



Health & Safety Notes

Exposure to Communicable Disease

As a child care provider, you join hands with parents in your efforts to create a healthy environment for children in your care. You and the parents will benefit from the communication of your health and safety policies, health and safety messages and new knowledge gained on health and safety issues. You are also required to inform parents when children in your care are exposed to a communicable disease.

This health and safety note will help you prepare a written notice to parents about exposure of their children to a communicable disease. The notice will alert them to watch for signs of that illness and seek medical advice when necessary.

Confidentiality

Please keep in mind that when notifying parents about exposure, the confidentiality of the ill person should be maintained. You should not report the name of the child, other family member, or staff member who is ill to other parents. Let the parents of an ill child know ahead of time that you will be sending exposure notices to other parents but will not mention any names.

Reporting Communicable Diseases to Outside Agencies

All licensed child care programs are required to report outbreaks of some communicable diseases to both Community Care Licensing and the local public health department. A list of those diseases which are reportable in California is included on the final page of this note. An outbreak is defined as two or more known or suspected cases of a disease. However, the American Academy of Pediatrics strongly recommends that child care providers report even if there is only a single case, to ensure that the local Public Health Department is aware that this serious illness is present in a child care setting.

When you report to licensing and your local health department, the parents of the children must be informed that you are required to report the disease. The children's health care providers are also required to report communicable disease to the health department. We encourage you to work closely with the local health department to reassure and inform parents and staff.

The requirement to report communicable diseases to the local health department applies to any licensed facility, whether it is a center or family child care home. However, we strongly encourage unlicensed providers to report communicable diseases as well and work closely with their local health department.

Parental Responsibilities

Just as child care providers have an obligation to report when children in care are exposed to a communicable disease, parents have the same obligation to report diseases to the child care program within 24 hours of a diagnosis, *even if* they keep their child at home. That way, the child care provider can alert other parents to watch for signs of that illness in their children and seek medical advice when necessary.

Exclusion Policies

Distribute and explain your exclusion policies to parents and staff before illness arises. Have a clear, up-to-date exclusion policy for illness and provide parents with a copy when they enroll their child in your program. Ask your health consultant or a health professional to review it periodically. Writing a sound policy and enforcing it consistently will help reduce conflicts. Make sure all staff understand the policies and how to enforce them.

Please call the Healthline at (800) 333-3212 for more information.

Notice of Exposure to Communicable Disease

NAME OF CHILD CARE PROGRAM _____

ADDRESS OF CHILD CARE PROGRAM _____

TELEPHONE NUMBER OF CHILD CARE PROGRAM _____

DATE _____

Dear Parent or Legal Guardian:

A child in our program has or is suspected of having: _____

INFORMATION ABOUT THIS DISEASE

The disease is spread by: _____

The symptoms are: _____

The disease can be prevented by: _____

What the program is doing to reduce the spread: _____

What you can do at home to reduce the spread: _____

If your child has any symptoms of this disease, call your health care provider to find out what to do and be sure to tell them about this notice. If you do not have a regular health care provider to care for your child, contact your health department for instructions on how to find one, or ask staff here for a referral. If you have any questions, please contact:

_____ at _____
(CAREGIVER'S NAME) (TELEPHONE NUMBER)

Suspected Illness or Communicable Disease Exclusion Form

NAME OF CHILD _____

FACILITY _____ DATE _____

Dear Parent or Legal Guardian:

Today at our child care facility, your child was observed to have one or more of the following signs or symptoms:

- | | |
|--|--|
| <input type="checkbox"/> Diarrhea (more than one abnormally loose stool) | <input type="checkbox"/> Child gets red or blue in the face |
| <input type="checkbox"/> Difficult or rapid breathing | <input type="checkbox"/> Child makes a high-pitched croupy or whooping sound after s/he coughs |
| <input type="checkbox"/> Earache | <input type="checkbox"/> Severe itching of body/scalp |
| <input type="checkbox"/> Fever | <input type="checkbox"/> Sore throat or trouble swallowing |
| <input type="checkbox"/> Gray or white stool | <input type="checkbox"/> Unusual behavior |
| <input type="checkbox"/> Headache and stiff neck | <input type="checkbox"/> Child cries more than usual |
| <input type="checkbox"/> Infected skin patches | <input type="checkbox"/> Child feels general discomfort |
| <input type="checkbox"/> Crusty, bright yellow, dry or gummy areas of skin | <input type="checkbox"/> Cranky or less active |
| <input type="checkbox"/> Loss of appetite | <input type="checkbox"/> Just seems unwell |
| <input type="checkbox"/> Pink eye | <input type="checkbox"/> Unusual spots or rashes |
| <input type="checkbox"/> Tears, redness of eyelid lining | <input type="checkbox"/> Unusually dark, tea-colored urine |
| <input type="checkbox"/> Irritation | <input type="checkbox"/> Vomiting |
| <input type="checkbox"/> Swelling and/or discharge of pus | <input type="checkbox"/> Yellow skin or eyes |
| <input type="checkbox"/> Severe coughing | <input type="checkbox"/> Head lice or nits |

Contact your health care provider if there is:

- | | |
|--|--|
| <input type="checkbox"/> Persistent fever | <input type="checkbox"/> Yellow skin and/or eyes |
| <input type="checkbox"/> Breathing so hard child cannot play, talk, cry or drink | <input type="checkbox"/> Unusual confusion |
| <input type="checkbox"/> Severe coughing | <input type="checkbox"/> Rash, hives or welts that appear quickly |
| <input type="checkbox"/> Earache | <input type="checkbox"/> Severe stomach ache that causes the child to double up and scream |
| <input type="checkbox"/> Sore throat with fever | <input type="checkbox"/> No urination over an 8 hour period; the mouth and tongue look dry |
| <input type="checkbox"/> Rash accompanied by fever | <input type="checkbox"/> Black stool or blood mixed with the stool |
| <input type="checkbox"/> Persistent diarrhea | <input type="checkbox"/> Any child who looks or acts very ill or seems to be getting worse quickly |
| <input type="checkbox"/> Severe headache and stiff neck with fever | |

We are excluding your child from attendance at our program until (possible options):

- The signs or symptoms are gone
- The child can comfortably participate in the program
- We can provide the level of care your child needs
- Other: _____

Communicable Diseases Reportable in California

Licensed child care providers are required to report outbreaks of any disease, including diseases not on the list.

