

## **Managing children who are sick and/or infectious.**

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Purpose: To outline the protocol in the event of a child being unwell.

Scope: All staff

Responsibility: Owner/Manager

Reviewed on: 3<sup>rd</sup> May 2024

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### **Policy statement**

Children should not be left at the setting if they are unwell. If a child is unwell then they will prefer to be at home with their parent(s) rather than at the setting with their peers. We will follow these procedures to ensure the welfare of all children within the nursery:

- If any child is thought to be unwell, we will assess the condition of the child, this will be done in a kind and caring manner. The child may become distressed so it is important to be calm and reassuring. The Nursery Manager (Michelle Twinn/Domanique Proverbs) must be informed of any sick children.
- We understand the needs of working parents and will not exclude children from the nursery unnecessarily. It is however at the discretion of the Manager when requesting the exclusion of a child for illness or infection and that decision is final. Decisions will be made and take into account the needs of the child and those within the group.
- Any child with an infectious or contagious disease will be excluded for a certain period of time. If staff suspects that a child has an infectious or contagious disease, they will advise that parents are to consult a doctor before returning to the nursery.
- Should a child become ill whilst at the nursery, the manager or Key person will contact the parent or emergency contact, we ask for the child to be collected within one hour if possible. The child will be comforted by the key person who will take appropriate action which will include medical advice if necessary, whilst awaiting the arrival of the parent/carer.
- Our staff will report any worries about a child's health or well-being to the parent/carer immediately. Parents/carers are responsible for keeping the nursery informed about their child's health.
- We recommend that no child may attend the nursery whilst suffering from a contagious disease and should be excluded for the periods recommended.
- Parents/carers will be contacted should their child have a high temperature of 38c/101F or higher, and will be requested to collect their child as soon as possible.

- Children's paracetamol (Calpol) is administered only with parental consent. Parents will be contacted before Calpol is administered. Parents will be required to sign to acknowledge the administration of the medication and confirm they were notified prior to the medication being administered.
- Coughs and colds do not necessarily require the child to be excluded from the nursery, but this will depend on the severity and how the child is able to cope with nursery routine. A child who is or appears unwell may be refused admission and this will be at the discretion of the Manager.
- If a child has ongoing discharge from their ears, nose or eyes the parent/carer will be advised to seek advice before their child is allowed back to the nursery and in some cases a doctor's note may be required before returning.
- A child who has sickness or diarrhoea whilst at the nursery is to be collected immediately and kept away for 48 hours from the last time they were sick or had a loose stool.
- To prevent the spread of conjunctivitis, suspected cases will be reported immediately to parents/carers who will be requested to take their child from the nursery to be seen by the doctor or pharmacist for advice on what treatment is required. Once the child aged 0-2 has been treated and the conjunctivitis appears clear, providing the child is happy they may return to nursery, the child aged 2-3 must avoid nursery for 48 hours from starting treatment and the child aged 3-4 must avoid nursery for 24 hours from starting treatment. Again, this will be at the discretion of the Managers and in discussion with the parent/carer to ensure the spread of the infection is reduced to a minimum.
- Parents will be contacted if their child develops an unexplained rash and be requested to seek medical advice which they should follow before the child returns to nursery.
- If your child has not been their normal self at home but is not showing signs of illness when brought into the nursery, please mention it to your child's key person or Nursery manager to let them know how to best contact you during the day and how they can support your child whilst they are at the nursery.
- The nursery is committed in providing the highest standards of care for our children to ensure their health and well-being is maintained at all times.
- We operate an 'open door' policy towards parents/carers in the nursery, so please feel free discuss any concerns about your child with their key person or manager.
- If children are prescribed ORAL antibiotics, they must not return to nursery until 48 hours following the first dose, AND they must feel well enough to be at nursery. They must NOT have a high temperature, and should not have had Calpol before coming to nursery to disguise illness. Topical antibiotic creams require 24 hours exclusion from nursery.

- It is vital that we follow the advice given to us by our registering authority and exclude specific contagious conditions, e.g. sickness and diarrhoea, and chicken pox to protect other children in the nursery. Illnesses of this nature are very contagious and it is exceedingly unfair to expose other children to the risk of an infection
- If a contagious infection is identified in the setting, parents will be informed to enable them to spot the early signs of this illness. All equipment and resources that may have come into contact with a contagious child will be cleaned and sterilised thoroughly to reduce the spread of infection
- The setting has the right to refuse admission to a child who is unwell. This decision will be taken by the manager on duty and is non-negotiable
  - If children have headlice, they will not be excluded from nursery, however parent/carer will be asked to treat ASAP in order to prevent spread. If a child continuously has headlice ongoing, parent/carer will be asked to collect the child and treat the same day in order to return to nursery.

