Handout #19 Caring for Children With Mild Illness

Young children enrolled in child care have a high incidence of illness such as upper respiratory tract infections, including otitis media and other temporary conditions such as eczema, diarrhea and exacerbation of asthma that may not allow them to participate in the usual activities. Most child care settings will need to provide at least temporary care for ill children. If a child becomes ill during the day, providers can help manage the illness and keep the child comfortable until a designated adult arrives.

Basic Issues for Decision-Making

A. Set Policies and Know When to Be Flexible

Many health policies concerning the care of ill children have been based upon common misunderstandings about contagion, risks to ill children, and risks to other children and staff. Current child care research clearly shows that certain ill children *do not* pose a health threat. Also, the research shows that keeping certain *other* mildly ill children at home or isolated at the child care setting *will not* prevent other children from becoming ill.

Appropriate reasons to exclude mildly ill children are:

- The child's disease is highly communicable.
- The child does not feel well enough to participate.
- The staff is not able to care for sick children in the child care setting.

Severity Level:

Decisions should be made on a case-by-case basis. Child care facilities should specify in their policies what severity levels of illness they can handle and their plan of care should be approved by their health consultant.

- <u>Severity Level 1</u>: Child feels well enough and shows high interest in participating in activities because of an absence of symptoms of illness such as recovery from pink eye, rash or chicken pox. Appropriate activities for this level include most of the normal activities for the child's age and developmental level, including both indoor and outdoor play. For full recovery, children at this level need no special care other than medication administration (according to the policy) and observation.
- <u>Severity Level 2</u>: Child's demonstrates a medium activity level because of symptoms such as low-grade fever. Child may also be at the beginning or recovery period of an illness. Appropriate activities include crafts, puzzles, table games, fantasy play, and the opportunity to move about the room freely.
- <u>Severity Level 3</u>: Child's activity level is low because of symptoms that prevent much involvement. Appropriate activities are sleep and rest; light meals and liquids; passive activities such as stories and music; and for children who need physical comforting, being held and rocked (especially children under three years of age).

Ways to manage ill or infected children:

The major options for management of ill or infected children in child care and for controlling spread of infection include the following:

- 1) Antibiotic treatment, prophylaxis or immunization when appropriate.
- 2) Exclusion of ill or infected children from the facility.
- 3) Provision of alternative care at a separate site (such as care in the child's own home, care in a small family-child-care home, care in the child's own center with special provisions designed for the care of ill children, or care in a separate center that serves only children with illness and temporary disabilities).
- 4) Limiting admission of newly enrolled children.
- 5) Closing facility (a rarely exercised option).

For more information and recommendations for controlling the spread of specific infectious disease, please see Appendix C.

B. Issues for Providers to Consider

When you need to decide whether to keep a mildly ill child at your child care setting, ask these questions:

- Are there sufficient staff (including volunteers) to change the program for a child who needs some modifications such as quiet activities, staying inside or extra liquids?
- Are staff willing and able to care for a sick child (wiping a runny nose, checking a fever, providing extra loving care) without neglecting the care of other children in the group?
- Is there a small space where the mildly ill child can rest if needed? Is there a space that might be used as a "Get Well Room" which meets California standards so that several children could be cared for at once? Is the child familiar with the caregiver?
- Are parents able or willing to pay extra for sick care if other resources are not available, so that you can hire extra staff as needed?
- Have parents made arrangements prior to illness for pick-up and care of ill children if they are not available?

C. Issues for Parents to Consider

When parents need to decide whether or not to send a child to child care, they must weigh many facts such as how the child feels (physically and emotionally), the child care program's ability to serve the needs of the mildly ill child, and income/work lost by staying home.