

Children's Sickness Policy and Procedures

Aims

To provide a healthy and safe environment for all children.

Policy

We cannot accept any child who is unwell or who has had a serious infectious illness.

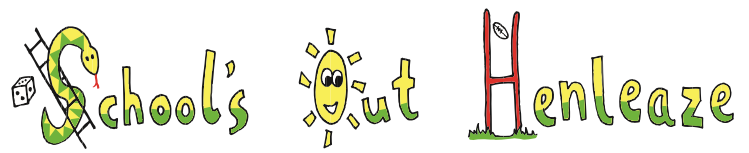
Procedure

Control of Illness

We will manage cases of infectious diseases in line with the UK Health Security Agency (UKHSA) guidance: <https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities>

Exclusion Periods

- If a child has been unwell with an infectious disease, we will follow the exclusion time periods set out in the UKHSA's Exclusion Table: <https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/children-and-young-people-settings-tools-and-resources>
- Vomiting and diarrhoea: Children with vomiting or diarrhoea should stay away from the setting for 2 days (48 hours) after their symptoms have gone.
- If a child has a temperature of 38 degrees or above, they must be kept away from the setting until the temperature returns to normal.
- Depending on the exclusion period, children who have been prescribed antibiotics to treat an infection or illness should remain at home for at least 24 hours to ensure there are no adverse side effects. Prior written permission for the administration of each and every medication must be completed by the parent/carer in line with our Administration of Medication Policy. Children can return to the setting after 24 hours if they feel well enough to attend and any exclusion period has passed.
- There may be occasions when a child is not so ill as to require medical care but nevertheless childcare would be unsuitable. If a child arrives at the setting and the Senior Practitioner on duty does not consider them well enough to attend, the parent/carers will be advised accordingly. We will make every effort to stop the spread of infection within the setting but can only do this with the co-operation of parent/carers.



Procedure if a Child Becomes Unwell

- If a child becomes unwell whilst at the setting, we will contact the child's parent/carer and give them precise details of the child's condition and will discuss with them the best course of action, e.g., to collect the child. We will contact the child's emergency contacts should a child become unwell and we are unable to reach the parent/carer.
- We will make the child comfortable in a quiet place and keep them under observation, noting any changes in condition. We will never leave very sick children unattended at any time. If there is a danger of vomiting, we will give a bowl or bucket.
- If there is a risk of splashing or contamination with blood or bodily fluids, disposable gloves, disposable masks and plastic aprons will be worn. Disposable eye protection (or if reusable it will be decontaminated prior to next use) will be worn if there is a risk of splashing to the face.
- The parent/carer will be asked to keep their child at home until they have fully recovered. If a parent/carer says that their child has been unwell but now seems to have recovered, we will ask for exact details and remind of the exclusion periods.
- 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.

Ongoing Medical Needs

For chronic illnesses e.g. Asthma or children with medical needs, we will administer, as necessary, any medication we have prior consent to administer. A record will be made of the time and parents will be asked to acknowledge this with their signature. This will be in accordance with the setting's Medication Policy and the child's individual Healthcare Plan.

Serious Illness

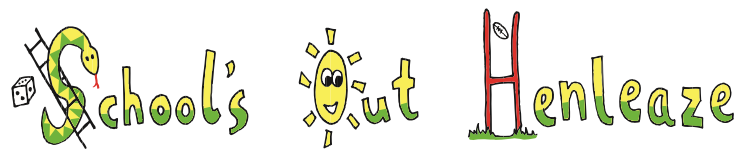
If a child should suddenly become seriously ill during the duration of the group, we will immediately seek medical attention. The setting will follow its Serious Accident and Emergency Procedure in the First Aid Policy.

Reporting Serious Illnesses/Diseases

RIDDOR

RIDDOR means the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations and there are certain things that have to be reported to RIDDOR.

Reportable diseases include certain poisonings, some skin diseases, lung diseases and infections such as hepatitis, tuberculosis, anthrax, legionellosis and tetanus.



We will keep a record of what we report, which will include the date and method of reporting, the date, time and place of event, the personal details of those involved and a brief description of the nature of the event or disease.

To report to RIDDOR, we will use the appropriate on-line form on the website, which can be found at: <http://www.hse.gov.uk/riddor/report.htm>

To report fatal/specified, and major incidents only T: 0345 300 9923

Maintained setting's need to report anything relevant for staff, volunteers and children to RIDDOR.

Current List of Notifiable Diseases: <https://www.gov.uk/guidance/notifiable-diseases-and-causative-organisms-how-to-report#list-of-notifiable-diseases>

Ofsted

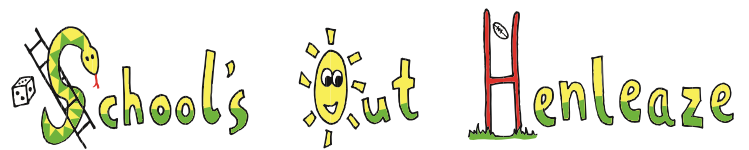
We will notify Ofsted of any serious illnesses. We will do this within 14 days and understand that Ofsted may take action against us if we don't. We will use the following form to notify them.

<https://www.gov.uk/guidance/report-a-serious-childcare-incident>

Action in the Event of an Outbreak or Incident

We will follow the advice from UKHSA and will seek specialist advice from UKHSA South West if we are concerned and have seen:

- A higher than previously experienced and/or rapidly increasing number of absences due to the same infection.
- Evidence of severe disease due to an infection, for example if an individual is admitted to hospital.
- More than one infection circulating in the same group of children and staff, for example chicken pox and scarlet fever.
- An outbreak or serious or unusual illness, for example:
 - E. coli 0157 or E coli STEC infection
 - Food poisoning
 - Hepatitis
 - Measles, mumps, rubella (rubella is also called German measles)
 - Meningococcal meningitis or septicaemia
 - Scarlet fever (if an outbreak or co-circulating chicken pox)
 - Tuberculosis (TB)
 - Typhoid
 - Whooping cough (also called pertussis)



We will have the following information available when contacting UKHSA South West, to help them assess the size and nature of the outbreak or incident and advise on any recommended actions:

- Type of setting.
- Total numbers affected (children and staff).
- Total numbers attending (children and staff).
- Any food handlers affected.
- Number of classes, rooms, year groups affected.
- Symptoms experienced.
- Date when symptoms started, including a brief overview of the sequence of numbers of new cases since the outbreak started.
- Any indications of severe disease, such as overnight admissions to hospital.
- Information on any events or trips in the week prior to the start of the outbreak.
- If known, whether any tests or clinical assessments have taken place.
- Vaccination uptake (for example for MMR and other infections).
- If there are any individuals within the affected group at higher risk from severe disease.

Contact Details

UK Health Security Agency South West

UKHSA South West
2 Rivergate
Temple Quay
Bristol
BS1 6EH

Email: swhpt@ukhsa.gov.uk

Telephone: 0300 303 8162 (option 1, then option 1)