

Appendix A

HEALTH POLICIES for Weinacker's Montessori Schools

These updated school health policies are designed to work for the overall health, safety and welfare of the children, staff, and families associated with WMS. In many ways they are more defined but in no way conflict with other guidelines or policies. While helpful, these guidelines cannot replace the teachers' judgment of your child's ability to participate within the routine school environment.

SYMPTOMS OF ILLNESS

Fever*

For purposes of school a fever is:

- ⇒ 100 degrees axillary
- ⇒ 101 degrees orally
- ⇒ 102 degrees rectally

Reasons for taking a temperature – child exhibits outward signs of illness; child is flushed, has chills, or feels warmer than usual; child is irritable or lethargic for a length of time.

A child's temperature must be below 100 degrees rectally without the use of fever-reducing medicine in order to return to the school. Should the child's temperature elevate above 100 degrees rectally on the day of his/her return to the school, he/she will be excluded from school.

**The teacher at the school will determine if a child has a fever and must leave school.*

Vomiting

Child will be sent home if he/she vomits at the school. Child may return to the school the following morning if he has not vomited in the previous eight hours.

If there appears to be blood present in the vomited material, immediate medical attention is necessary.

Cough

Child should be referred for evaluation if he/she has a frequent cough, which prevents eating, sleeping, playing or which is accompanied by other illness symptoms.

Rash

Child with an undiagnosed rash will be sent home for any of the following reasons:

- ✓ Rash is spreading over a period of time.
- ✓ It is widespread.
- ✓ It appears to cause discomfort and/or is accompanied by fever.
- ✓ It persists for more than two days.
- ✓ It contains or consists of blisters.
- ✓ It looks like it is bleeding under the skin.

Child will be excluded from the school until a note is received from his/her health care provider stating the diagnosis or that he/she is not contagious.

A child with any of the following diagnoses may attend school when a note is sent by the health care provider: diaper rash; heat rash; eczema; food allergy; antibiotic rash; contact dermatitis; rash from immunization; viral rash.

Mouth Sores

Mouth sores associated with an inability of the child to control his/her saliva is reason for exclusion from school unless a health care provider states that the child does not have Coxsackie virus. (See Coxsackie's virus under Contagious Illnesses.)

CONTAGIOUS ILLNESSES

Diarrhea*

Child will be sent home for diarrhea that occurs three or more times per day for infants that is not contained by diapers and two or more times per day for toddlers and preschool children that is not contained by diapers or toilet use.

Child may return to the school when diarrhea (as described in #1 above) has not occurred in the previous eight hours. On the day the child returns, if one such stool occurs, he/she will be excluded from the school.

If there appears to be blood present in the stool, immediate medical attention is necessary.

Diarrhea of two weeks duration is an indication of a need for professional medical evaluation.

**All diarrheas are a health concern in the classroom. Rotavirus diarrhea is of special concern – see list of contagious diseases, below.*

Cold

Child may be sent home with any of the following symptoms or complaints:

- ◆ nasal congestion/runny nose
- ◆ chills
- ◆ postnasal drip/sore throat
- ◆ red, watery eyes
- ◆ neck, head, muscle aches
- ◆ sneezing
- ◆ dry cough/hoarseness
- ◆ breathing difficulty
- ◆ listlessness/loss of appetite
- ◆ fever
- ◆ ear drainage
- ◆ nasal discharge that is copious, profuse or yellow/green

Rotavirus

A diagnosis of rotavirus by the child's health care provider requires exclusion from childcare for five days after the onset of symptoms or a signed release from the child's physician stating that the child is clear of the virus.

Coxsackie virus

A diagnosis of Coxsackie's virus by the child's health care provider requires exclusion from child care for five days after the onset of symptoms or until all lesions are dried or resolved, whichever comes first.

Impetigo

Child may return following twenty-four hours of treatment (may include topical or oral). Draining lesions should be covered with a bandage (i.e., Band-Aid).

Pink Eye (Conjunctivitis)

Child will be sent home if either eye is draining cloudy or colored discharge.

Child may return to the school when:

He/she has been on antibiotics for twenty-four hours, or

He/she is accompanied by a doctor's note stating that the drainage is caused by a non-contagious condition (such as a blocked tear duct).

If the child returns to the school and symptoms do not improve or should worsen, re-evaluation may be required.

Ringworm/Tinea

Child may return to the school after one treatment. In this event, all affected areas should be covered with a bandage (i.e., Band-Aid) until area is no longer affected.

Roseola

Child may return to the school when fever is gone and child has a doctor's note stating that he/she has Roseola and is not contagious.

Strep Throat

Child must be on an antibiotic for twenty-four hours before returning to the school.

Thrush

Child may return to the school after one treatment. Children who show no improvement after one week should be referred for re-evaluation.

Chicken Pox

Child may return to the school six days after the onset of the rash or when all lesions are crusted over, whichever comes first.

Lice

Child may return to the school when nits (eggs) can no longer be found on the child by the teachers or staff.

ADDITIONAL INFORMATION

"Out-of-Sorts" Children

Child will be sent home for a change in behavior that severely limits the attention that other children could and should be receiving, i.e., requires constant holding and attention, inconsolable crying for a long period of time, etc.

Administration of Medicine

- ❖ Fever-reducing and anti-diarrhea medicines will not be administered by parents or teachers while children are in the school.
- ❖ All over-the-counter cold medicines will be administered by parent ONLY.
- ❖ Teachers may administer topical medications with a physician's order, but may not administer oral prescription drugs.
- ❖ Prescription drugs must remain in their original container and be accompanied by a permission note from the parent.
- ❖ Teachers must administer the medication as stated on the container unless the medication is accompanied by a physician's note.

Important Note:

As soon as parents are aware of contagious diseases in their children, regardless of the severity or nature of the infection, they are responsible for notifying the school authorities.