



# Illness Policy

## Statement of Intent

The health and wellbeing of all the children, staff and parents who attend the pre-school is of paramount importance to us. For the pre-school to provide a clean and healthy environment and to control the spread of infection it is important for everyone to follow procedures. We believe that unwell children need to be at home to recover from illnesses where they are more comfortable, this includes both infectious and non-infectious illness. Pre-school life can be demanding, and the environment is not conducive to supporting children's recovery.

**“The pre-school is committed to safeguarding and promoting the welfare of children, young people and adults at all times and expects everybody working within this setting to share this commitment”.**

## We aim to:

- Ensure unwell children are identified.
- Ensure unwell children are cared for appropriately.
- Protect children and adults from preventable infection.
- Enable our staff and parents to be clear about the requirements and procedures when a child is unwell.
- Provide a safe, secure, and hygienic environment, following stringent planned cleaning procedures and policies, including ongoing daily cleaning routines throughout the working day. Deep and thorough cleaning practice following infectious outbreaks.
- Inform and advise all persons who have contact with the pre-school, Parents, Children (New and Expectant mothers) and Visitors of an outbreak and information relating to symptoms, prevention and treatment required.
- Report infectious outbreaks to the appropriate authorities.

## Policies and Procedures

Updated: Sept 13, Jan 14, Jan 15, Jan 16, Oct 16, Sept 17, June 19, May 2020, June 2021, November 2022

***Next annual review date: September 2023***

## Procedure

**The health and well-being of the children in our care is of the utmost importance and we believe that the best place for children during times of illness is at home with their main caregivers. Our staff will report any worries about a child's health or wellbeing to the main caregiver immediately. The main caregiver is responsible for keeping the Nursery informed about their child's health and well-being.**

- ❖ Children should not attend the Nursery whilst suffering from an infectious or contagious disease and should be kept at home for the periods recommended by the NHS guidance, returning only once they are well enough and symptom free.
- ❖ If siblings are unwell, please do not bring them into the Nursery building. We will bring your child outside to you by the entrance door. Please telephone the Nursery in advance to let the staff know.

**If your child becomes unwell during their time at the Nursery, then we do expect that the main caregiver or emergency contact (in the event we are unable to contact the main caregiver) to collect the child from the nursery within 30 minutes of receiving a telephone call. The child will be comforted by a member of staff who will take appropriate action where necessary and can include professional medical advice whilst awaiting the arrival of the main caregiver. Please note that we expect the main caregiver to keep the Nursery informed of any changes to the emergency contact persons and their contact details.**

- ❖ Staff will assess the symptoms of the child and deal with them in an appropriate way following NHS guidelines and in conjunction with our Paediatric First Aid training knowledge.
- ❖ The main caregiver will be contacted should their child have a high temperature of **38c/101F** or higher as per the Nursery thermometer reading(s) and we expect that the main caregiver or emergency contact be available to collect their child within 30 minutes.
- ❖ If your child is sent home from Nursery due to a high temperature or they are displaying signs of an illness, they should not return to Nursery for a minimum of 24 hours to help prevent the spread of infectious diseases or viruses to staff and children.
- ❖ If your child has diarrhoea and/or vomiting, with or without a specified diagnosis, they should remain absent from the nursery for a minimum of 48hrs from the last time they were unwell or had a runny stool. If your child vomits or has diarrhoea whilst at the nursery, then we will contact the main caregiver to collect the child immediately. The child should not return to nursery for a minimum of 48 hours.

**Whilst we understand the needs of working parents and will not exclude children from the Nursery unnecessarily, a child's attendance whilst unwell is at the discretion of the Nursery staff. If staff request the exclusion of a child for illness or infection, then we expect the main caregivers to respect that the decision is final. Decisions made will consider the needs of the child and those within the Nursery community. We do this using NHS guidelines, but we also take into consideration the age and well-being of the child as this can change the level of action we need to take, to support the needs of all the children in our care. We do not have the staffing capacity to routinely provide one to one care for unwell children.**

## Medicines

- ❖ We do not administer fever reducing medication. If your child has a high temperature, then they should be kept at home for 24 hours to be monitored for signs of illness.
- ❖ We only accept and administer medicine that has been prescribed by a Doctor/Nurse or Pharmacist.
- ❖ We only accept medicine that is in the original unopened bottle or packaging with the instruction leaflet enclosed, and where appropriate with the child's name on the dispensing label.
- ❖ All medication will be documented and stored in a safe & secure place away from children. Dispensing medicine/ Healthcare forms need to be completed by the main caregiver on arrival and departure of the child.

