Module 3
Recognizing and Managing Infectious Diseases

- Daily health check
- Exclusion
- Symptoms versus disease

Case 1
The teacher in the toddler room notices that 20-month-old Suzie is a little less active than normal and has a runny nose, though she has been playing on and off. She is still participating in various activities. The teacher checks her temperature and it is 101°F.

- Does Suzy need to be excluded? Why or why not?
- Is there an exclusion policy that covers this?
- What is difficult about this case?

Daily Health Check

- Routine of greeting parents/children every day
- Form of communication between parents and caregiver/teacher
- May enable caregivers/teachers to identify illness while parents are still present
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What To Do When Kids Get Sick After the Daily Health Check

- Observe children
  - Look for less activity
  - Increased care needs
  - Check for other symptoms
- If other symptoms are present
  - Make a decision about exclusion
  - Notify parents
  - Care for child until the parent/caregiver arrives

Outbreaks

- Sudden rise in the occurrence of a disease
- Notify your child care health consultant or health department
- Consult evidence-based resources

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What To Do When Kids Get Sick After the Daily Health Check

- Refer to exclusion criteria
- If a child needs to go home, procedures should be in place to take care of the child until they can be picked up
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Exclusion

- How do you make decisions about exclusion?
- What are characteristics of good exclusion criteria?
- Is exclusion an effective way to reduce transmission of germs?
- What are the reasons to exclude children from out-of-home child care?

Does exclusion reduce the spread of disease?

Reasons for Exclusion

- The caregiver/teacher should exclude if the illness:
  - Prevents the child from participating comfortably in activities
  - Results in a need for care that is greater than the staff can provide without compromising the health and safety of the other children
  - Is a specific disease, symptom or condition requiring exclusion

CFOC4 Standard 3.6.1.1. Inclusion/Exclusion/Dismissal of Children
http://ncrkids.org/CFOC/Database/3.6.1.1
Symptoms versus Diseases

- Children develop symptoms first but don’t yet have a diagnosis
- Caregivers/teachers SHOULD NOT make the diagnosis of a specific disease
- Caregivers/teachers DO need to recognize symptoms for which exclusion is necessary

Symptoms Requiring Exclusion

- Fever WITH behavior change
- Diarrhea (in some cases)
- Blood in stool
- Vomiting more than 2 times in 24 hours
- Abdominal pain (in some cases)
- Drooling with mouth sores

Signs and Symptoms Chart

[Chart link: http://nrckids.org/files/appendix/AppendixA.pdf]
Severe Illness

There are certain symptoms of severe illness that it does not matter what the diagnosis is — Call 911 (and the parents/caregivers).

Symptoms of Urgent Conditions

- Fever in a child who looks more than mildly ill
- Unexplained irritability
- Fever in a child under 60 days old
- Severe vomiting and/or diarrhea
- Venomous bites or stings
- Injury like a break to the skin that does not hold together

Child Develops Symptoms

- What are your responsibilities to the affected child and parents, to the other children, and the child care staff?
- When should you notify other parents?
- When should you require a health visit?
- When should you notify the health consultant or health department?

Model Child Care Health Policies: http://www.ecels-healthychildcarepa.org/
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Child Already Has A Diagnosis

• What is your responsibility to child care staff, children and the affected child?
• When should you notify parents? How?
• When should you notify the health consultant or health department?

Conditions that DO NOT Need Exclusion

Many symptoms or conditions do not need exclusion (but children with them are frequently excluded)

Goals of Exclusion
Summary

• Exclusion decisions should be based on written criteria
• Three main reasons for exclusion
• Decisions about whom to notify can be determined by checking and consulting with local public health authorities as needed

Questions

Acknowledgements

• This curriculum has been developed by the American Academy of Pediatrics (AAP).
• The recommendations in this curriculum do not indicate an exclusive course of treatment or serve as a standard of medical care. Variations, taking into account individual circumstances, may be appropriate.
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