

CHILDREN UNLIMITED HEALTH INFORMATION, POLICIES, AND PROCEDURES

The health, safety, and well-being of our children, families, and staff are always our highest priorities. The pandemic highlighted the importance of our community working together to provide the safest and healthiest possible environment for our children, families, and staff. The following health information is subject to change if situations change and/or new information becomes available.

Understanding of Risk

Many illnesses, including influenza, RSV, COVID-19, etc., are easily transmitted and can spread quickly in our communities. The best way to limit the spread of any virus is by staying home when sick and using proper hand hygiene. No program, including ours, can guarantee an environment free of any virus, sickness, or disease. Children, their families, and our staff must understand that there is a risk of exposure to illness in attending community programs such as ours. Everyone attends CU by choice, with the understanding of this risk and CU policies and procedures.

In this document, you will find **important information about Children Unlimited's policies and procedures regarding health and illness**. Please read it carefully and let us know if you have any questions or concerns.

Immunizations

Vermont law requires children to be up to date on immunizations prior to entering a child care or school setting but does allow exemptions for medical or religious reasons. In such instances, parents/guardians must complete the appropriate required Vermont Department of Health form. If a disease outbreak occurs, the Vermont Department of Health will be consulted. If it is determined that any child who is not fully immunized is at risk of getting that disease and/or of transmitting it to others, that child may be excluded from our program. The length of exclusion will vary depending on the disease and can range from several days to more than a month.

Children Unlimited is required by regulation to maintain documentation of each child's current immunization status and to report immunization information to the Vermont Department of Health annually. Each child's immunization record on file must include the immunization administered and the date of administration and must be updated after each additional immunization has been received. We can access this information in the Vermont Immunization Registry if you complete an authorization form, or you can supply us with immunization information each time your child receives a vaccine. (If we have access to the Registry for your child, there is no need to send immunization information each time your child receives a vaccination.)

Daily Health Check

Checking and promoting the well-being of each child is essential to ensuring that all are able to fully participate in and benefit from our program. Upon arrival at drop-off, CU teachers will perform a Daily Health Check (required by Child Care Licensing Regulations). This includes checking in with both child and person dropping off to determine if there is anything the teachers should know for the day and observing the child for symptoms of illness or signs of injuries. As part of this daily health check, please let us know if your child has suffered any injuries, if he/she

is exhibiting any symptoms or atypical behavior (e.g., not sleeping well, overly sensitive, etc.), or if he/she has had any medication in the past 24 hours so we can document and relay any pertinent information to your child's teacher. At drop-off, please also let us know if there are any disruptions in your child's normal routine, such as a parent out of town, extended family visiting, etc., so we can be sensitive to any special needs or feelings.

Illness

CU strives to protect children and families from illness by requiring people who are sick or symptomatic to stay home until feeling better and encouraging frequent, thorough hand washing. CU will notify families of any reportable communicable illnesses in our program, listing related symptoms.

It is imperative that sick or symptomatic children stay home. Though CU teachers do not diagnose an injury, illness, or condition, we do make exclusion determinations based on our knowledge of and experience with the signs and symptoms associated with a range of infectious diseases and conditions, the needs of the classroom, the typical behavior of the child in our setting, and regulatory requirements. **CU teachers (not the child's family) make the final determination regarding their ability to meet the needs of a child on any given day and, therefore, if a child will be excluded from care until well enough to participate in program activities.** To provide the best possible care for all children in the group, CU teachers, at their discretion, may require written information from the child's physician regarding a child's particular injury or condition in a group setting before allowing the child to return to school. Examples of such situations would be serious health conditions, concussions, bone fractures, surgery, etc. If there are specific health concerns or chronic disease, the family should coordinate decision-making with the family's health care provider *and* CU staff, particularly in cases of asthma, respiratory concerns, or allergies. **Any new diagnosis of allergy or asthma requires a written action plan from the healthcare provider. Allergy and asthma action plans must be updated annually.** CU errs on the side of caution and excludes a child from the program if there are questions or concerns.

General Illness

Sick or symptomatic individuals must stay home. Children must stay home if they have any signs or symptoms of illness, including but not limited to:

- Inability to fully participate in group care activities or looks or acts ill
- Fever (100.4F or greater) accompanied by behavior change
- Consistent and persistent cough
- Shortness of breath or difficulty breathing (rapid or noisy breathing, wheezing if not already evaluated and treated, cyanosis)
- Chills
- Fatigue
- Muscle pain or body aches
- Sore throat
- Loss of taste or smell
- Excessive congestion or runny nose
- Nausea, vomiting, or diarrhea (stool is not contained in the diaper or is causing accidents for toilet trained children or number of stools exceeds what is typical for that child)

- Blood red or purple rash or bruising not associated with an injury, rash accompanied by behavior change, or joint pain and rash
- Head lice (excluded until treated)
- Discharge from eyes
- Oozing/open wounds or skin conditions that appear infected or are weeping or crusty

Generally, children may return to school when:

- Symptoms are **gone or significantly** improved, **and**
- They have been without a fever or fever-reducing medicine for 24 hours, **and**
- They are well enough to fully participate in group activities, **and**
- In compliance with current CU health policy and child care licensing regulations.

