



## Preparing for and Responding to Measles A Guide for Early Care and Education Centers

Measles is a significant health risk because it is highly contagious. If one person has measles, 90% of people nearby can become infected if they are not vaccinated or previously infected. About 1 in 5 people who get measles will be hospitalized. In early care and education (ECE) settings, measles poses a serious health threat because children and staff spend a lot of time together and are in close contact. Children under the age of 12 months are not eligible to receive vaccination to protect them from measles and are more likely to develop severe illness. This document provides guidance to ECE centers on how to prepare for and respond if a case of measles is suspected or identified within a facility.

### **Actions for Early Care and Education Centers to Consider Taking Now:**

- **Be prepared — Know who to call.** Measles is a public health emergency. Suspected measles cases should be reported to the Georgia Department of Public Health (DPH) **immediately**. Report suspected cases to DPH at 1-866-PUB-HLTH (1-866-782-4584) or contact your [local health department](#).
- **Educate staff about the [signs and symptoms of measles](#).** Measles typically begins with cold-like symptoms, including fever, cough, runny nose, and red watery eyes. Two to three days after symptoms begin, tiny white spots (Koplik spots) may appear inside the mouth. Three to five days after symptoms begin, a maculopapular rash breaks out. The rash begins as flat red spots at the hairline, moves to the face, and spreads down the body. Recent travel (international or domestic), attendance at a large event, or contact with an international traveler is a risk factor for measles and should be considered when evaluating symptoms. The infectious period is 4 days before and 4 days after rash onset.
- For more information, visit [Measles Clinical Guidance and Surveillance](#).
- **Understand measles exposure criteria and establish a process to identify individuals who may have been exposed.** The virus is transmitted by direct contact with infectious droplets and becomes airborne when an infected person breathes, coughs, or sneezes. An individual is considered exposed to measles if they had direct contact with an infectious person, occupied an area (any room within the same air handling system) with the infectious person, or was in a space within two hours after the person with measles left.
- **Review MMR vaccine requirements for children and staff (all ECE staff, including teachers, chefs, and contracted employees):**
  - One **documented** dose of MMR for preschool aged children over the age of 12 months.

- Two **documented** doses of MMR vaccine for early care and education staff
  - Laboratory evidence of measles immunity for staff
  - Laboratory evidence of measles immunity for students may be considered on a case-by-case basis, dependent on risk exposure assessment.
  - Laboratory confirmation of measles (verbal history of measles does not count)
  - Birth before 1957\*
    - \* Should consider vaccinating unvaccinated personnel in the ECE born before 1957 who do not have evidence of immunity
- **Review immunization records and identify high-risk children and staff.**  
Maintain up-to-date documentation of measles immunity status for all children, staff (including contracted employees), including those with medical or religious exemptions. Consider maintaining a list of individuals with immuno-compromising conditions. Children/staff who are not up to date on the MMR vaccination may be excluded from childcare for 21 days or longer if exposed to measles. Also, if it is determined that prolonged exposure occurred in the childcare setting, individuals without two documented doses of MMR may be excluded regardless of age.
  - **Connect with families to communicate vaccine guidelines and next steps.**  
Vaccination with the MMR vaccine is the best protection against measles. Encourage parents to vaccinate their un- and under- vaccinated students and inform them of Georgia's exclusion requirement (Georgia Code Section 31-12-3 and [DPH Rule 511-9-1](#)) in the event that a measles case is identified in their child's ECE. To protect the health of those exposed to a confirmed measles case and to prevent further spread, children/staff who are not up to date with the MMR vaccination could be excluded from childcare for 21 days or more if exposed to measles.
  - **Strengthen your ECE's health messaging.** Review your facilities' sick policies and encourage children and staff to stay home when sick.
  - **Promote respiratory hygiene and cough etiquette.** Encourage frequent handwashing. If soap and water are not available, use hand sanitizers. Disinfect frequently touched surfaces (e.g., doorknobs, tables, counters).
  - **Make sure your facility has a supply of disposable masks to give to a person with measles symptoms and to the staff monitoring them.** The staff monitoring the suspected individual should have evidence of immunity to measles and wear a disposable mask.
  - **Gather information about the facility's layout and ventilation systems to share with the health department.**

- **Identify an isolation space** where students with measles symptoms can wait for a caregiver to pick them up to prevent others from getting sick. Identify a room that does **not** use fans or systems that recirculate air to other parts of the building. The space should have a door that closes and, if available, a window that opens outdoors. Ideally, the space should be near an exit to minimize exposure. This room should not be used for 2 hours after the suspected or confirmed measles case has left the space/room. If no separate room is available, consider using outdoor space, weather permitting.

**If a child or staff member is suspected or confirmed of having measles:**

ECE's should work closely with the Georgia Department of Public Health to receive additional support and recommendations.

| Action                                          | Description                                                                                                                                                                                                                                                                                                                                                                                                  | Urgency   |
|-------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| If measles is suspected, isolate the individual | Remove children/staff with measles symptoms from shared spaces and place them in supervised isolation. The staff monitoring the suspected individual should have evidence of immunity to measles and wear a disposable mask. Pregnant and/or immunocompromised staff should NOT monitor suspected cases of measles.                                                                                          | Immediate |
| Control access to affected areas                | Restrict access to rooms or areas occupied by the suspected case for at least 2 hours, since the measles virus can remain airborne.<br><a href="#">Clean using an EPA approved disinfectant</a>                                                                                                                                                                                                              | Immediate |
| Contact the Georgia Department of Public Health | Report suspect case and follow additional guidance & recommendations provided.                                                                                                                                                                                                                                                                                                                               | Immediate |
| Identify those exposed AND at high risk         | Determine which children/staff had contact with the suspect case during the infectious period (4 days before rash onset to 4 days after); prioritize pregnant people, immunocompromised, and unvaccinated individuals. Consider movement throughout the building.<br><br>Additionally, any space previously occupied by the confirmed measles case is considered contaminated for at least 2 hours after the | Immediate |

|                                                                      |                                                                                                                                                                                                                                 |                                            |
|----------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|
|                                                                      | <p>case left. Therefore, any children/staff member who occupied that space would be considered exposed.</p> <p><a href="#">Measles   Georgia Department of Public Health</a></p>                                                |                                            |
| Identify vaccination status among exposed                            | <p>Identify exposed individuals with incomplete or no documented MMR vaccination</p> <p>Prompt identification will aid Public Health in the determination and receipt of post-exposure prophylaxis in a timely manner</p>       | Immediate                                  |
| Provide exclusion recommendations                                    | Once a measles case has been confirmed at your school, exclude students and staff as directed by public health until they are no longer at risk of developing or transmitting measles.                                          | Within 24 hours                            |
| Communicate with affected families and staff (including contractors) | Send notification letters to parents/guardians of exposed and excluded students, and staff                                                                                                                                      | Within 24 hours                            |
| Monitor attendance and ensure exclusion compliance                   | Track daily attendance of exposed and excluded individuals. Ensure those excluded do not return until cleared by public health.                                                                                                 | Within 24 hours                            |
| Monitor for symptoms among exposed children and staff                | In coordination with the health department, instruct families of exposed students and staff to watch for measles symptoms for 21 days after the last exposure. Report any symptomatic individuals to public health immediately. | Within 24 hours – continue through 21 days |

**For more information about measles, please visit [Measles | Georgia Department of Public Health](#) or [About Measles | Measles \(Rubeola\) | CDC](#).**