.

Dietary modifications for religious reasons require only written parent/guardian permission.

**IN CASE OF INJURY**

Basic first aid will be performed. In the event of a serious injury, a parent will be notified. If the parents are not available, the emergency numbers on the child's emergency card will be called. If the person(s) cannot be reached, the child will be taken to the nearest

medical facility as determined by the medical personnel unless the parents have designated a different emergency plan.

### **INFECTIOUS DISEASES**

When a child in our care has been medically diagnosed with a infectious disease (measles, mumps, hepatitis etc) we will post an infectious disease info sheet regarding the symptoms and diagnosis. We will follow the appropriate health authorities' recommendations to provide information to parents/guardians of all exposed children.

Your child may only return after consultation with our Health Nurse on your child's diagnosis.

The child care program will notify the parents/guardians of exposed children on the same day or within 24 hours by:

- [ X ] A written notice that will be posted on sign in/out books.
- [ X ] A written notice or an email will be sent home for parent/guardian to read.
- [ X ] Phone call if necessary and possible.

### **COMMUNICABLE DISEASES**

Parents/guardians are required by State laws and our center policies to inform the center within 24 hours, exclusive of weekends/ holidays, if their child is diagnosed with a communicable disease. (ie; pink eye-conjunctivitis, strep throat, head lice, RSV etc)

The Department of Human Services requires that we exclude a child with an illness or condition that the Commissioner of Health determines to be contagious and our Health Nurse determines has not had sufficient treatment to reduce the health risk to others.

- Who is not able to participate in childcare program activities with reasonable comfort, including outdoor play.
- Who requires more care than staff can provide without compromising the health and safety of other children in care.

### **IF YOUR CHILD BECOMES ILL AT THE CENTER**

If your child becomes ill while at the center, we will call you; if you cannot be reached your emergency contacts will be notified and asked to pick up your child. Please ensure that emergency contacts are aware that they have been listed on your emergency contact list. Please be sure to notify us every day your work phone number changes, so that you are most efficiently reached. Children with contagious illnesses must be picked up within a reasonable amount of time up to an hour to limit their exposure to the other children

### **COMPLAINS OF PAIN**

Signs/symptoms of disease including: Severe coughing, sneezing, breathing difficulty, discharge from the nose, ears or eyes, diarrhea or vomiting, ear pain, etc.. Should any of these symptoms present themselves the child will be excluded until a medical evaluation

allows inclusion. A doctor's note will be sent with your child for a doctor evaluation of the symptoms teachers have noticed while in our care.

In order to minimize the spread of illness among children, it is important that parents have arrangements available for alternative care whenever your child shows signs of illness.

The following symptoms will necessitate exclusion from the center:

### **CONJUNCTIVITIS**

Pink or red conjunctivitis with white or yellow discharge, often with matted eyelids after sleep, and including a child with eye pain or bright redness of the inner lower eyelids or skin surrounding the eye is reason for exclusion. A child is excluded the following day from care. Pink eye or conjunctivitis can be bacterial or viral. Child must have received 24 hours of medication before returning.

### **DIARRHEA**

Bowel movements that are extremely loose, watery and frequent are reasons for exclusion. A child with 3 or more during their time in child care will be excluded. A child should be free from diarrhea for up to 36 hours before returning to the center.

**EXPLANATION** – Diarrhea in children is an extremely contagious illness. Bowel movements that cannot be contained in a diaper or a toilet pose a high risk of contagion. Young children, especially infants, may have frequent or loose stools regularly or in response to a variety of conditions, but these are different from diarrhea. One or two meals should be eaten during the "24 hours free from diarrhea" (overnight with no meals eaten should not be considered 24 hours free from diarrhea). Secondary symptoms of crying, pain, refusal to eat, etc., must be considered.

### **EAR INFECTIONS**

Ear infections are not contagious however, ear infections cause pain making children not wanting to fully participate in daily activities. If a child has been prescribed an antibiotic for an ear infection NECDC will exclude the child the following day from care.

### **FEVERS**

A temperature of 101° F or higher is reason for exclusion from group care. A child who has been sent home with a fever of 101° F or higher may not return to the center the following day. Children must be fever free for up to 36 hours without any medication.

### **MOUTH SORES**

Mouth sores with drooling are reason for exclusion, unless the child's pediatrician states the child is non-infectious.

### **RASHES**

Rashes must be physician diagnosed for a child to be in the center.

### **SEVERE COLDS/UPPER RESPIRATORY ILLNESS**

Colds with extreme symptoms of excessive coughing, sneezing, thick nose drainage that is yellow or green and that interferes with a child's ability to eat, sleep or play are reason for exclusion.

### **TEETHING**

Teething is not a reason for exclusion. Teething can cause low-grade fever (under 100 F), crankiness, loose bowel movements and a clear, runny nose. Teething does not cause the exclusionary conditions described above.

## **VOMITING**

Vomiting is a reason for exclusion. As with diarrhea, 24 - 36 hours should pass (with at least one or two meals eaten) without an episode of vomiting before a child returns to the center.

**EXPLANATION** – infants can spit up or throw up for many different reasons. With no other symptoms present we would wait to see if an infant threw up a second time before calling the parent to pick up the child. Vomit presents a very defined odor that is identifiable as having a sick smell.