- ❖ Main caregivers - **DO NOT** under any circumstances leave medication in your child's bag or put medication in a drink or food substance in your child's lunchbox or bag. This is deemed as a safeguarding children issue and appropriate action will be taken by the Nursery should an incident occur.
- ❖ **Antibiotics** –If antibiotics have been prescribed, we ask that the child stays absent from the Nursery for a minimum of 48 hours. This is to ensure whilst the child's immune system is reduced that they can recover from the initial infection without the risk of contracting or developing secondary infections and to contain the spread of infection to the Nursery community and other vulnerable persons. It is important for the main caregiver to monitor for signs of allergic reactions during the initial 24/48 hours of commencing antibiotics.

### **Under two's and at risk of febrile convulsions**

- ❖ Fever reducer e.g., Calpol, may only be administered in emergencies and **only** with the main caregiver's consent and if the appropriate healthcare forms have been completed.
- ❖ The main care giver will be contacted by staff to confirm the last time that the main caregiver administered fever reducer e.g., Calpol, to the child, before the Nursery will administer fever reducer to the child whilst in our care. This is to prevent overdosing the child on a paracetamol-based product.
- ❖ In the case of teething in young babies, Calpol or other pain reducing medication will not be given instead other methods will be administered to alleviate pain e.g., ice cold cloth, teething ring.

### **Infectious/ Contagious Diseases Minimum Exclusion Period**

To minimise the impact on our Nursery community and vulnerable persons we expect main caregivers to be mindful of their decision to send a child to Nursery whilst they are unwell. Whilst coughs and colds do not necessarily require a child to be absent, this does depend on the severity and how the child is able to cope with the nursery daily routine.

If a child complains of a sore throat, or has uncontrollable fits of coughing, or a severe runny nose, or ongoing severe discharge from their ears, nose, or eyes, the main caregiver will be advised to seek medical advice before their child will be allowed to attend Nursery and in some cases a doctor's note may be required before returning to Nursery to ensure the child's health and wellbeing is met.

If a child develops an unexplained rash or spots, then we expect the main caregiver to seek medical advice which they should follow before the child is allowed to return to Nursery.

### **Conjunctivitis**

Whilst this is a common infection, it is also highly contagious, and it is difficult to prevent the spread amongst young children. If we believe a child may have symptoms relating to the virus, we will inform main caregivers and advise that the child is collected within 30 minutes.

- ❖ The main caregiver should seek medical advice on the type of treatment required. Once the child has been treated with medication for a minimum of 24 hours and the conjunctivitis appears to be under control, providing the child is well and not experiencing symptoms that make them uncomfortable and unhappy then they may return to Nursery. This will be at the discretion of the **Nursery Manager/Deputy Manager**.

Your child should not attend the Nursery for the required exclusion period if they are suffering from any of the following listed below.

\*Please note this list is not exhaustive and further information can be found on NHS Direct website\*

\*Indicates notifiable disease\*

Infectious Disease/Illness	Minimum Exclusion Period	Common Symptoms
<b>Chickenpox</b>	5 days from the onset of rash and until blisters are all crusted.	The child may return to nursery if they are well in themselves. This is also dependant on the location of the spots and the age of the child.
<b>Conjunctivitis</b>	24 hours after starting treatment	highly contagious and uncomfortable, itchy eyes. Children should not return until 24 hours after starting treatment and if the child is well in themselves.
<b>Croup</b>	48 hours	A child with croup has a distinctive barking cough and will make a harsh sound, known as stridor, when they breathe in. They may also have a runny nose, sore throat, and high temperature. Croup can usually be diagnosed by a GP and treated at home.  But if your child's symptoms are severe and they're finding it hard to breathe, go to A&E or call 999 immediately as they'll need urgent treatment in hospital.
<b>Diarrhoea and/or vomiting</b>	48 hours	For <b>minimum of 48 hours</b> after last episode or until child is completely well
<b>German Measles (rubella)*</b>	6 days	6 days from onset of rash particularly as Rubella can be harmful to expectant mothers.
<b>Hand, Foot, and Mouth</b>	First day until child well	Keep your child at home while they feel unwell and symptoms have eased, we request that ulcers on hands and around mouth are dry before returning as infection can be spread quickly through these rooms due to their age and vulnerability.
<b>Head Lice</b>	None although treatment required	Easily transmitted from head-to-head. Please use a course of treatment recommended by the Chemist and inform the Nursery, so we can inform other parents. (Confidentiality is kept to at all times)
<b>Hepatitis</b>	Medical permission required	The Nursery is unable to accept an infectious child until declared fit by a doctor.
<b>Impetigo</b>	48 hours	Highly contagious. Until lesions are crusted and healed or minimum of 48 hours after commencing antibiotic treatment
<b>Measles*</b>	4 days	4 days from onset of rash
<b>Meningitis</b>	Medical permission required	The Nursery is unable to accept an infectious child until declared fit by a doctor
<b>Molluscum contagiosum</b>	None	None, self-limiting condition
<b>Mumps*</b>	5 days	A child must not return to Nursery until swelling has gone and temperature is back to normal.
<b>Ringworm</b>	Once treatment commenced	When treatment has commenced
<b>Scabies</b>	After first treatment	After first treatment has commenced
<b>Scarlet Fever*</b>	24 hours	Minimum 24 hours after antibiotic treatment has commenced

