Measles – What Early Childhood Programs Should Know

Background

Childhood diseases can cause children pain and discomfort, and also lead to doctor visits, hospitalization and even death. Vaccinations are the best way to protect young children from 14 serious diseases, including measles.

Measles can be dangerous—especially for babies and young children. Measles spreads very easily, so it is important to protect against infection. To prevent measles, eligible children should be vaccinated with the measles, mumps, and rubella (MMR) vaccine. The measles vaccine has been used for years, and it is safe and effective.

The Administration for Children and Families’ Office of Head Start and Office of Child Care consider it critical that children in early childhood programs are vaccinated according to the Centers for Disease Control and Prevention immunization recommendations. In addition to the vaccinations that a state requires to enter child care, Head Start programs are required to help children in their care become current with their vaccinations.

CDC Recommendations for Child Care Programs

The Centers for Disease Control and Prevention (CDC) recommends that adults including child care program staff, as well as children be protected against measles and get vaccinated according to their age and health status. Child care programs should:

- Follow their state requirements for documenting immunization of children in the program. More information on which immunizations are required for each age group can be found at http://www.cdc.gov/vaccines/parents/record-reqs/childcare-school.html. In addition, the Administration for Children and Families recommends that you consult your child care licensing agency to confirm requirements.

- Encourage families to speak with their doctor about their child's vaccination status. Child care providers should also encourage parents to contact their doctor about any symptoms the child may have that are consistent with measles.

- Promptly notify state or local public health officials of any suspected measles cases and take steps to minimize the risk of measles spreading to other children. These steps include promptly cleaning the areas in which children with suspected or confirmed measles were present, notifying parents in the center, and ensuring that unvaccinated children remain at home for 21 days after exposure to the last measles case.

- Know that measles is a highly-contagious respiratory disease caused by a virus. It spreads through the air through coughing and sneezing. Measles starts with a fever, runny nose, cough, red eyes, and sore throat, and is followed by a rash that spreads
all over the body. An infected person can spread measles to others even before developing symptoms—from four days before they develop the measles rash through four days afterward. Children younger than 5 years of age and adults older than 20 years of age are at high risk of getting a serious case of measles.

CDC recommends that children get the first dose of MMR vaccine when they are 12-15 months old and the second dose when they are 4-6 years old. If the second dose needs to be given sooner, it should be at least 28 days after the first dose. To be fully immunized, children need all doses of each vaccine according to the CDC-recommended schedule. Not receiving the full number of doses on time leaves a child vulnerable to catching serious diseases.

**Partnering with Parents**

One of the most important contributions Early Head Start, Head Start, and child care programs can make is to reach out to parents. CDC has also provided sample materials and articles to share with parents in newsletters, web pages, or handouts.

- **Immunization Protects Us All** – 1 page
  

- **Five Important Reasons to Vaccinate Your Child** - 2 pages
  

**CDC Fact Sheet for Parents: Measles and the Vaccine (Shot) to Prevent It** in [English](http://www.cdc.gov/measles/downloads/matte-immunization-protects.pdf) and [Spanish](http://www.cdc.gov/measles/downloads/matte-immunization-protects.pdf). The best way to protect against measles is to get the measles-mumps-rubella shot (called the MMR shot).

**Program Resources – Helpful Links**

**CDC Immunization Schedules for Children and Adults**

The schedule lists the age or age range when each dose of every vaccine is recommended for children. Early childhood programs, pediatricians, other health providers, and parents should refer to the schedules to help prevent illnesses in young children. A parent-friendly version of the schedule is available in both [English](http://www.cdc.gov/measles/downloads/matte-immunization-protects.pdf) and [Spanish](http://www.cdc.gov/measles/downloads/matte-immunization-protects.pdf).

CDC recommends that adults be vaccinated or provide proof of immunity to measles according to the recommendations for their age and health status.

**State School and Child Care Vaccination Requirements**

Requirements for children entering early childhood programs differ by state. You can find state information on vaccination requirements and reporting requirements on CDC’s website. You should confirm this information with your state childcare licensing agency.
Caring for Our Children: Staff Immunization Standards  

Caring for Our Children, 3rd Edition (CFOC3) provides national model standards that represent the best evidence, expertise, and experience on health and safety for early childhood programs. CFOC3 is sponsored by HHS in conjunction with the American Public Health Association, the American Academy of Pediatrics, and the National Resources Center for Health and Safety in Child Care and Early Education.

CDC Measles Resources - Comprehensive information on measles resources for all audiences.

**Tips for Programs**

**Review your policies, procedures and practices for:**

- Vaccine requirements for children and staff;
- Children who develop measles, requirements to stay home, and their eventual return to the program;
- Daily health checks;
- Illness and return to work for volunteers and staff;
- Infection prevention and control (hand washing, sneezing technique, cleaning and disinfecting surfaces, provision for isolation of ill children or staff while awaiting transport out of the child care setting);
- Appropriate staff coverage in the event of staff absences; and
- Family support during prolonged closure of programs.

Early childhood programs should consult their local health department and/or child care licensing agency to understand the guidance in their state and community and ensure that program policies are consistent with that guidance.

**Communicate with Staff and Parents**

- Communicate clearly to your staff, parents, and partners using up-to-date information, guidance, and resources, such as those from your local health department and CDC.
- Explain that your program uses these trusted resources to develop and guide decision-making about your agency’s health and safety policies.

**Know Your Children, Families and Staff**

- Encourage vaccination of children, parents, and staff as recommended by CDC.
- Verify that each child is up-to-date on all required immunizations.
- Check vaccination records regularly to ensure that children stay up-to-date.
- Make sure you have a list of children who have not received recommended vaccines, particularly a measles vaccination – you will need this in the event of a case of measles in your facility.