## **SYMPTOMS OF CONTAGIOUS CHILDHOOD DISEASE**

Symptoms of contagious childhood diseases are reason for exclusion. Parents should notify us if their child has been exposed to Measles, Chicken Pox, Roseola, Conjunctivitis (pink eye), Impetigo, Pediculosis (head lice) RSV, Bronchiolitis, Strep Throat, Ringworm and Coxsackie. Exposure to a contagious disease is not reason for exclusion.

## **SIGNS OF POSSIBLE SEVERE ILLNESS**

Signs of possible severe illness, including unusual lethargy, undefined irritability; persistent discomfort crying or difficult breathing are reasons for exclusion.

## **CARE OF ILL OR INJURED CHILDREN**

If your child becomes ill or injured while in care, he/she will be isolated away from other children under supervision of a staff person. You or your designated alternate will be contacted to pick up your child within an hour. Until you arrive, your child will be monitored and comfort measures provided according to program procedures. Sick children spread illnesses.

## **First Aid/CPR**

In the event of any injury or illness, trained staff will administer First Aid and/or CPR, when appropriate. If staff decides this is an emergency, 911 will be contacted to provide emergency first aid. If necessary, the emergency medical service will transport your child to a medical facility as designated by emergency services. A parent/guardian or alternate listed on the Emergency Card provided by the parent will be contacted as soon as possible. An attempt to contact your child's source of health care may also be made.

**Staff will not transport children.**

## **Medications**

**Prescription medications** will only be given with **written authorization** from the child's licensed health care provider (i.e., prescription label) and parent/guardian. Please let your child's teacher know about medication your child is taking at home, too. Our staff will call you if any side effects from the medication are observed.

Please complete a Medication Permission Form if your child needs a medication while in our care. We suggest keeping a blank copy of this form at home so it can be completed before coming to the center. Those are available on the bulletin board in the back hallway. Forms are to be given to the office for completion.

Prescription medications will be given only as prescribed by a licensed health care provider (physician, physician assistant, dentist or certified nurse practitioner). The prescription must be current, in the original container and may be given only to the child whose name appears on the label.

Please ask the pharmacy to **split the medication into 2 containers** -- one for home and one for the center.

Bring a copy of the drug information sheet that comes with the medication or write the common side effects on the Medication Permission Form.

**Nebulizer medications** that are in single dose containers must be brought to the center in the original container with a current, clearly written prescription label on the container. The prescription label must indicate the child's name, prescribing licensed health care provider's name, name of the medication, medication strength, amount to be given, how often to give and what it is to be mixed with, if applicable.

**For medications which are to be given long term** we require an Individual Child Care Plan be signed by you and the child's licensed health care provider. Example – medication for asthma.

This also includes as needed (prn) over the counter medication such as Tylenol (acetaminophen) and Ibuprofen for teething. Due to how quickly young children under 2 years of age change in weight, NECDC requires a 3 week renewal for OTC medications for the relief of teething pain.

#### **Over the Counter Medication :**

NECDC will give **over the counter** medications with written parental permission and instructions. Medications must be in unopened manufacturer container.

**Over the counter products will only be used according to the manufacturer's instructions. If the dosage or instructions differ from the manufacturer's instructions, written instruction from a licensed health care provider will be needed.**

Diaper rash products, and sunscreens are an exception, and need written parental approval only. Powders and cornstarch preparations will not be used because they may promote or hide infections, and can be inhaled. NECDC will purchase 1 brand of sunscreen annually for center wide use. Parents will be asked to sign a permission slip to use the brand purchased.

Containers must be labeled with child's **full first and last name and date.**

Outdated medications will not be given.

All medications must have a legible label on the container. Your medication container will be returned to you when it is completed.

## **OTHER INFORMATION:**

### **Accidents**

First aid kits are kept in each classroom and are brought outside to the playground. All non-emergency accidents will be documented on an accident report. It will be given to the parent for their review and signature. Parents may request a copy. The original copy will be kept in the child's file.

### **Allergies**

If your child has allergies, please discuss them in detail with the teacher and director. For food allergies, a written description signed by parent and doctor must be on file and updated every year. The staff of the center will take appropriate precautions. If at any time your child develops an allergy, please let us know immediately.

**Nut-free zone:** Due to an increase in children with nut allergies, we attempt to be a nut-free zone. Please keep this in mind when providing snacks for the classroom during special occasions. This includes peanuts as well as tree nuts such as almonds, cashews, walnuts, pine nuts (pinon), etc.

### **Infection Control and Personal Hygiene**

Children are encouraged to develop desirable habits of personal hygiene, including washing hands after toileting, diapering, and before and after meals. Eating a variety of nutritious foods is also encouraged. In addition to instructing children in these habits, teachers model the behaviors.

### **Medication Storage**

Medication prescribed for an individual child must be kept in the original container bearing the original pharmacy label, which shows the prescription number, date filled, doctor's name, directions for use, and child's name. Medication needing refrigeration is kept in the refrigerator out of the reach of children located in the kitchenette. Parents need to check expiration dates on medications. We reserve the right to dispose of expired medications.

### **Pandemic**

In the event of a pandemic in our area, the children's center may close down for an undetermined amount of time to ensure less spreading of disease. We will follow any requirements issued by the Department of the Public Health.