

Measles

GUIDANCE FOR CHILD CARE



What is measles and how does it spread?

- Measles is a highly contagious viral illness. Symptoms include high fever, cough, runny nose and red, watery eyes. After three to five days, a rash appears, usually on the head or face. As the days pass, the rash spreads to other parts of the body.
- Measles spreads from person-to-person. It spreads when someone who has measles talks, coughs or sneezes near others. The virus can also live in the air and on surfaces for up to two hours after a person who has measles was in the area.
- Measles can be transmitted four days prior to rash onset, through four days after rash onset.

How effective are vaccines against measles?

- The MMR (measles, mumps, rubella) vaccine is highly effective at preventing measles illness. One dose is 93% effective, and two doses are 97% effective.

How can I prepare for an outbreak in my child care facility?

- Save the contact number for the communicable disease nurse at your [local health department](#). This is the first call you should make if any staff member or student is suspected of having measles. If unavailable, call the NC Epidemiologist On-Call at 919-733-3419.
- Ask for staff to be aware of their [immunization status](#) and locate records that show they are immune to measles, including any of the following:
 - Written documentation of vaccination.
 - Laboratory reports of past illness or immunity.
- Ensure staff members understand that if they do not have proof of immunity, they will have to stay home from work if they are exposed to measles. Review [NC child care rules on isolation/quarantine guidance for communicable diseases \(PDF\)](#).
- Maintain current vaccination records for all enrolled children ([Immunization Requirements for Child Care Facilities](#)).
- Identify all susceptible children in your child care program before an outbreak occurs. Susceptible children include:
 - Children who have no immunization record on file
 - Children with an immunization record, but without MMR vaccine documented
 - Children who have a documented exemption to the MMR vaccine
- Maintain a list of children who do not have proof of immunization or immunity. In the case of an exposure, they will have to stay home from child care for 21 days after their most recent exposure, unless they get post-exposure prophylaxis within the appropriate timeframe. This **includes** children with a medical or religious exemption.
- Children and staff who need to complete their MMR series should contact a health care provider or local health department as soon as possible.
- Have a preparedness plan in place for your child care facility in the event of an outbreak that:
 - Assigns responsibility for contacting the local health department.
 - Includes a plan to isolate any suspected cases in the facility until they can be taken home by a parent or guardian.
- Children in child care are required to have one dose of MMR vaccine between 12-15 months of age. Any child that has not received one dose by 16 months of age is not up to date and should not attend child care until they receive the first dose. Some children 6-11 months of age may receive a dose early because a) they have been exposed to someone with measles or b) are traveling to an area of the U.S. that has measles cases or are traveling internationally. Doses administered before 12 months of age do not count toward the requirement of one dose between 12-15 months of age. The second dose of MMR is routinely recommended to be administered between the ages of 4- 6 years, before kindergarten.

When can children/staff return to child care?

These are general guidelines. Consult with your local health department on these decisions.

- A child or staff member who has measles may return to child care on the fifth day after rash onset.
- A child or staff member who was exposed to measles may return to child care:
 - After proof of immunity is confirmed, **or**
 - After getting the MMR vaccine within 72 hours of exposure, **or**
 - On the 29th day following exposure after getting immunoglobulin as post-exposure prophylaxis, **or**
 - After the 21st day following the most recent exposure, if MMR vaccine **or** immunoglobulin is not received.

What is considered “proof of immunity”?

- Written documentation of:
 - One or more doses of a measles-containing vaccine administered on or after the first birthday for preschool-age children and adults not at high risk.
 - Two doses of measles-containing vaccine, administered at least 28 days apart, for school-age children and adults at high risk, including college students, health care workers and international travelers.
- Birth before 1957.
- Laboratory confirmation of disease
- Laboratory evidence of immunity (documented positive Rubeola/Measles IgG).

Are there any restrictions on someone who was exposed but has proof of immunity?

- People with proof of immunity do not need to quarantine and may attend child care.
- Two doses of the MMR vaccine are 97% effective at preventing measles, but there is a small risk that a person who was vaccinated can become infected. It's important for staff and parents/guardians to know about measles symptoms and what to do if they or their child develop symptoms.
 - Get a [shareable fact sheet](#) (multiple languages available)

What if a child or staff member has measles or is exposed to measles?

- Public health staff will:
 - Interview the person with measles (or their parent/guardian if it is a child).
 - Identify all persons potentially exposed to measles.
 - Offer post-exposure prophylaxis to people who were exposed and do not have proof of immunity.
 - Provide guidance around staying home from child care/activities.
 - Coordinate with child care staff and administration around all of the above activities.

[What people can expect during public health outreach for infectious diseases](#)

When and how should we communicate a confirmed case with parents/guardians and our child care community?

- Work with public health staff to immediately notify parents/guardians of children who are susceptible to measles.
- During an outbreak, children and staff who are exposed to but not vaccinated against measles must stay home for up to 21 days after the date of the last exposure. The local health department will provide detailed guidance to all families and staff members.
- Coordinate with your local health department on notifications beyond the child care facility.

Where can I find more information?

Reach out to your local/regional health department point of contact. If you are unable to reach your local health department, call the North Carolina Epidemiologist On-Call (available 24/7) at 919-733-3419. The North Carolina Immunization Program Nurse On-Call is available during business hours at 919-707-5575. Additional supports available:

- Find a CCHC: [Child Care Health Consultants](#)
- [NC Child Care Health and Safety Resource Center Measles Quick Reference](#)
- [NCDHHS Measles \(Rubeola\) Webpage](#)
- Measles Basic Information Handout in [English](#), [Spanish](#), [Russian](#), and [Ukrainian](#)
- [CDC Clinical Overview of Measles](#)

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