

Sick Children/Illness and Medicines Policy - including response to Covid-19

In order to control infection and protect all concerned, in general I am unable to look after sick or infectious children.

A cautious approach during the pandemic

In view of the current Covid-19 pandemic, and to protect all concerned, you will understand that we need to err on the side of caution with regard to any signs of illness. Even if the classic symptoms of Covid19 are **not** apparent (a runny nose, a sore throat, or a headache for instance, or basically any sign of being 'off colour'), as usual I would require a discussion with you, the parent/carer, before the start of the childminding session so that I can make an informed decision as to whether or not I can care for your child that day, bearing in mind the risks of potential Covid-19 infection. *Phone NHS 111 if unsure about whether or not symptoms warrant a Covid-19 response.*

For information on managing specific illnesses and recommended 'exclusion' periods for certain infections, I consult the **exclusion table** in Gov.uk For example: Hand, Foot and Mouth, Conjunctivitis, Chicken Pox, Impetigo, and Scarlet Fever, all require periods of exclusion, as advised by Public Health England.

The **exclusion table** also tells me which diseases are 'notifiable', as marked with an asterisk * which denotes a notifiable disease (it is a statutory requirement that doctors report a notifiable disease – known as NOIDS). I am aware that notifiable diseases should be reported to Public Health England, South West Health Protection Team Tel: 0300 303 8162 (option 2). Covid-19 is a notifiable disease.

Responding to symptoms of Covid-19

With regard to the classic symptoms of Covid19 (which are: a new, continuous cough, a high temperature or a loss or change in taste or smell): as the parent/carer, I ask for your support and cooperation in following the government guidelines and Public Health England, in order to contain the spread of the virus. **If your child became ill in my care with classic Covid-19 symptoms**, I would contact you immediately and ask you to take your child home. Please can you ensure that the emergency contacts which you have given me are current and correct and your emergency contact people understand the need for a speedy collection of a poorly child.

In the event of a presentation of Covid-19 symptoms, I am required to use PPE while your child is still with me, move your child away from the other children and make sure the room is ventilated. Your child should be collected promptly and your household should self-isolate until your child's test-outcome is known. **Get a test for a child** *In this scenario when a child has been sent home with potential symptoms the rest of the children in setting/childminding assistants do not have to go home if they do not have any symptoms. Everyone in the setting should wash their hands for 20 seconds and any affected areas of the childminder's setting should be cleaned with household disinfectant, as per the government advice.*

I would be grateful if you, the parent/carer would let me know of the outcome of the test in order to plan accordingly. If you do not wish to have your child tested, or if your child refuses the test then unfortunately I have no option but to exclude your child for the time period as specified by DfE if they had tested positive.

- **If your child tests negative**, your household can stop self-isolating, if your child feels well and no longer has symptoms similar to coronavirus (COVID-19). Your child could still have another virus, such as a cold or flu - in which case it is still best to avoid returning to the childminding setting until they are better.
- **If your child tests positive**, you should follow the [Coronavirus \(COVID-19\): Stay at home guidance for households with possible or confirmed coronavirus \(COVID-19\)](#) which says that following a positive test result you will receive a request by text, email or phone to log into the NHS Test and

Trace service website and provide information about recent close contacts. The self-isolation of the whole household is at least 14 days.

Following a positive test of a child at my setting, I too will follow [guidance on implementing protective measures in education and childcare settings](#) which says that “where the child, young person or staff member tests positive, the rest of their class or group within their childcare or education setting should be sent home and advised to self-isolate for 14 days.”

“If the child or staff member tests positive, the rest of their immediate group within their setting should be sent home and advised to self-isolate for 14 days. For childminding settings, this applies to everyone attending your setting who came into contact with the child or staff member.”

- **If a member of my household or I, the childminder, have any symptoms**, we will get tested promptly and inform you. If the test is positive, close contacts, such as minded children, would be informed by Test and Trace.

If anyone in my childminding setting has **symptoms** I can phone Dept for Education for advice on next steps **Department for Education helpline on 0800 046 8687**

If I have **one positive test** in my setting I report it to **Department for Education helpline on 0800 046 8687**

If I have **multiple confirmed cases**, in other words an ‘outbreak’, I should report to **Public Health England SW HPT on 0300 303 8162** for support, risk assessment and follow up



See the Amended Educational Setting Flowchart, PHE SW, version 5, 23/9/20

Childminders should also email the dedicated education inbox about all suspected and confirmed cases education.covid19reporting@bristol.gov.uk



Covid-19 symptoms aside, if there were any infectious disease in my own family, I would not work and would let you know as soon as possible. As a general practice I follow hygienic practices to minimise the risk of cross infection – hygienic practices in relation to hand washing, food preparation, nappy changing and toileting, and maintaining a clean environment for the children.



At the present time, during the Covid-19 pandemic I have detailed handwashing routine, enhanced cleaning regime and infection control strategies within my Covid

19 Risk Assessment.

Medicines policy

I am able to administer prescribed medication in certain circumstances (prescribed by a doctor, pharmacist, nurse or dentist). In order to prevent any possibility of error or miscommunication, the medicines which I store must be clearly labelled, with the child’s name, date of birth, in the original container, showing information on dosage and frequency of administration. I will store medicines out of the reach of children

If I administer medicine, I need to follow this procedure:

- I need to have written parental consent **prior** to administering any medication, detailing the name of the medicine, the dosage and the interval, and including...
- details of any medicine which was given to a child before they arrived for the childminding session - **this must also have the signature of the parent.**
- As the childminder I will sign after administering medicine, with the name of the medicine, date, time and dosage clearly recorded.
- Finally, I need to ask you to sign to indicate that you know what I have administered during the childminding session.

I will not administer medicine which a child has not previously taken, in case of adverse reaction to the medicine. I will not administer medicines which contain Aspirin to a child under 16 years of age, unless prescribed by a doctor.

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