

POCO HAPPY TIMES PRESCHOOL SOCIETY

WELL CHILD POLICY

Poco Happy Times Preschool Society wishes all our children to be healthy and happy. The following are guidelines to assist parents in determining when a child should be kept at home. To determine when a child is well enough to attend our program can be a difficult decision for parents and our teacher(s) and at all times, both may want to consult a health care professional for more specific advice.

CONDITIONS WHICH REQUIRE CHILDREN TO BE EXCLUDED FROM OUR PRESCHOOL

Parents or caregivers must keep their children at home or to seek alternate care arrangements for the following conditions:

- 1) **Pain** - any complaints of unexplained or undiagnosed pain.
- 2) An **acute cold with fever**, runny nose and eyes, coughing and sore throat. Once temperature, well-being and energy level are normal, coughing and runny nose may continue (dependent on the suspected illness) without the child being contagious. (if symptoms are caused by a known allergic reaction; the child is not contagious).
- 3) **Difficulty in breathing** – shortness of breath, wheezing or a persistent cough.
- 4) **Fever** (100 degrees F. or 38.3 degrees C.) accompanied by general symptoms such as listlessness, may be an early sign of illness that requires a physician's attention.
- 5) **Sore throat** or trouble swallowing.
- 6) **Infected skin or eyes** or an undiagnosed rash.
- 7) **Headache** and **stiff neck**.
- 8) Unexplained **diarrhea** or loose stool combined with nausea, vomiting or abdominal cramps. These symptoms may indicate a bacterial or viral (gastrointestinal) infection which is very easily passed from one child to another. The child should be kept home until all symptoms have stopped.

Well Child Policy (cont.)

- 9) **Nausea** and **vomiting** may be an early sign of illness that requires a physician's attention.
- 10) Children with known or suspected **communicable diseases**. (see page 7-9)

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 regular program of the preschool

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

Poco Happy Times Preschool Society require that parents inform the Teacher within 24 hours of a diagnosis of a serious illness or contagious disease of a communicable nature in the family. The Teacher should be informed by the parent of the diagnosis and the cause of the infection in order to warn other families using the preschool in consultation with the local Health Unit (i.e. chicken pox in the event that another family should be immune suppressed).

****THIS IS VERY IMPORTANT IN CASES OF RUBEOLA and COVID19****

The Teacher will do his/her part in always notifying parents when a communicable disease is diagnosed among the children, their families or the preschool staff, and expects to receive the same cooperation from the parents.

Poco Happy Times considers not only the individual child but the health of the other children in care as well as the Teacher's and duty parents' health. Children who return to our school while they are still ill present an unsafe situation for others in the preschool and may result in the preschool having to close until the illness is controlled.

For more information see Emergency Procedures.

PROMOTING HEALTH & HYGIENE

A child can become ill whether in school or at home. But, when an illness occurs among a group of children, the situation becomes more complicated.

Well Child Policy (cont.)

COMMON TYPES OF ILLNESSES

The most prevalent illnesses that children can acquire fall into four broad categories:

Respiratory infections such as colds, flu and COVID19 which are responsible for the greatest number of illnesses. Most colds exhibit themselves as fever, runny nose, coughing and sneezing. Many lead to ear infections or lower respiratory infections. These infections are generally transmitted by secretions from the mouth and nose or through droplets coughed or sneezed into the air.

Intestinal infections which cause diarrhea such as viral Enteritis, Giardia, Shigella, Salmonella or Hepatitis A. In these cases infections are transmitted from person to person directly from the feces to the mouth usually by way of the hands, or indirectly by food or other objects which go into the mouth.

Skin infections & infestations such as impetigo, lice, scabies or ringworm, are generally transmitted through direct contact.

Viral rashes such as chicken pox, measles, roseola and mumps, are mainly transmitted through oral and nasal secretions and many are preventable through immunization.

It is inevitable that children in group settings will get sick. They play very intimately, sharing toys and joys with one another. Additional factors that include the fact that children at younger ages have lower resistance to illnesses and that children in group care have an increased exposure to illnesses because of the expanded numbers of people with whom they are in daily contact.

But, despite this inevitability, there are some measures we can take to minimize the spread of infections and to promote and provide a healthy environment.

IMMUNIZATION

Children who register into our Preschool program must provide an up to date immunization record.

Parents who choose not to have their child immunization must complete a form to say they will remove their child if any communicable diseases are reported.

Childhood diseases which are preventable through immunization include diphtheria, tetanus, whooping cough, polio, measles, mumps, rubella and meningitis caused by Haemophilus influenza type b. These diseases are easily transmitted among children and it is important the Teacher knows that the children are immunized. The following is a routine immunization schedule:

Well Child Policy (Cont.)

