Little Hands & Feet Day Care

ILLNESS POLICY

PARENTS AGREE TO KEEP THEIR CHILD/CHILDREN AT HOME OR SEEK ALTERNATE CARE ARRANGEMENTS FOR THE FOLLOWING CONDITIONS:

- Pain any complaints of unexplained or undiagnosed pain
- Fever (100°F/38.3°C or higher)
- Sore throat or trouble swallowing
- Headache or stiff neck
- Unexplained diarrhea or loose stool combined with nausea, vomiting or abdominal cramps. The child will be kept at home until all symptoms have stopped.
- Nausea or vomiting
- Sever itching of body and scalp
- Known or suspected communicable diseases.

IT IS REQUIRED TO KEEP (OR TAKE) A CHILD HOME WHEN THE CHILD

- Is suffering from one or more of the above symptoms
- Is not well enough to take part in the activities at the daycare

ULTIMATELY THE CARE OF THE CHILD IS THE PARENT'S RESPONSIBILITY

Parents will inform the daycare within 24 hours of a diagnosis of a serious illness or contagious disease of a communicable nature in the family. This is to protect my family and the other families who attend the daycare. Failure to do so is grounds for immediate termination of care.

Parents agree that a child will be symptom free, without the aid of symptom reducing medications such as Tylenol, for a full 24 hours prior to returning to daycare. We reserve the right to ask for a note from your family doctor, depending on the illness/disease.

MEDICATIONS:

**Prescription oral medications can only be administered to a child by a family member

Topical lotions are permitted under the following conditions:

- Parent gives written permission to the caregiver, with full instructions as to dosage, and times to administer medication.
- All prescribed medications must have the child's name on the prescription bottle.
- Non-prescription medications will be administered as per recommended dosages on medicine bottle.

CARE OF A SICK CHILD AND NOTIFICATION OF PARENTS

When a child becomes ill, we will make the child comfortable in a quiet place where he/she can rest and will be closely supervised.

Parents will be notified immediately and agree to begin to making alternate work arrangements or arrangements for alternate care. If your child is seriously ill, you or an alternate must come for the child IMMEDIATELY. If we cannot reach a parent, we will call an emergency contact listed on the registration form.

ILLNESSES REQUIRING EXCLUSION FROM DAY CARE

- Fever, defined by the child's age as follows until medical evaluation indicates inclusion:
 - Infants 4 months old and younger rectal temperature greater than 101° F or auxiliary (armpit) temperature greater than 100° F even if there is no change in their behavior.
 - Infants and children older than 4 months (accompanied by behavior changes or other signs or symptoms of illness) – rectal temperature of 102° F or greater, oral temperature of 101° F or greater, or auxiliary (armpit) temperature of 100° F or greater.
- Signs possible severe illness, including unusual lethargy, irritability, persistent crying, difficult breathing.
- Uncontrolled diarrhea defined as an increased number of stools compared with the child's normal pattern, with increased stool water and/or decreased form that is not contained by the diaper or toilet use.

- Vomiting two or more times in the previous 24 hours unless the vomiting is determined to be due to a non-communicable condition and the child is not in danger of dehydration.
- Mouth sores with drooling unless the child's physician or local health department authority states the child is non-infectious.
- Rash with fever or behavior change until a physician has determined the illness not to be a communicable disease.
- Purulent conjunctivitis, defined as pink or red conjunctiva with white or yellow eye discharge, often with matted eyelids after sleep, and including a child with eye pain or redness of the eyelids or skin surrounding the eye.
- Infestation (e.g., scabies, head lice), until 24 hours after treatment was begun.
- Tuberculosis, until the child's physician or local health department authority states the child is non-infectious.
- Impetigo, until 24 hours after treatment was begun.
- Streptococcal pharyngitis, until 24 hours after treatment has been initiated, and until
 the child has been afebrile for 24 hours.
- Ringworm infection (tinea capitis, tinea corporis, tinea crusis, and tinea pedis) until 24 hours after treatment was begun.
- Shingles, only if the sores cannot be covered by clothing or a dressing, until the sores have crusted.
- Pertussis, which is laboratory confirmed, or suspected based on symptoms of the illness, or suspected because of cough onset with 14 days after having face-to-face contact with a laboratory confirmed case or pertussis in a household or classroom, until 5 days of appropriate chemoprophylaxis (currently, erythromycin) has been completed.
- Mumps, until 9 days after onset of parotid gland swelling.
- Hepatitis A virus infection, until 1 week after onset or illness or until after immune serum globulin has been given to appropriate children and staff in the program, as directed by the responsible health department.
- Measles until 6 days after the rash appears.
- Rubella until 6 days after the rash appears.

1	If you have any	questions or concerns,	please contact us	PRIOR to I	bringing
1	your child to day	/ care.			

I have read the above policy and agree to abide by the rules and regulations.			
X	Date:		
Relationship to Child:			