In the event medication has been prescribed, the child must stay home until such time as the period of treatment to reduce the risk of spread to others is acceptable, generally at least 24 hours after starting treatment.

If sent home from school due to illness, the child must remain out of the school setting for the remainder of that day AND the next day. This allows observation and assessment of symptoms and illness by the family and ensures that symptoms experienced at school have resolved prior to return to school.

More Serious Illness

The following illnesses or conditions require exclusion from care until all symptoms are resolved or *markedly* improved AND, if medication has been prescribed, until such time as the period of treatment to reduce the risk of spread to others is acceptable:

- Strep throat and scarlet fever
- Impetigo, scabies, ringworm
- Bronchitis and bronchiolitis
- Influenza
- Pneumonia
- RSV
- Fifth Disease
- Chickenpox (child can return when all vesicles have scabs or, in immunized children who have a mild infection with no crusts, once no new red bumps have appeared for at least 24 hours)

Any child having symptoms of or diagnosed with the following will be excluded until we receive documentation from the child's physician stating the child is no longer contagious and is able to return to a group setting:

- Any disease for which children may not be fully vaccinated (measles, mumps, rubella, HiB infections, diphtheria, pertussis, hepatitis A or B, etc.)
- All cases of bloody diarrhea or diarrhea caused by shigella, salmonella, E coli, or giardia.
- Bacterial meningitis
- Tuberculosis (TB)

For more information, please refer to the Signs and Symptoms Chart (Appendix A) of the [Vermont Child Care Licensing Regulations](#), which was adapted from *Managing Infectious Diseases in Child Care and Schools: A Quick Reference Guide*, a publication of the American Academy of Pediatrics. This chart is also posted in the kitchen at CU.

Becoming Ill at School

We realize that having to miss work due to a sick child can be difficult for families and, therefore, the decision to send a child home is not made lightly; these decisions are made by the teachers in consultation with one another and CU program management. If a child develops symptoms while at school, we will notify you immediately. We expect that any ill child will be picked up within 30-60 minutes. Parents **MUST** have a plan for caring for ill children when they cannot attend the program **AND** for picking up ill children when called. We realize that parents often cannot leave work immediately. In these instances, parents **MUST** have an emergency contact or a back-up person who is available on short notice. If we cannot reach you within 30 minutes, we will begin calling your emergency contacts.

Any child sent home due to illness must remain out of the group setting for the remainder of that day and the following day to allow for observation and assessment of symptoms and illness by the parents and to ensure that the symptoms experienced at school have resolved prior to returning.

Medication Administration

If your child requires medicine during the school day, Children Unlimited teachers are trained in medication administration techniques. We must have written authorization to administer any medications. This pertains to all internal and external medications, prescription or over-the-counter, including topical ointments, sunscreens, diaper creams, lip balms and lotions. All medications must be in the original containers and be clearly labeled with the child's name, dosage, and medication name. We will never administer a child's first dose of a medication or expired medication, nor will we mix medication with food or drink unless specifically instructed to do so in written instructions from the doctor or printed on the prescription bottle. CU would prefer not to store and administer medications; when possible, please request your child's health care provider prescribe a medication that requires dosage when you will be able to administer it to your child (e.g., request an antibiotic that is given twice a day rather than three times). *CU will not administer cough and/or cold medication or cough and/or throat lozenges.* If your child requires cough or cold medication, the child should remain at home until he/she feels better.

If your child requires emergency medication for allergies or breathing (i.e., epinephrine or rescue inhaler), we must have an Allergy or Asthma Action Plan from the physician. This Plan must indicate the conditions which would result in our administration of emergency medication. Copies of the plan are placed with the medication in the classroom emergency backpack, which allows for immediate teacher access. Action Plans must be updated annually.

With the exception of emergency medications, all medications are stored in the kitchen at CU or in a locked box in the Voyager classroom. Parents should remove and dispose of any and all expired medications. Emergency medications such as epipens and rescue inhalers will be carried by the child's teachers in the class emergency backpack so they are readily accessible if needed.

Handwashing

- Regulation requires that all adults and children wash their hands as soon as they enter the program. At drop off, please wash your hands and your child's hands upon entering the classroom.
- Staff will wash their hands and children's hands with soap and water for at least 20 seconds at least at the following times, but more frequently as needed:
 - Arrival to the facility upon entry to the classroom
 - Before eating, preparing or handling food
 - Before feeding children
 - After diapering or using the toilet
 - After handling animals
 - After playing outdoors
 - After cleaning and/or handling garbage
- Additionally, staff will wash their hands:
 - After staff breaks
 - Before and after administering medication or caring for a child who is injured or sick
 - Before and after diapering and after helping a child use the bathroom
 - After coming in contact with bodily fluid
- When hand washing is not practical due to outside activities or being offsite, and hands are not visibly soiled, hand sanitizer may be used by staff, other adults, and children in lieu of washing with soap and warm water.

Facial coverings

Facial coverings are not required but we do recommend wearing them if you have symptoms of, have been diagnosed with or are recovering from a respiratory or other illness or if you have been in contact with someone who is ill.