BASIC IMMUNIZATION SCHEDULE

	1st 2 months	2nd 4 months	3rd 6 months	12 months	4th 18 months
Diphtheria	X	X	X		X
Pertussis	X	X	X		X
Tetanus	X	X	X		X
Poliomyelitis	X	X			X
Measles				X	X
Mumps				X	X
Rubella				X	X
Haemophilus					X

DPT Booster given in Kindergarten

** All adults who work with children are required to review their own immunization records and childhood illness history because they could be exposed to many common childhood illnesses. Parents who are unsure about what immunizations they have received should consult the Tri-cities Public Health Unit or their family physician and ensure that they are properly immunized, according to the Provincial Health Ministry Guidelines.

HANDWASHING

One of the most important factors in communicable disease control is careful and thorough handwashing by the children and adults. It should be done when children arrive at the preschool and before they go home, after toileting and before snack or food preparation. Handwashing should consist of vigorous scrubbing with soap followed by thorough rinsing under running water. Written and visual handwashing routines are posted above the sinks to encourage consistency in handwashing practice. Initiating handwashing routines with young children can be frustrating, persistence and patience will help children develop handwashing as a habit.

TOILETING AREA

Toilets and their common area will be cleaned with a disinfectant solution at the start and end of each day.

Well Child Policy (cont.)

PREVENTING THE TRANSMISSION RESPIRATORY INFECTIONS & COVID19

Plenty of tissues or rolls are readily available for nose wiping and should be discarded in covered, plastic lined containers. Don't use a handkerchief - you must use a different tissue for each child and must wash hands after nose wiping.

Teach children and parents to cover their mouths in the sleeve of their elbow when they cough or sneeze (like they're dabbing). And wash hands for 20 seconds afterwards.

Daily outdoor activities when weather permits will be encouraged.

- The preschool premises will be cleaned and disinfected before and after each session.
- Any surface or area that is visibly dirty will be cleaned and disinfected

MEASURES TO SUPPORT EFFECTIVE CLEANING AND DISINFECTION

- Garbage containers will be emptied daily.
- Wear disposable gloves when cleaning blood or body fluids; Always wash hands before wearing and removing disposable gloves

SPECIAL PRECAUTIONS WHEN HANDLING BLOOD AND BODY FLUIDS

Since blood and body fluid may carry various infectious agents, good hygiene practices for handling of articles soiled by blood, urine, stool, vomit or other body fluids should be adhered to.

Some diseases such as Hepatitis B and AIDS can be transmitted through blood to blood contact, you should be especially careful if you have any open sores or cracked skin if you are handling blood i.e. cleaning a child's wound. Always wear disposable gloves (found on the wall by the kitchen sink) to clean or handle blood and use a more concentrated solution of bleach disinfectant to clean surfaces.

Well Child Policy (Cont.)

DISINFECTANT BLEACH SOLUTION

1:100 dilution Chlorine: household bleach – sodium hypochlorite (5.25%)

10 ml bleach to 990 ml water (for a squirt bottle)

1/4 cup bleach to 1 gallon of water (for cleaning large surfaces)

CAUTION: Keep this solution in a well-marked container and out of the children's reach. For especially dirty surfaces, it is very effective to wash with a soapy detergent, rinse, apply the disinfectant and then air-dry. **Solution should be made up fresh daily.**

Reference: [Cleaning and Disinfection guidelines from BCCDC](#)

CONCLUSION

Good hygiene practices in our Preschool will minimize the spread of illness, but remember, illnesses cannot be totally eliminated. There are many situations where our Teacher(s) will need to seek additional advice, especially when an illness or its effects on the child or the group is not commonly known.

Our goal is to build a trusting relationship with all parents so that everyone will share information. If the Teacher has adequate information about any illnesses occurring in our Preschool, he/she can also be in the position to alleviate any anxiety the other parents may have about their own children. Additional information can always be obtained by calling the local Health Unit.

Well Child Policy (cont.)

DISEASE	HOW SPREAD	IDENTIFICATION	INCUBATION (from date of contact)	COMMUNICABLE	CONTROL
Chicken-pox	Secretions from nose, throat & mouth of infected people	Sudden onset with slight fever. Blister-like rash occurs in successive crops. Scabs form after blister stage. Spots usually appear first on the body, face and scalp, then later spread to the limbs	Usually 14-21 days	5 days before spots appear. 6 days after the last crop of skin blisters	Keep home until 6 days after the last crop of skin blisters
Rubella (German measles)	Secretion from nose, throat & mouth of infected people	Mild fever, headache tiredness, runny nose pale red rash spreading from behind the ears to the face, then downward. Often difficult to diagnose	14-21 days	7 days before rash appears to 5 days after	Keep home for 5 days after onset of rash. Keep away from pregnant women.
Rubella (Red measles)	Secretions from nose throat & mouth of infected people.	High fever before rash appears, dry cough, eyes inflamed and sensitive to light, runny nose cold symptoms, dusky-red blotchy rash on 3-4 day spreading downwards from face, white spots in mouth	8-14 days from exposure to appearance of rash	3 days before rash appears to 4 days after	Keep home for about 4 days, notify health unit
Mumps	Secretion from nose, throat & mouth of infected people	Fever, swelling and tenderness slightly above the angle of the jaw	About 12-21 days	2 days before swelling appears to 9 days after	Keep home for 9 days or as long as there is swelling
Tetanus (lock-jaw)	Puncture wounds, animal bites, burns-contaminated soil or articles	Painful muscular contractions abdominal rigidity	4-21 days, usually 10 days	Not directly from man to man	Call doctor notify Health Unit
Diphtheria	Secretion from nose, throat, mouth & skin lesions of infected people	Grayish membrane with a surrounding dull red area in very sore throat	2-5 days, sometimes longer	About 14 days	Call doctor. Notify Health Unit

