

SICKNESS AND ILLNESS POLICY

This policy has been devised to ensure that children who become unwell whilst at the nursery are treated with sensitivity and respect. It is also to help us to protect other children from illness and the spread of infection.

Children should not be left at nursery if they are unwell. If a child is unwell then they will prefer to be at home with their parent(s) rather than at nursery with their peers.

PROCEDURE

We will follow these procedures to ensure the welfare of all children within the nursery:

- If a child becomes ill during the nursery day, the parent(s) will be contacted and asked to pick their child up as soon as possible. During this time the child will be cared for in a quiet, calm area with their key person or another familiar member of staff within the child's room.
- Should a child have an infectious disease, such as an ear infection or sickness and diarrhoea, they should not return to nursery until they have been clear for at least 48 hours.
- 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. With a case of conjunctivitis, we ask that a child does not return unless they have a prescription of eye drops.
- If a contagious infection is identified in the nursery, 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.
- It is important that children are not subjected to the rigours of the nursery day, which requires socialising with other children and being part of a group setting, when they have first become ill and require a course of antibiotics. Our policy, therefore, is to exclude children on antibiotics for the first 48 hours of the course.
- The nursery 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.
- Information/posters about head lice are readily available and all parents are requested to regularly check their children's hair. If a parent finds that their child has head lice, we would be grateful if they could inform the nursery so that other parents can be alerted to check their child's hair.

MENINGITIS PROCEDURE

If a parent informs the nursery that their child has meningitis, the Nursery Manager should contact the Infection Control (IC) Nurse for their area, and Ofsted.

The IC Nurse will give guidance and support in each individual case.

If parents do not inform the nursery, we will be contacted directly by the IC Nurse and the appropriate support will be given.

IF AN UNWELL OR INFECTIOUS CHILD COMES INTO THE NURSERY:

The Manager or Deputy Manager reserves the right not to accept any child who is unwell into the nursery.

It is unfair on the child to be here when they need to be with their parent/carers or having one to one attention.

It is also unfair to the rest of the children who are here if they are knowingly in contact with an illness or infection.

CORONAVIRUS-19

If a child has a confirmed case of coronavirus, they are unable to attend the nursery setting for 3 days. Due to the signs and symptoms of coronavirus being signs and symptoms of other illnesses it can be very difficult to identify without an LFD/ PCR test. As a result of this we will continue to follow the rest of this policy based on the symptoms the child is displaying.

DIARRHOEA AND VOMITING

All children must be kept away from nursery for a minimum of 48 hours after the last episode of diarrhoea or vomiting.

If a child is sent home from the nursery the 48 hours exclusion still applies. Therefore, if your child is due in the following day, they will not be able to attend.

Children should only return to nursery when they are well enough and have regained their appetite.

FEVER

All children must be kept away from nursery until they are 48 hours clear of a fever.

If a child is sent home from the nursery the 48 hours exclusion still applies. Therefore, if your child is due in the following day, they will not be able to attend. The nursery will not administer any medicine that has not been prescribed by their doctor, pharmacist or dentist, unless it is a temperature control medicine, i.e. Calpol, Nurofen, paracetamol (provided and given permission by parents).

If a child develops a temperature while in our care, we will, with parental consent administer calpol. If the child's temperature does not go down, or does go down but re appears after 4hours in which the medication has worn off, the child will need to be sent home and the 48hours exclusion period will apply.

Nursery staff have the right to refuse to administer any medication with which they feel uncomfortable. Please can all parents respect our staff team's decisions as our policies are in place to prevent infection from spreading around the nursery.

IF A CHILD BECOMES UNWELL WHILST AT THE NURSERY

If a child begins to show signs or symptoms that could pertain to illness they should firstly be comforted by staff, preferably the key person. This should be in the form of reassurance, both verbal and physical as appropriate, e.g. cuddles.

If possible, the child's key person should spend one to one time with the child or a member of staff from the child's room, attempting to find out what is wrong and if necessary, administering first aid.

No prescribed medication may be given unless prior permission was obtained from the parent/carer that day and the stated dose is due to be given at that time.

The Manager or Deputy Manager should be informed of any child who appears to be feeling unwell.

If, after staff have done everything they can to make the child more comfortable, there is no sign of improvement, then the Manager or Deputy Manager, in conjunction with the child's key person or Room Leader, will discuss whether or not to contact the parent/carers to come and collect their child.

Management must be informed when a member of staff wants to call a parent regarding a sick child.

If it is deemed to be in the best interests of the child to go home, the Manager, Deputy Manager, Room Leader or key person will ring the parent/carers, getting the number from the child's information which is held in the contacts file in the main office.

They will explain the signs and symptoms the child is displaying and ask them to come and collect him/her.

If the Manager, Deputy Manager, Room Leader or key person is unable to contact the parent/carer they will then go on to the next person on the contact list, usually the second parent/carer, continuing down the list of authorised persons as necessary.

Whilst their parent/carers are being contacted the child should continue to be comforted by members of staff. Plenty of fluids should be offered to the child and if their temperature is higher or lower than usual this should be addressed immediately.

Any other symptoms should be treated as necessary.

The child should always be treated with the utmost sensitivity and respect as feeling poorly can be distressing and quite frightening for a child. They should have a staff member with them, preferably their key person, until their parent/carer or authorised person arrives to collect them.

The child should have privacy as much as possible and be able to be in a quiet area away from other children, with the staff member. Usually, a quiet area can be made in the child's playroom.

Should a child's symptoms deteriorate whilst waiting for their parent/carers the Manager or Deputy Manager should be informed immediately.

If the Manager or Deputy Manager feels that it's necessary, they should call for an ambulance. The Manager or Deputy Manager must then inform the parent/carers to meet them at the local hospital.

First aid should be administered to the child as necessary.

TRANSPORTING CHILDREN TO HOSPITAL PROCEDURE

- 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 senior member of staff, along with another member of staff must accompany the child and collect together registration forms, relevant medication sheets, medication and the child's comforter. A member of the management team 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. If you are confident and assertive the child will feel reassured.

CALLING AN AMBULANCE

Dial 999 and ask for an ambulance.

Answer all questions honestly and clearly.

When asked to give the address and telephone number, use the following details:

Rainbow Corner Nursery School
42 Victoria Road North
Southsea
Portsmouth
PO5 1PX
02392 824538

The Manager or Deputy Manager and key person if possible, will go with the child to the hospital, taking the child's registration form which includes all their medical details and the consent for medical attention, and any of the child's special comforters.

Reports should be written up by the Manager/Deputy Manager, and key person and any witnesses to be kept on file. Members of staff will be offered time out and an opportunity to discuss what happened and how they are feeling.

FEBRILE CONVULSIONS, ANAPHYLACTIC SHOCK AND ANY OTHER FIT OR SEIZURE

If a child has any of the above an ambulance must be called immediately and the same steps taken as above.

Anaphylaxis typically presents with many different symptoms over minutes or hours with an average onset of 5 to 30 minutes if exposure is intravenous and 2 hours for foods.

The most common areas affected include skin (80–90%), respiratory (70%), gastrointestinal (30–45%), heart and vasculature (10–45%), and central nervous system (10–15%) with usually two or more being involved.

Anaphylaxis is a medical emergency that may require resuscitation measures such as airway management, supplemental oxygen, large volumes of intravenous fluids, and close monitoring.

Administration of epinephrine (Epi-pen) may be required and only staff with Epi-pen training should be called upon to administer such treatment.

This policy was reviewed on: 12th June 2023

By: Emma Fowles (Operations Manager)