



Bowen Children's Centre

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Illness Policy and Guidelines

Purpose of Policy

To provide guidance to help staff and families make informed, consistent decisions about illness across all BCC programs while supporting reliable care for families.

Procedures

Key Principles

- Support families who rely on care and give direction and understanding about when to keep children at home.
- Protect children and staff health to minimize the spread of illness, the need for children or staff to stay home and prevent program closures.
- Recognize that some mild symptoms (e.g. runny noses) are common in all children and do not automatically require staying home.
- Understand that worsening cough, fever, and diarrhea are primary indicators for children and/or staff to stay at home.
- Recognize that a child must be well enough to participate in all indoor and outdoor program activities and not require disproportionate staff attention.
- The decision to send a child home must be made by at least 2 Program staff members. The staff will alert the Managing Director (or Executive Director if Managing Director is not available) so that they are aware of the situation.

Guidelines for determining that a child may stay in care

- As each child may present symptoms of illness differently, monitoring each child is essential.
- Green/yellow nasal discharge alone but no fever - stay if otherwise well and monitor.

Guidelines for a child being sent home

- Child has a fever of 37.8 degrees C or 100 degrees F (from the Mayo Clinic); In the event of an outbreak, BCC may choose to implement more rigid guidelines in

order to protect families and staff from further illness.

- Child has difficulty breathing/wheezing.
- Child unable to participate in routine activities.
- Child has a worsening or persistent cough that is disruptive or interfering with play.
- Child has 2 or more of these symptoms: green/yellow nasal discharge, cough, fever, low energy.
- Child has symptoms of common childhood diseases that are very contagious, but usually do not have fever, etc. such as Pinworms, Impetigo or Pink Eye.
- Requires disproportionate staff attention.

Return to Care – Guidance

- Parents should be cautious about returning their child to care too soon in consideration of other children and staff.
- Has been fever-free for 24 hours after medication finished, including childrens Tylenol or equivalent.
- Has been free of vomiting/ diarrhea symptoms for 48 hours.
- Has residual cough but has energy and can fully participate.
- Has no respiratory distress.
- Symptoms are stable and child active enough to participate in all program activities (inside and outside). Child does not require disproportionate staff attention.

Informing the family that a child needs to be sent home

1. Wherever possible, when staff notice that a child is becoming ill and needs monitoring, a designated program staff will contact a parent so that the parent knows that there may be a problem.
2. If 2 staff members agree that a child is ill and should go home, one staff member should contact the parents for immediate pickup and the child should be isolated as best as possible.
3. If a parent cannot be reached for immediate pickup, staff shall call the alternate contact on the Emergency card. If the parent has been reached but not available for pickup, the parent must arrange for immediate pickup.
4. If the program staff is too busy to initiate the contact, ask for backup from the Managing Director or Executive Director.
5. The Managing Director must be informed as soon as possible any time staff contact a parent for immediate pickup due to child illness.

Related BCC policies	This policy approved on:
Quick Guide to Common Childhood Diseases BCCDC Health Info, BC Centre for Disease Control	Updated: Feb. 27, 2026