

# Temporary Tot Tending Sick Policies

Temporary Tot Tending reserves the right to temporarily deny any child admittance to the school for reasons of obvious illness or to send a child home should symptoms develop during the course of the day. To ensure the continued good health of everyone at the center, a child that seems unable to participate in our program for any reason will be sent home. We realize that most of you are working parents and we do try to accommodate you as much as possible. However, for the health and well being of the children in our care and our staff we feel it is vital to maintain a strict wellness policy. We ask for parents to assist by keeping sick children at home. We do take into consideration your physician's recommendations nevertheless it is up to our discretion when your child may return to school.

## When a child may not attend school:

- **Fever:** Children will be sent home if their temperature is 99.0 or higher and must stay home the next day for observation. Children must be free of fever (any temperature above 98.6 degrees) for at least 24 hours without the use of fever reducing medication. The same policy applies if your child develops a fever at home. They must be fever free (any temperature above 98.6 degrees) for at least 24 hours without the use of fever reducing medication.
- **Rash:** Any rash other than known eczema will require that child to be sent home for an evaluation and diagnosis from their doctor in writing to identify the rash and its cause. They must have a doctor's written evaluation, and clearance that it is not contagious in order to return to school.
- **Conjunctivitis (pink eye):** Children will be sent home if there appears to be an unusual amount of discharge from or irritation to their eye(s) and must stay home the next day for observation. Before returning to school they will need an evaluation and diagnosis from their doctor in writing of exactly what it is.  
If the diagnosis is BACTERIAL CONJUNCTIVITIS children must have received at least a full days worth of treatment before they can return to school.  
If the diagnosis is VIRAL CONJUNCTIVITIS your child may return AS LONG AS THERE IS NO DISCHARGE.  
If in fact they do not have "pink eye" we need a doctor's note with a diagnosis and a clearance that it is not contagious in order for them to return to school.
- **Thick White, Green or Yellow Nasal Discharge:** Children will be sent home if they appear to have any thick white, green or yellow nasal discharge. This is often indicative of an infection and they must stay home the next day for observation. Before returning to school they will need an evaluation and diagnosis from their doctor in writing and at least 24 hours of treatment before returning to school. If in fact they do not have an infection we need a doctor's note with a diagnosis of exactly what it is with a clearance that it is nothing contagious before returning to school. The Department of Health and most doctors are of the opinion that once on antibiotics for 24 hours, the discharge is no longer contagious even though it may persist for up to two weeks.
- **Diarrhea:** Children will be sent home if they have two or more loose bowel movements in one day and must stay home the next day for observation. Before returning to school (after the day of observation) children must be free from diarrhea for 24 hours with at least 1 regular bowel movement. If your child has one or more loose bowel movements on their first day back they will again be sent home.
- **Vomiting:** Children will be sent home if they vomit and must stay home the next day for observation. Before returning to school (after the day of observation) children must symptom free with no vomiting for at least 24 hours. The same applies if they vomit at home, they must be symptom free with no vomiting for at least 24hrs.

- **Persistent Hacking Cough:** Children will be sent home if they have a persistent hacking cough and must stay home the next day for observation. Before returning to school they will need an evaluation and diagnosis from their doctor in writing and at least 24 hours of treatment. If in fact they do not require any treatment we need a doctor’s note with a diagnosis of exactly what it is with a clearance that it is not contagious before they may return to school.
- **Lice:** Children will not be readmitted until 24 hours after treatment and for preschool, must be nit free in order to return to school. The Director or a Lead Teacher will make an evaluation and determine if the child can be readmitted.

### Common Cold Policy

Children suffering from a common cold will be assessed on an individual basis.

Factors of consideration include your child’s developmental level of your child in addition to our ability to limit the spread of germs. The younger your child, the more difficult it is to keep the spread of germs down. For example: hand to face contact, mouthing of toys, uncontrolled nasal discharge, uncovered sneezing and coughing etc.

### Medication Administration Policy

Medications both prescription and over the counter are rarely given at school; the only exceptions involve special or serious problems where it deemed absolutely necessary by the physician that the medication be given during school hours. The parent is urged, with the help of your child’s physician, to work out a schedule of giving medication at home, outside school hours whenever possible.

### **IF MEDICATION IS TO BE ADMINISTERED AT SCHOOL, ALL OF THE FOLLOWING CONDITIONS MUST BE MET**

1. School staff is not authorized to determine when an “as needed” medication is to be given, a specific administration schedule must be given.
2. Specific instructions are necessary.
3. A signed request from the parent/guardian must be on file at school.
4. Medication must be in your child’s original, labeled pharmacy container or OTC container written in English.
5. **All liquid medication must be accompanied by an appropriate measuring device.**
6. A separate form is required for each medication.
7. No medications can be left in your child’s backpack

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Parent signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Child’s Name