PROCEDURE MANUAL

ILL CHILD / STAFF EXCLUSION POLICY / REPORT OF COVID-19

- <u>PURPOSE</u>: To establish a procedure for staff to follow if a child develops symptoms which may be contagious, to minimize the spread of infection to other children and staff in the school. To report confirmed cases of COVID-19.
- <u>POLICY</u>: The Staff will use the following guidelines to determine possible contagious conditions for the purpose of this policy/exclusion from program/reportable disease to CT Department of Public Health and Local Health Department.
 - 1. COVID-19 Presumptive Signs/symptoms- All children and staff will be prescreened upon arrival.
 - 1.1 Observable symptoms for children include- flushed cheeks, respiratory distress or difficulty breathing, (without recent physical activity), fatigue, cough, or extreme fussiness. Tempature check will continue to take place for children at drop off as part of the daily prescreening health check.
 - 1.2 COVID-19 Presumptive Symptoms for staff or children include but are not limited to the following symptoms:
 - 1.2.1 Cough
 - 1.2.2 Shortness of breath or difficulty breathing
 - 1.2.3 New loss of taste
 - 1.2.4 New loss of smell
 - 1.2.5 Fever
 - 1.2.6 Chills
 - 1.2.7 Fatigue
 - 1.2.8 Rigor (feeling of cold and shivering)
 - 1.2.9 Muscle or body aches
 - 1.2.10 Headache
 - 1.2.11 Congestion or runny nose
 - 1.2.12 Sore throat
 - 1.2.13 Nausea or vomiting
 - 1.2.14 Diarrhea
 - 1.3 Staff and Family Member –Absence Tracking Form will be filled out by director or designee
 - Diarrhea An increase in frequency and decrease of consistency in bowel movements from the child's normal pattern (BM not contained); fever may or may not be present.
 - 3. Vomiting Increase of spitting up and/or the regurgitation of food from a previous meal.

- 4. Fever Presence of fever of 100 degrees or higher which may be accompanied by other symptoms such as persistent crying, decreased activity and/or unusual behavior.
- 5. Rashes of unknown origin.
- 6. Nasal/Eye discharge Recurrent, copious, or yellow/green discharge not due to allergies.
- 7. Parasitic infection evidence of infection by scabies, lice or other parasites.
- 8. Any other condition, which interferes with the child's ability to function in a group setting or requires one-on-one care, and/or which the staff suspect may be contagious.
- <u>PROCEDURE</u>: 1. Teaching staff will assess the child's condition. All children will be screened for any observable illness, including flushed cheeks, respiratory distress or difficulty breathing (without recent physical activity), fatigue, cough or extreme fussiness, and fever of 100 Degrees or higher. The Director /or designee will be informed of a potential illness.
 - 2. If a child is suspected of having a contagious illness, the child will be located away (minimum of 6 feet) from other individuals and will be provided with a cot and blanket to rest.
 - 3. The parent will be notified and information will be shared immediately. Once notified, a necessary course of action will be discussed. If it is determined that a child needs to be excluded from care, the parent will be expected to make arrangements to have the child removed from care within one hour, and will be informed that the child may return when:
 - 3.1 The symptoms causing concern have cleared.
 - 3.2 The child has been on antibiotics for at least 24 hours (as applicable).
 - 3.3 A child excluded from the program due to an illness accompanied by a fever must be fever free for a minimum of 48 hours. The child should not require an antipyretic (e.g. Tylenol, ibuprofen) to eliminate the fever and should not have received an antipyretic for fever in the past 24 hours prior to the child's re-entry into the program.
 - 3.4 A child excused from the program due to any illness or infection of a contagious nature (including, but not limited to vomiting and diarrhea) must be symptom-free for 48 hours prior to returning to the program.
 - 3.5 If there is concern about contagion, a doctor's note stating that the child is not contagious and may return to the program may be required prior to re-entry.

- 3.6 A child excused from the program due to suspicion of parasitic infection has been found free of infection or has received appropriate treatment.
- 4. When the school is informed of a child contracting a contagious illness the Nurse Consultant will be notified and a letter will be drafted to all families whose child may have come in contact with the illness.
- 5. If a child or staff member who has been present in the program is diagnosed with COVID-19, the director or designee will notify all families and staff who have been present in the program about the exposure.
 - 5.1 A report will be completed by the program director or designee and submitted to the Connecticut Department of Public Health and to the local health department in the town of residence of the case patient by telephone on the day of positive results of COVID-19. The director or designee will also notify the Windsor Health Department immediately following notification to the program. (See attached reporting form.)
 - 5.2 Information (contact tracing) that will be collected once the facility is notified of positive COVID-19 test result:
 - a. Individuals name
 - b. Date of Birth
 - c. Date of symptom onset of child or staff
 - d. Determine if the child/staff member attended/worked at the program while symptomatic or during the two days before symptoms began.
 - e. Identify what days the child/staff member attended/worked during that time.
 - F. Determine who had close contact with the child/staff member at the program during those days (staff and other children).
- 6. The staff members and children who are determined to have had close contact with the affected child/staff member may be excluded for 10 days after the last day they had contact with the affected child/staff member.
- 7. If a child or staff member who has been present in the program has been exposed to someone diagnosed with COVID-19 outside of the program, (a household member, caregiver in the home, or an individual who has had close contact for a prolonged period of time (longer than 15 minutes), they shall follow CDC Guidelines.
- 8. The program will immediately begin appropriate cleaning and disinfection:
 - 1) Close off areas used by the person who is sick.
 - 2) Open outside doors and windows to increase air circulation in the areas.
 - 3) Electrostatic spray all areas where the infected person has been.

- 4) Clean and disinfect all areas used by the person who is sick, such as offices, bathrooms, and common areas.
- 5) If more than 7 days have passed since the person who is sick visited or used the facility, additional cleaning and disinfection is not necessary.
- 6) Continue routine cleaning and disinfection.
- 9. Depending on the number of people affected, closure of a particular room in the program or the entire program might need to be considered. This decision will be made by the director or designee with recommendations from Local Health Officials.