## Responding To Illness

Yesterday, Brock was sent home with a fever, runny nose, and a deep cough that seemed to wear him out. He did not come to child care today. At 3:30 this afternoon, the phone rings. Brock's parents inform you that Brock has been diagnosed with whooping cough. Use your program's policies to answer the following questions.

NOTE: Follow your program's procedures. The responses that follow are suggestions based on American Academy of Pediatrics guidelines.

1. Who must be informed of this situation?

Typically, you must inform families of children in the program, children who had contact with the infected child, and other adult who had contact with the infected child. Also depending on the illness, you should inform your services' family child care administrator.

2. What information must you share?

You should share the common and medical name of the illness (in this case, whooping cough and pertussis). You should indicate whether one child or more are ill. Also:

- Share the symptoms of the illness and the way it is shared from person to person.
- Share how long the families should watch for symptoms.
- Share steps families can take to prevent the illness.
- Share steps your program has taken to respond to the illness (cleaning, etc.).

For this particular illness, it might be important to make sure families with infant siblings are aware that young infants do not have full immunization against whooping cough until their series of shots are complete.

3. How will you share the information (flier, note, phone call, media)?

This is up to you, and your developed policies and the nature of the illness. Many family child-care programs post a notice on their board where they communicate other important information with families and then talk with each family as they arrive.

4. How will you talk to families about the illness? Think about what you will say.

Be factual about the illness. Do not share the names of children infected. Provide the symptoms they should look for and the time frame. Refer them to health-care professionals for additional information.

5. Are there any special populations who might need extra information (e.g., pregnant women, children with newborn siblings, children who live with elderly grandparents)?

Talk to a health-care professional. In this case, children with newborn siblings might need extra information because newborn infants are not fully immunized against whooping cough.

6. Are immunizations a concern in this situation? If so, how will you respond to children who are not immunized or under-immunized for the illness?

Yes, immunizations are a concern. You should communicate with families about procedures for children who are not immunized. If need be, consult your trainer, coach, licensing agent, or local health-care professional about best practice. In some cases children who are not immunized will be asked to stay home for their own protection.

7. How will you ensure Brock's confidentiality?

Do not share information about who was infected.

8. When can Brock return to your family child care program?

This depends on your program's readmission policies. Typically, children can return to child care after five days of antibiotic treatment if they are feeling well enough to return.

9. What will you do if you see the symptoms in other children? In yourself?

If you are sick, do not return to caring for children in your program until you meet the criteria for returning. Be vigilant about symptoms in children and make sure to follow your program's exclusion and readmission policy.