Bright Horizons

Child Illness Policy

Our Child Illness Policy is based on the Model Health Care Policies developed by the American Academy of Pediatrics.

Bright Horizons understands that it is difficult for a parent/guardian to leave or miss work; therefore, it is suggested that alternative arrangements be made for occasions when children must remain at home or be picked up due to illness. Exclusion from the center is sometimes necessary to reduce the transmission of illness or because the center is not able to adequately meet the needs of the child.

Mild illnesses are common among children and infections are often spread before the onset of any symptoms. In these cases, we try to keep the children comfortable throughout the day, but will find it necessary to exclude them from the child care setting for the following reasons (this list covers most common illnesses, but is not inclusive of all reasons for exclusion).

Child's Exclusion Due to Illness

- Illness that prevents the child from participating comfortably in program activities.
- Illness that results in a greater need for care than our staff can provide without compromising the health and safety of other children.
- Illness that poses a risk of spread of harmful disease to others
- Fever (100° axillary (armpit), 101° orally, 102° aural/ear)* and behavior change or other signs
 and symptoms, e.g., sore throat, rash, vomiting, diarrhea, lethargy, irritability, constant crying,
 difficulty breathing.
- Diarrhea more watery stools or decreased form of stool that is not associated with change
 of diet. Exclusion is required for all diapered children whose stool is not contained in the
 diaper and toilet-trained children if the diarrhea is causing "accidents." Diapered children with
 diarrhea will be excluded if the stool frequency exceeds 2 or more stools above normal for
 that child.
- Blood or mucus in the stools not explained by dietary change, medication, or hard stools, and/or uncontrolled, unformed stools that cannot be contained in a diaper/underwear or toilet.
 Special circumstances that require specific exclusion criteria include the following:
 - Toxin-producing E coli or Shigella infection, until the diarrhea resolves and the test results of 2 stool cultures are negative for these organisms
 - Salmonella serotype Typhi infection, until diarrhea resolves. In children younger than 5 years with Salmonella serotype Typhi, 3 negative stool cultures are required.
- Vomiting more than 2 times in the previous 24 hours unless the vomiting is determined to be caused by a non-communicable condition and the child is not in danger of dehydration.

- Mouth sores with drooling unless the child's medical provider or local health department authority states that the child is noninfectious.
- Abdominal pain that continues for more than 2 hours or intermittent abdominal pain associated with fever, dehydration, or other signs of illness.
- Rash with fever or behavioral changes, until a physician has determined it is not a communicable disease.
- Purulent conjunctivitis (defined as pink or red conjunctiva with white or yellow eye discharge)
 until on antibiotics for 24 hours.
- Impetigo until 24 hours after treatment has been started.
- Strep throat (or other streptoccol infection) until 24 hours after treatment has been started.
- Head lice until after treatment and all nits are removed.
- Rubella, until 6 days after the rash appears.
- Scabies until 24 hours after treatment has been started.
- Chickenpox, until all lesions have dried or crusted (usually 6 days after onset of rash).
- Pertussis (Whooping cough) until 5 days of appropriate antibiotics.
- Mumps, until 5 days after onset of parotid gland swelling.
- · Measles, until 4 days after onset of rash.
- Hepatitis A virus until 1 week after onset of illness or jaundice or as directed by the health department (if the child's symptoms are mild).
- Tuberculosis, until the child's medical provider or local health department states the child is on appropriate treatment and can return.
- Any child determined by the local health department to be contributing to the transmission of illness during an outbreak.

*Infants less than 4 months of age will be excluded if they have a fever of 100° axillary (armpit) or 100.4° aural (ear) and should receive medical attention as soon as possible.

*Any child with a fever of 104° will be excluded and should receive medical attention as soon as possible. Any infant younger than 2 months with a fever should get urgent medical attention.

We ask that for your child's comfort and to reduce the risk of contagion, children be picked up within 1.5 hours of notification. Until then, your child will be kept comfortable and will continue to be observed for symptoms.

Children need to remain home for 24 hours without symptoms before returning to the program, i.e., the child needs to remain out of the center for the remainder of the day he/she is sent home and the following day (if a child is sent home Friday, he/she may return Monday), unless the center receives a note from the child's medical provider stating that the child is not contagious and may return to the center. In the case of a (suspected) contagious disease, rash or continuing symptoms, a doctor's note may be required before returning.

Required Conditions for a Child to Return to the Center

Children who have been excluded may return when:

- They are free of fever, vomiting, and diarrhea for a full 24 hours.
- Readmission after diarrhea can occur when diapered children have their stool contained by the diaper (even if stools remain loose) and when toilet-trained children do not have toileting accidents.
- They have been treated with an antibiotic for a full 24 hours.
- They are able to participate comfortably in all usual program activities, including outdoor time.
- They are free of open, oozing skin conditions and drooling (not related to teething) unless:
 - 1) The child's health-care provider signs a note stating that the child's condition is not contagious, and;
 - 2) The involved areas can be covered by a bandage without seepage or drainage through the bandage.

If a child has been out of the center due to any of the reasons above or any other reason deemed necessary by the child's medical provider, please let the center know. It may be beneficial to share this information with families in the center. If so, your family information will remain confidential; however, this will help staff and families observe the other children for symptoms and could assist their medical provider in making a diagnosis.

If a child is excluded because of a reportable communicable disease, a doctor's note stating that the child

is no longer contagious and may return is red	quired.	
Signature	 Date	