Well Child Policy (cont.)

DISEASE	HOW SPREAD	IDENTIFICATION	INCUBATION (from date of contact)	COMMUNICABLE PERIOD	CONTROL
Poliomyelitis	Secretions from nose, throat mouth and feces of infected people	Fever, tiredness headache, stiffness of neck and/or back with or without paralysis, gastrointestinal disturbances	3-32 days. Usually 7-21 days	About 10 days before to 10 days after onset of symptoms.	Keep home as advised by Doctor. Notify Health Unit
Pertussis (Whooping cough)	Secretions from nose, throat & mouth of infected people	Occurs mainly in preschool children. Repeated, violent cough. Crowing – high pitched whoop	Commonly 7-10 days	Untreated about 21 days from onset of symptoms	Keep home Call Doctor Notify health unit
Scarlet Fever	Secretions from nose, throat & mouth of infected people	High fever, nausea vomiting, red cheeks, whiteness around mouth. Sand papery skin rash that blanches on pressure. During convalescence hand & feet	Usually 1-3 days	Untreated 10-21 days. Treated 1 day	Keep home. Call Doctor Notify Health unit
Strep Throat	Secretions from nose, throat & mouth of infected people	Very sore throat. Fever	Usually 1-3 days	As long as untreated. Treated 1-2 days	Keep home. Call doctor. Notify Health unit
Impetigo	Secretions from sores on skin of infected people. Can be spread from the nose.	Skin infection with honey colored crusts (scabs) on a moist red base. Can be one or many patches.	Commonly 4-10 days	Untreated – as long as lesions are present. Treated about 1 – 3 days	Keep home for 1 – 2 days while being treated or as advised by doctor
Acute Conjunctivitis (Pink Eye)	Secretions from nose, eyes, throat of infected people. Contaminated fingers or clothes	White of eyes looks pink. Watery discharge becomes thick & yellow	About 1 – 3 days	Untreated 14 – 21 days	Keep home 2 – 3 days, if being treated or as advised by doctor usually while redness & discharge continues.

Well – Child Policy (cont.)

DISEASE	HOW SPREAD	IDENTIFICATION	INCUBATION (from date of contact)	COMMUNICABLE PERIOD	CONTROL
Ring-worm	Direct & Indirect contact with skin lesions of infected people, cats or dogs, contaminated floors, shower stalls, etc.	Flat, spreading ring shaped lesion – usually red & Scaly or dry & crusted infection – patches of temporary baldness at site of lesion	Usually 4 – 10 days	As long as untreated	Keep home until treated
Lice	Direct contact with infected people & articles i.e. hats bedding or combs	Small white eggs, (nits) firmly attached to hair shaft – especially around ears & nape of neck. Itchiness. Grayish white (sometimes brownish) lice 1 – 2 mm long	Nits hatch & reach maturity in 8 – 10 days	Until lice & all nits are destroyed	Keep home until treated
Scabies	Direct contact with infested people	Sudden itchiness. Many tiny waxy lines & blisters that crust over – can be seen in skin folds between fingers, wrists elbows & knees. Does not effect face & neck	Several days before itching is noticed	Until mites & eggs are destroyed	Keep home until treated.
Covid19	Secretions from nose, mouth, eyes, throat of infected people. Can infect people touching contaminated objects and surfaces then touching their eyes, nose & mouth.	Fever, dry cough, tiredness, aches and pains, sore throat, diarrhea, headache, conjunctivitis, loss of taste or smell, a rash on skin, or discolouration of fingers and toes	5-6 days	About 10-14 days after onset of illness	Call doctor 8-1-1 or nurse practitioner. Notify Public Health unit. Keep home for 14 days

References: Canada website <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/prevention-risks.html>
 Communicable Disease Control Manual, BC Centre for Disease Control website <http://www.bccdc.ca/health-professionals/clinical-resources/communicable-disease-control-manual/communicable-disease-control>