Acquired Immune Deficiency Syndrome (AIDS)
(*HIV Infection only: see "Human Immunodeficiency Virus"*)

Amebiasis ☎☒

Anthrax ☎

Avian Influenza (human) ☎

Babesiosis ☎☒FAX

Botulism (*infant, foodborne or wound*) ☎

Brucellosis ☎

Campylobacteriosis ☎☒

Chancroid

Chickenpox (*only hospitalizations and deaths*) ☎☒

Chlamydial Infections

(*including Lymphogranulom Venereum (LGV)*)

Cholera ☎

Ciguatera Fish Poisoning ☎

Coccidioidomycosis

Colorado Tick Fever ☎☒

Conjunctivitis, Acute Infectious of the Newborn

(*specify etiology*) ☎☒FAX

Creutzfeldt-Jakob Disease (CJD) and other Transmissible

Spongiform Encephalopathies (TSE)

Cryptosporidiosis ☎☒

Cysticercosis or Taeniasis

Dengue ☎

Diarrhea of the Newborn (*outbreak*) ☎

Diphtheria ☎

Domoic Acid Poisoning (Amnesic Shellfish Poisoning) ☎

Ehrlichiosis

Encephalitis—viral, bacterial, fungal, or parasitic

(*specify etiology*) ☎☒FAX

Escherichia coli: shiga toxin producing (STEC)

including *E.coli* 0157 ☎

Foodborne Disease ☎☎☒

Giardiasis

Gonococcal infections

Haemophilus influenzae invasive disease

(*report an incident less than 15 years of age*) ☎☒

Hantavirus infections ☎

Hemolytic Uremic Syndrome ☎

Hepatitis, viral

Hepatitis A ☎☒

Hepatitis B (*specify acute case or chronic*)

Hepatitis C (*specify acute case or chronic*)

Hepatitis D (Delta)

Hepatitis, other, acute

Human Immunodeficiency Virus (HIV)

Influenza deaths (*report an incident of less than 18 years of age*)

Kawasaki Syndrome (*Mucocutaneous Lymph Node Syndrome*)

Legionellosis

Leprosy (Hansen's disease)

Leptospirosis

Listeriosis ☎☒

Lyme disease

Malaria ☎☒

Measles (Rubeola) ☎☒

Meningitis—viral, bacterial, fungal, parasitic

(*specify etiology*) ☎☒

Meningococcal infections ☎

Mumps

Paralytic shellfish poisoning ☎

Pelvic Inflammatory Disease (PID)

Pertussis (whooping cough) ☎☒

Plague (*human or animal*) ☎

Poliomyelitis, paralytic ☎☒

Psittacosis ☎☒

Q fever ☎☒

Rabies (*human or animal*) ☎

Relapsing Fever ☎☒

Rheumatic Fever, acute

Rocky Mountain Spotted Fever

Rubella (German Measles)

Rubella Syndrome, Congenital

Salmonellosis (*Other than Typhoid Fever*) ☎☒

Scombroid fish poisoning ☎

Severe Acute Respiratory Syndrome (SARS) ☎

Shia toxin (*detected in feces*) ☎

Shigellosis ☎☒

Smallpox (Variola) ☎

Staphylococcus aureus infection (only a case resulting in death or admission to an intensive care unit of a person who has not been hospitalized or had surgery, dialysis, or residency in a long-term care facility in the past year, and did not have an indwelling catheter or percutaneous medical device at the time of culture) ☎

Streptococcal infections (*outbreaks of any type and individual cases in food handlers and dairy workers only*) ☎☒

Syphilis ☎☒

Tetanus

Toxic Shock Syndrome

Toxoplasmosis

Trichinosis ☎☒

Tuberculosis ☎☒

Tularemia ☎

Typhoid Fever (*cases and carriers*) ☎☒

Typhus Fever

Vibrio infections ☎☒

Viral hemorrhagic Fever (e.g. Crimean-Congo, Ebola, Lassa and Marburg Viruses) ☎

Water-Associated Disease(e.g, Swimmer's Itch or Hot Tub Rash) ☎☒

West Nile Virus (WNV) Infection ☎☒

Yellow Fever ☎

Yersiniosis ☎☒

Occurrence of any unusual disease ☎

Outbreaks of any disease (Including diseases not listed here). ☎

Urgency Reporting Requirements

☎ = Report immediately by telephone (designated by a ♦ in regulations*).

☎☎ = Report immediately by telephone when two (2) or more cases or suspected cases of foodborne disease from separate households are suspected to have the same source of illness (designated by a • in regulations).

☎☒ = Report by Fax, telephone, or mail within one (1) working day of identification (designated by a + in regulations).

All other diseases/ conditions should be reported by FAX, telephone, or mail within seven (7) calendar days of identification.

There are no standard reporting forms for child care providers to use. Please call your local health department immediately to report any outbreak or suspected outbreak of a communicable disease at a child care center.

*Community Care Licensing Title 22 Regulations.