

BCCC Health Guidelines

Updated: August 25, 2025

The following Health Guidelines have been updated based on the new CDC guidance for childcare and consultation with our health consultant team. The following considerations summarize the Maine CDC and the American Academy of Pediatrics (AAP) for guidance of how to manage illness in group care.

Guidance for illness:

- If a child has a fever (over 100.4) please reach out to your pediatrician/family medicine physician. Children must be fever-free and off fever-reducing medication for 24 hours prior to returning to the Center.
- Children who vomit or have diarrhea are excluded from care while those symptoms are present and for 24 hours after the last occurrence. In the event the child's diarrhea is related to antibiotics, the AAP still recommends exclusion like any diarrhea.
- For children experiencing multiple episodes of vomiting and/or diarrhea we will exclude them for 48 hours after their last vomit and their stools have become more typical.
- Children with an unexplained or spreading rash (not eczema), or a rash with crusty or weeping lesions will be excluded until a physician determines a timetable for their return. Children may return to care when a rash is examined by the pediatrician/family medicine physician and offers no contagion to others in group care. For example: lesions or scabs have dried and are no longer weeping or crusty.
- Children diagnosed with strep will be excluded from the Center for the day following the diagnosis to ensure that the antibiotics have had time to act and the child feels better.
- Children with discharge from the eyes or ears that is not clear but is a thick mucus-like substance will be excluded until a physician determines a timetable for their return. Children with suspected conjunctivitis (fluid discharge from the eyes) should be seen by a pediatrician/family medicine physician. Further direction from them will indicate when the child can return for care. Children may return to care when the discharge from the eyes or ears has either been assessed and treated by a pediatrician/family medicine physician or is no longer an issue. Bacterial conjunctivitis must be treated with antibiotics for 24 hours before returning. We encourage you to keep your child at home prior to a sick child visit so that we can be sure to keep the children in our care healthy.
- Children with scabies or other infestation (e.g., lice and nits that have not been treated) should receive treatment and remove all nits prior to returning to the Center. Children may return to the Center when head lice have been treated with a medicated shampoo and complete nit removal has taken place. Nit removal must be managed by the parent until there is no sign of nits or lice. Children will be excluded immediately if nits are found on them while at the Center so that parents can remove the nits. When nits are removed, children can return to the Center.
- The Center will not cite antibiotic use as single criteria for exclusion. However, the child must be able to participate in the Center's programming while they are recovering on antibiotics. If a child has diarrhea because of an antibiotic, they must be excluded from the program.
- Children may use Tylenol or other pain relievers to soothe teething symptoms. Please make sure to hand the medication to your caregiver and sign a release for medication form for it to be dispensed.
- Anesthesia Policy: When a child has anesthesia, parents will keep the child home for the remainder of the day of anesthesia and the following day.
- The Department of Health and Human Services regulations state that we must "Promptly exclude under immunized children if a vaccine-preventable disease to which children are susceptible occurs in the program". We will follow these regulations.

- We recommend that all children over 6-months old are vaccinated against the COVID virus. Copies of their completed vaccine forms will be kept on file.
- If a child has a febrile seizure or any other medical situation that may arise, they are welcome to return to our care once they have been assessed by a pediatrician/family medicine physician and a written plan for their care or a note for their return is submitted to the office.
- If a child has an allergy there must be an allergy plan submitted by their pediatrician on file in the office.
- If a child requires an Epi-pen, we will keep two of them at the Center. We will reach out to you prior to their expiration so that you can provide new ones.

Center Practices:

- The Center will continue to use air purifiers, clean with Oxiver cleaning spray, and bleach and wash toys daily.