### **Monitoring Temperatures**

If you suspect a child has a temperature the following steps must be followed:

- Take the child's temperature using the ear thermometer.
- Record the child's temperature
- Record comment's that shows what measures have been done to help reduce temp.
- Take layers of clothing off to help reduce temperature
- Give the child some water to drink
- Call the Parent and record that the call was made
- Ask the parent to collect the child
- Comfort the child if upset (however try not to cuddle them for too long as your body heat will add to temperature)
- Record and monitor every 10-20 minutes
- If continues to rise call parent again to see how long before collection
- If you are unable to bring the temperature down and it continues to rise, and you cannot contact the parent/carers, contact other named persons on the child's registration form.

### **Temperatures 40c and above**

- If child's temperature is 40c or above, inform the manager immediately
- Manager to check child's temperature and contact parent/carer and ask them to collect
- If parent/carer unable to collect immediately inform them that the temperature will continue to be monitored for 10 minutes and if there is no change or it increases an ambulance will need to be called due to high risk of febrile convulsions

- Continue to monitor temperature and reduce layers of clothing
- If temperature maintains or increases after 10 minutes an ambulance will need to be called
- Parents/carers to be notified immediately
- A member of the management team is to accompany the child to hospital ensuring they take the child's registration forms with them and a mobile phone.
- Upon returning to the setting the manager is to inform Ofsted.

### **Meningitis procedure**

If a parent informs the setting that their child has meningitis, the manager should contact the Infection Control (IC) Nurse for their area, and Ofsted. Public Health England will also need to be informed. The IC Nurse will give guidance and support in each individual case. If parents do not inform the setting, we will be contacted directly by the IC Nurse and the appropriate support will be given.

### **Reporting of notifiable diseases**

- If a child or adult is diagnosed suffering from a notifiable disease under the public health (infectious diseases) regulations 1988, the GP will report this to the Health Protection agency.
- When the setting becomes aware, or is informed of the notifiable disease, the Manager will inform OFSTED and acts on advice given by the Health Protection Agency.

### **Head injuries**

If a child receives a significant bump to their head, it is our policy to contact the parent/carer immediately, for the child to be taken home or to Casualty if thought necessary. This is so the child can be monitored closely for any side effects or concussion. Smaller injuries to the head will be monitored within the nursery and staff should notify parents if there are any changes to the child's health. All injuries are logged in our accident book and signed by parents. A 'bumped head' letter will be sent home when the child is collected – this will advise parents of the signs to look for following a bump to the head, whereby they would need to seek medical advice from a professional.

### **Transporting children to hospital procedure**

- Should the manager consider the illness or situation needs immediate medical attention, the emergency services will be contacted to take the child directly to hospital and the parent/carer will be contacted accordingly.
- In the unlikely event of the parent /carer not being available the most senior member of staff (manager) will assume charge and, if necessary, take the child to hospital along with the relevant details.

- If the sickness is severe, call for an ambulance immediately. DO NOT attempt to transport the sick child in your own vehicle
- Whilst waiting for the ambulance, contact the parent and arrange to meet them at the hospital
- A member of the management team must accompany the child and collect together registration forms, relevant medication sheets, medication and the child's comforter. The directors of the nursery (Michelle Twinn/Robert Twinn) must also be informed immediately
- Remain calm at all times

Children who witness an incident may well be affected by it and may need lots of cuddles and reassurance.

Ofsted

A member of the management team will report to Ofsted in the following instances:

- Anything that requires resuscitation
- Admittance to hospital for more than 24 hours
- Broken bones, fractures, dislocation
- Loss of consciousness
- Severe breathing difficulties
- Anything that leads to hyperthermia or heat induced illness
- Any loss of vision
- Absorption (inhalation, ingestion or through the skin) of any toxic substance.

### **Exclusion Periods**

If a child or member of staff becomes ill outside of operational hours, they should notify the setting as soon as possible. The minimum exclusion periods outlined below will then come into operation.

Illness	Exclusion period
Antibiotics Prescribed	48 hours from the first dose, and they must be feeling generally well.
Diarrhoea/Sickness	48 hours clear
Covid 19	Children can be in nursery, providing they are generally well.

Chickenpox	Once all the spots have scabbed over and children are generally well.
Tonsillitis	Once children are feeling generally well. 48 hours after the first dose of antibiotic.
Hand, Foot and Mouth disease	Once children are feeling well, and the rash is gone.
Impetigo	Children can return once the skin has healed.
Norovirus	48 hours clear
Conjunctivitis	0-2 years – once the discharge has totally gone. 2-3 years – 48 hours from starting medication. 3+ - years – 24 hours from starting medication.

**This list is not exhaustive please contact the nursery for more information. The nursery has the right to extend any incubation/exclusion period should it feel necessary to do so.**