<b>Slapped cheek/ fifth disease/ parvovirus</b>	24 hours	None, although highly contagious and associated high temperature, harmful to expectant mothers
<b>Shingles</b>	If rash is weeping and oozing stay absent until dried out.	Child to be absent if the rash is still oozing fluid (weeping) and cannot be covered, or until the rash has dried out.  The infection will spread to other people while the rash oozes fluid.
<b>Threadworms</b>	Once treatment commenced	No need for exclusion but prompt treatment necessary for the whole family. The Nursery should be informed.
<b>Tuberculosis</b>	Medical permission required	A child may not come back to Nursery until fully recovered. Please liaise with the UK Health Security Agency.
<b>Typhoid</b>	Medical Permission required	Fever until declared free from infection by the appropriate public health official.
<b>Whooping Cough</b>	5/21 days	5 days from commencing antibiotic treatment or 21 days from onset of illness if no antibiotic treatment

**Should you or any other member of your immediate family have any of the above illnesses, please remember that your child, whilst not necessarily showing any symptoms, may be incubating the illness and therefore infecting other pre-school users and staff.**

**These times/days are all guidelines and may take longer in each individual case, also even though days may have passed it is dependent on how your child feels and can cope with the nursery environment.**

#### **Reporting of notifiable diseases**

- ❖ If a child or adult is diagnosed suffering from a notifiable disease under the public health (infectious diseases) regulations, the GP will report this to the Health Protection agency.
- ❖ When the setting becomes aware, or is informed of a notifiable disease, the Nursery Manager will inform the Principal, Michelle Wisbey, who will inform OFSTED and will act on advice given by UK Health Security Agency.

#### **Head injuries**

If a child receives a significant bump to their head we will, as a matter of urgency:

- ❖ Contact the parent/carer immediately, for the child to be taken home or to Accident and Emergency, if thought necessary.
- ❖ We expect the main caregivers to monitor the child closely for any side effects or concussion. Please refer to the NHS website or telephone 111 for guidance or advice.
- ❖ All injuries are logged in our accident/ incident book and signed by main caregivers. We do provide an information sheet on Head Injuries BUT main caregivers should always seek medical advice if they are concerned about their child's health.

### **Temperature in Babies and Children**

#### **Normal temperature**

Body temperatures vary slightly from child to child, but the normal temperature of both babies and young children should be around 36.4°C. A normal body temperature for infants can be impacted by their level of activity and what they're wearing.

#### **What is a fever?**

A fever is a temperature of 38°C or more. Fevers, though, can have several other symptoms alongside the high temperature. Please see the NHS website for advice and guidance [High temperature \(fever\) in children - NHS \(www.nhs.uk\)](https://www.nhs.uk)

# BODY TEMPERATURE INFO



Age range	GREEN Normal temperature	YELLOW Moderate fever	RED High fever
0-3 Mos	> 35.8 – 37.4°C	X	> 37.4°C
>3-36 Mos	> 35.4 – 37.6°C	> 37.6 – 38.5°C	> 38.5°C
>36 Mos adult	> 35.4 – 37.7°C	> 37.7 – 39.4°C	> 39.4°C

## Your child's temperature: how high is too high?

