

Ill or infectious children policy



Policy statement

When a child is unwell we endeavour to minimise the spread of infection where possible. We abide by guidance for infection control to keep everyone in our community safe. To ensure that everyone in the pre-school remains healthy and well and adequately supported if they are not we adhere to the following strategies and policies:

- *Health and safety at work act 1974*
- *Public Health England Guidance on infection control in schools and other childcare settings (2014)*
- *Statutory framework for the early years foundation stage*
- *RIDDOR (2013) The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations*

It is the policy of this provision that children in our care are always kept safe. We understand our duty to promote the good health of the children, take necessary steps to prevent the spread of infection, and take appropriate action when they are ill.

Procedures

Children have minor illnesses from time to time, such as coughs and colds, that do not prevent them from attending. However, we are aware that some children will have minor or serious illnesses from time to time that should prevent them from attending.

It is the policy of the provision that children who have anything more than a minor illness should be kept at home. This is particularly important in the case of any infectious illness that might be spread. Children with the following signs or symptoms will be excluded from the provision:

- diarrhoea and/or vomiting
- doubtful rash
- infectious illness, e.g. chickenpox, mumps, or measles
- fever or temperature

In cases of diarrhoea and vomiting parents/guardians will be advised that their children may not return to the provision until 48 hours after they have been symptom free.

Children who are having to use medication (such as ibuprofen or Calpol) to control a temperature, or if the child is feeling unwell, should keep their child at home until they are no longer reliant on these.

We will only administer Calpol in an emergency to bring a child's temperature down or Piriton to control an allergic reaction after we have consulted with the parent or carer via the telephone, and we have gained consent. However, it is not our normal practise to prescribe medication to children unless it has been prescribed by a doctor.

If a child arrives at the provision ill, the senior member of staff will make the decision whether the child is fit to attend or not. If not, the parent will be asked to take the child home.

If a child appears unwell during a session, they have a temperature, sickness, or diarrhoea then the child's parents/carers will be called and asked to collect the child. Whilst waiting to be collected the child will be monitored and comforted and given the chance to rest in a quiet area.

If a child's condition worsens such that it causes concern to staff, then suitable medical treatment should be arranged in the form of either a GP, an ambulance or transport to accident and emergency. Parents/carers will be informed. In the event of an illness requiring hospital treatment, the person in charge will try to inform the parents/carers immediately and arrange to have the child taken to hospital. The person taking the child will stay with them until a parent/carer arrives. If they do not arrive or are unable to be contacted, the member of staff should stay with the child until the appropriate treatment has been given and follow the advice of the responsible doctor, returning, when appropriate to the provision where he or she would be cared for until the arrival of the parents/carers. A detailed report of what happened, and action taken will be completed.

In the case of a serious injury, an appropriate report will be made to Ofsted as required by the Early Years Foundation Stage (EYFS) statutory framework.

Infectious diseases

When giving advice to parents about specific illnesses or diseases we refer to Managing Specific Infectious diseases A-Z at the following link <https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/managing-specific-infectious-diseases-a-to-z> It provides suggested periods of absence for several conditions.

Parents will be made aware if their child has been in contact with another child who has an infectious illness. Parents are informed verbally and via notices within the setting of occurrences of infection.

- A child who has chicken pox, may attend 48 hours after the last spot has dried out and crusted over. Parents are to make sure there are not any recurring infectious spots
- A child who has conjunctivitis may attend the setting if they are being treated
- Where a child has been prescribed antibiotics, parents are asked to keep them at home for 48 hours before returning to pre-school and they must be well before they return

Head lice

Children cannot be excluded from nursery for having head lice, but in extreme cases parents can be asked to collect their child from nursery to receive treatment. Usual procedures will be to advise all families of an outbreak of head lice at the nursery recommending that all families check their children and themselves for lice. At no time can a child be singled out as the main cause of the head lice problem. Continued failure to treat head lice can sometimes lead to concerns of neglect, which may in time lead to a referral to the authorities. For repeated outbreaks of head lice, staff may keep records and have a private conversation with the child's parents / carer regarding treatments and courses of action. Local pharmacists can give advice on headlice prevention and treatment.

Policy reviewed on: 8th January 2024

Reviewed by: Sandra Butler, Manager

Next Review Due: 8th January 2025