

LITTLE WILLOWS PRE-SCHOOL

SICKNESS & ILLNESS POLICY

This policy has been devised to ensure that children who become unwell whilst at the pre-school 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 pre-school if they are unwell. If a child is unwell, then they will prefer to be at home with their parent(s)/carers.

PROCEDURE

We will follow these procedures to ensure the welfare of all children within the pre-school:

- If a child becomes ill during the session, the parent/carer will be contacted and asked to pick up their child as soon as possible. During this time the child will be cared for in a quiet, calm areas with their key person or another familiar member of staff.
- Should have a child have an infectious disease, such as sickness and diarrhoea they should not return to the pre-school 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, chicken pox to protect other children in the setting. 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 pre-school, parents will be informed to enable them to spot the early signs of this illness.
- The pre-school has the right to refuse admission to a child who is unwell. This decision will be taken by the manager or most senior person on duty, and is non negotiable.
- Information about head lice is 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 pre-school so that other parents can be alerted to check their child's hair.

MENINGITIS PROCEDURE

If a parent informs the pre-school that their child has meningitis, the pre-school 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 pre-school, we will be contacted directly by the IC Nurse and the appropriate support will be given.

IF AN UNWELL OR INFECTIOUS CHILD COMES INTO PRE-SCHOOL:

The Manager or most Senior member of staff on duty reserves the right not to accept any child who is unwell into the pre-school. It is unfair on the child to be here when they need to be with their parent/carers. It is also unfair to the rest of the children who are here if they are knowingly in contact with an illness or infection.

DIARRHOEA AND VOMITING

All children must be kept away from the pre-school for a minimum of 48 hours after the last episode of diarrhoea or vomiting. If a child is sent home from the pre-school, 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 pre-school when they are well enough and have regained their appetite.

FEVER

All children must be kept away from pre-school for a minimum of 24 hours or until their fever has returned to normal.

If a child is sent home from the pre-school the 24 hours exclusion still applies. Therefore if your child is due in the following day, they will be unable to attend. The pre-school will not administer any medicine that has not been prescribed by their doctor, pharmacist or dentist e.g. calpol, nurofen etc.

Pre-school 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 pre-school.

IF A CHILD BECOMES UNWELL WHILST AT THE PRE-SCHOOL

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.

As soon as a child shows signs of feeling unwell, the child's key person or room leader should spend one to one time with the child attempting to find out what is wrong and if necessary administering first aid.

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

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

If the manager 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.

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

If the manager feels that its necessary, they should call for an ambulance. The 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 must accompany the child and collect together registration forms, relevant medication sheets, medication and the child's comforter.
- Remain calm at all times. Children who witness an incident may well be affected by it and may need lots of 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:

Little Willows Pre-School
Whitnash Primary School
Langley Road
Whitnash
Near Leamington Spa
Warwickshire
CV31 2EX
Tel. 01926 425225

The Manager or senior member of staff 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/senior member of staff, 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 present 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 systems (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 an EpiPen may be required and only staff with EpiPen training should be called upon to administer such treatment.

HEAD LICE

When a case of head lice is discovered at the pre-school, the situation will be handled carefully and safely. The child concerned will not be isolated from other children and there is no need for them to be excluded from activities or sessions at the pre-school. When the child concerned is collected, their parent/carer will be informed in a sensitive manner. Other parents/carers will be informed as quickly as possible in writing.

ADMINISTERING MEDICATION

If a child requires medicine we will obtain information about the child's needs and will ensure this information is kept up-to-date. Only prescribed medication will be administered during the school day. All medication must be marked with a pharmacy's label detailing the name of the child and the dosage.

The pre-school will not administer over the counter medication to mask an illness. If the Manager or room leader feels a child is unwell then they will contact the parent/carer and ask for the child to be collected from the pre-school.

¹CORONAVIRUS (COVID-19)

Anyone who displays coronavirus symptoms – a high temperature above 37.8c, a dry cough, loss of taste and/or smell will be sent home immediately and the household should follow the government guidelines on what to do if someone in the household develops symptoms. If a child is waiting to be collected by a parent, they should be isolated from the group with one member of staff. The member of staff should wear a face mask/[visor](#), apron and gloves. When the child or staff member has left, the PPE must be disposed of safely – [double bagged and place in a designated PPE bin. The area the child occupied must be cleaned and disinfected thoroughly, before being used again.](#)

- All staff and children attending a setting will have access to a test and should take the test. Negative tests for staff and children will mean they can return to the setting when they are well and fellow household members can end their isolation.
- [Any individual with a positive test will need to self-isolate for 10 days from the onset of their symptoms.](#) The rest of their immediate group within the setting will be sent home and advised to self-isolate for 14 days. [The household members of the close contacts will not need to self-isolate,](#) unless the child that they live with subsequently develops symptoms.
- Close contacts of the confirmed case, who then go on to develop symptoms should book a test. If they test negative, they still need to continue to isolate as they have been in close contact with a confirmed case, but their household can stop isolating if they are well (e.g. no temperature for 48 hours)

¹ Added 27.05.2020
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- If they test positive, they should isolate for a further 10 days from the onset of symptoms and not return to pre-school until well (not had a temperature for 48 hours) and household contacts should isolate for 14 days from onset of symptoms.

Public Health England (PHE) will conduct a rapid investigation should other cases be detected within the setting and will advise appropriate action. Two people with symptoms or 2 confirmed cases (should this be teaching staff or children) whether they are from the same or separate bubbles, will be classed as an outbreak by PHE. The Charity's Commission must also be notified of any outbreaks. [Ofsted must be notified of any positive tests, an outbreak \(2 confirmed cases or significant absence from staff/cohort or if the setting has been asked to close by PHE\).](#)