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 your school-age program 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, families of children in the program, children who had contact with the infected child, and staff who had contact with the infected child must be informed.

2. What information must you and your program 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 many children are ill. You should share the way children might have been exposed (i.e., they are in the same classroom or played together actively in the gross motor room).

   - 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. Young infants do not have full immunization against whooping cough until their series of shots is complete.

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

   This is up to your program and the nature of the illness. Most programs post a notice in the family area of the affected classroom or school-age program and talk with each family.
4. How will you and your program 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.*

*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.*

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

*Yes, immunizations are a concern. Your program director will communicate with you and families about procedures for children who are not immunized. In some cases children who are not immunized will be asked to stay home for their own protection.*

6. How will you and your program ensure Brock’s confidentiality?

*Do not share information about who was infected.*

7. When can Brock return to the program?

*This depends on your program’s readmission policies. Typically, children can return to child care after 5 days of antibiotic treatment if they are feeling well enough to return.*

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

*If you are sick, stay home 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.*