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Ref #: 1302.47(b)(7)(iii); DCL 1240-04-01-12(12)	Policy Council Approval Date: 01/26/2021

COMPONENT: CHILD HEALTH AND SAFETY

SUBJECT: COMMUNICABLE DISEASES

PERFORMANCE OBJECTIVE: The program’s safety practices include protection from contagious disease, including appropriate inclusion and exclusion policies for when a child is ill, and from an infectious disease outbreak, including appropriate notifications of any reportable illness.

POLICY AND PROCEDURE:

Protection from Contagious Disease/Communicable Disease

The program temporarily excludes a child who exhibits recognizable signs of communicable disease or illness to protect the health of the affected child, other children and staff.

*** Policies are subject to change to follow CDC guidelines.**

Communicable Diseases: Classroom

All Head Start staff follow the most updated version of the Tennessee Department of Health Communicable Disease List.

The Health Services Manager reports the suspected illnesses below to both parents and the local health department.

- Food Borne Outbreaks
- Salmonella
- Hepatitis A
- Salmonella
- Shigella
- Measles, mumps, and/or rubella
- Pertussis
- Polio
- Haemophilus Influenza type B
- Meningococcal Meningitis

- Any other illness identified by the state or local Department of Health

Classroom Teaching staff perform health checks of all children before children can enter the bus or classroom.

If a child is suspected of having a communicable disease, Classroom Teaching staff contact the parent/guardian to pick up their child.

Classroom Teaching staff notify the parents of children in the same classroom (at a minimum) if any child has been diagnosed with a communicable disease.

Classroom Teaching staff explain to parents what signs and symptoms to look for in their children and to seek medical care as necessary.

Classroom Teaching staff monitor children who were exposed to the communicable disease for signs and symptoms of the illness.

All staff and children practice good hygiene.

Classroom Teaching staff disinfect contaminated articles and surfaces by using approved disinfectant solution.

- Disinfectants are kept out of reach of children.

Reporting and Isolation: Classroom

A child with any of the following symptoms of illness is immediately isolated and discharged to his/her parent/guardian. **The child will be excluded for 24 hours after the condition subsides and/or communication is received from a medical provider stating the child is no longer contagious.**

- Temperature of at least **100.4** degrees Fahrenheit **or higher; child must be fever-free and unmedicated for 24 hours.** The temperature is taken by the **infrared no-contact thermometer or the axillary method** with a digital thermometer.
- Diarrhea (three or more abnormally loose stools within a twenty-four hour period).
- Severe coughing, causing the child to become red or blue in the face, appear to be in trouble, or make a whooping sound.
- Difficult or rapid breathing.

- Yellowish skin and eyes.
- Redness of the eye, obvious discharge, matted eyelashes, burning, itching in the eye area.
- Untreated infected skin patches, unusual spots or rashes.
- Unusually dark urine and/or gray or white stool.
- Stiff neck with an elevated temperature.
- Evidence of untreated lice, scabies, or other parasitic infestations.
- Sore throat or difficulty swallowing.
- Vomiting more than one time or when accompanied by any other sign or symptom of illness.

A child isolated due to suspected communicable disease is:

- Within sight and hearing of a staff member at all times.

Cared for in another room or portion of a room away from other children.

- Provided with a cot and made comfortable.
 - After use, the cot is disinfected with an appropriate germicide.
- If soiled with blood, feces, vomit or other body fluids, the cot is cleaned with soap and water and disinfected with an appropriate germicide.

Valid Training

All staff are trained annually in the recognition and management of communicable disease.

Communicable Diseases: Mandatory Infection Control Guidelines for All Children, Staff and Centers/Options

Since viruses might be present in an infant or child and might not be apparent to the non-medical care giver, either because overt signs and symptoms are lacking or for confidentiality reasons, it is necessary to employ certain blood and body fluid infection control measures in all infants and children, which will prevent the transmission of all these infections. The Tennessee Department of Health guidelines are followed for all children, regardless of the known health status of the child.