

HEALTH ADVISORY

JB Pritzker, Governor

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Human Monkeypox Virus (MPV) Interim Guidance for Day Cares/Early Childhood Centers August 16, 2022

MPV is a disease that can cause flu-like symptoms and a rash. Human-to-human transmission of MPV occurs by direct contact with lesions or infected body fluids, or from exposure to respiratory secretions during prolonged face-to-face close contact. A person is considered to be infectious until there is full healing of the rash with formation of a fresh layer of skin.

Strategies for Preventing MPV Transmission in Day Cares

Day care staff should monitor for MPV among ill staff, volunteers and children, and implement the following strategies to prevent transmission within day care and early childhood settings:

- Monitor staff, volunteers and children for the presence of new, unexplained vesicular or pustular lesions (other than neonatal acne), or any characteristic lesions on palms and instruct them to seek medical evaluation and return with a providers note. (Note: rashes are not uncommon in children due to a variety of causes: See IDPH
 School Health Listing of Communicable Diseases (illinois.gov.) If a staff member, volunteer or child has a chronic condition that causes rash/skin lesions (such as neonatal acne), it may be helpful to have a provider's note in their health record.
- Contact your local health department immediately to discuss any suspect or confirmed MPV cases and discuss next steps.
- Encourage staff, volunteers and children to stay home if ill and maintain supportive sick leave protocols to encourage this. In addition to the rash, other symptoms of MPV include fever, headaches, muscle aches, swollen lymph nodes, chills, exhaustion, and respiratory symptoms (e.g., sore throat, nasal congestion, or cough). These symptoms can appear one to four days before the onset of the rash.
- Ensure access to handwashing. Soap and water or hand sanitizer with at least 60% alcohol should be available and encouraged/monitored, especially before eating and after using the restroom.
- Limit sharing of personal items.
 - Do not share eating utensils or cups.
 - Do not share bedding, towels, or clothing.
- Clean and disinfect: Clean surfaces at least once a day to reduce the risk of germs spreading by touching surfaces. Additionally, day care settings should follow standard procedures for cleaning, sanitizing, and disinfection in their setting, such as after diapering, feeding, and exposure to bodily fluids. See Caring for Our Children. Standard sanitizing procedures are acceptable. Toys that are frequently put in mouths should be washed with soap and water rather than U.S. Environmental Protection Agency (EPA) listed disinfectants.

Illinois Department of Public Health

Managing Potential Exposure within a Day Care Setting

If a staff member, volunteer, or child has a suspected or confirmed MPV infection that may have occurred within the day care setting:

- Contact your local health department to report any suspect or confirmed cases and discuss next steps for investigating the case and managing potential exposures within the day care.
- Communicate with staff, volunteers, and parents. Provide information about the
 potential exposure, guidance on monitoring for symptoms, and seeking medical
 attention/testing if symptoms develop and provide information about post-exposure
 vaccination opportunities. A sample letter will be provided by your local health
 department.
- Any persons with MPV should remain out of day care until MPV symptoms have resolved, the rash has healed, all scabs have fallen off, and a fresh layer of skin has formed per Centers for Disease Control and Prevention (CDC) recommendations. A provider letter clearing the person for return is recommended.
- Rapidly identify and assess people who might have been exposed to MPV, in collaboration with the local health department.
 - Identifying Exposed Individuals: Staff from the local health department will work with facility staff to identify dates the case was at the facility during the case's infectious period and those with whom the case had close contact.
 - Screening exposed individuals: All identified exposed individuals will be screened for <u>symptoms</u> and level of exposure.
 - Anyone with symptoms should isolate and be medically evaluated as described above.
 - Risk of exposure will be assessed based on CDC's <u>recommendations</u> to identify individuals who had exposures to someone with MPV, where possible. If contact tracing is not feasible, staff, volunteers, and children who spent time in the same area as someone with MPV should be considered to have intermediate or low degrees of exposure, depending on the characteristics of the setting (e.g., level of crowding). High risk contacts may be assessed in certain situation (e.g., if a staff member has lesions on hands and held an infant/ younger child, as in changing diapers.)
 - Symptom monitoring: LHD staff will provide guidance to parents of exposed individuals on monitoring for symptoms during the potential incubation period (21 days from last exposure).
 - Anyone with symptoms should isolate and be medically evaluated as described above.
 - Post-exposure prophylaxis (vaccinating individuals after high or intermediate exposure to prevent illness): IDPH and your local health department can provide <u>post-exposure prophylaxis</u> for individuals with high or intermediate exposures if the exposure was within the last 14 days AND no symptoms of MPV have developed. (Any symptoms of MPV would preclude post-exposure prophylaxis till MPV has been ruled out and so it is important to facilitate clinical

screenings and arrange vaccine administration through your local health department at the earliest opportunity.)

- <u>Post-exposure vaccination</u> is not necessary for low or intermediate degree exposures unless deemed appropriate by IDPH or your local health department.
- At this time, asymptomatic exposed individuals do not need to stay home from day care, unless recommended by the local health department due to high-risk exposure.
- Heighten surveillance for cases among those exposed for 21 days from the date the most recent case was in attendance. Consider requesting daily confirmation from staff and parents that staff and children are free from MPV symptoms and rashes, as well as implement the IDPH REDCap monitoring tool for exposed individuals.
- Ensure access to handwashing. Soap and water or hand sanitizer with at least 60% alcohol should be available at all times and at no cost to all staff and volunteers with supervised use by children. Anyone who touches lesions or clothing, linens, or surfaces that may have had contact with lesions should wash their hands immediately.
- Clean and disinfect the areas where people with MPV spent time. Avoid activities that could spread dried material from lesions (e.g., use of fans, dry dusting, sweeping, or vacuuming) in these areas. Perform disinfection using a U.S. Environmental Protection Agency (EPA)-registered disinfectant with an Emerging Viral Pathogens claim, which may be found on EPA's List Q. Follow the manufacturer's directions for concentration, contact time, and care and handling. Linens can be laundered using regular detergent and warm water. Soiled laundry should be gently and promptly contained in a laundry bag and never be shaken or handled in a manner that may disperse infectious material. People handling these materials should wear PPE as outlined below.
- Provide appropriate personal protective equipment (PPE) for staff, volunteers, and children. Employers are responsible for ensuring that workers are protected from exposure to MPV and that workers are not exposed to harmful levels of chemicals used for cleaning and disinfection. PPE should be worn by staff, volunteers, or residents in these circumstances:
 - Laundry When handling dirty laundry from people with known or suspected MPV infection, staff should wear a gown, gloves, eye protection, and a well-fitting mask or respirator. PPE is not necessary after the wash cycle is completed.
 - Cleaning and disinfection Staff should wear a gown, gloves, eye protection, and a well-fitting mask or respirator when cleaning areas where people with MPV spent time.