**Child Sickness and Illness Policy and Procedures**

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**Introduction**

At The Little Bumblebee Nursery, the health and well-being of every child entrusted to our care are paramount. This policy serves as a comprehensive guide for parents, staff, and caregivers on managing child sickness and illness within our setting. By adhering to these guidelines, we aim to create a healthy and safe environment that fosters the well-being of all children attending our nursery.

* Purpose

The purpose of this policy is to establish a framework for managing illnesses to prevent the spread of contagious diseases within the nursery. It outlines procedures for communication, exclusion, and reintegration, ensuring a balance between caring for the sick child and safeguarding the health of others.

* Scope

This policy applies to all children enrolled in The Little Bumblebee Nursery and provides guidance for parents, staff, and caregivers on recognizing symptoms, reporting illnesses, and determining when it is appropriate for a child to return after being ill.

* Relevant legislation and guidance
* NHS - Is my child too ill for school? Link: <https://www.nhs.uk/live-well/is-my-child-too-ill-for-school/>
* GOV - Health protection in children and young people settings, including education. Link: <https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/chapter-9-managing-specific-infectious-diseases>
* Guidance - Children and young people settings: tools and resources. Link: <https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/children-and-young-people-settings-tools-and-resources>

**Infection control Expectations and Procedures**

*Early Identification of Symptoms:*

Staff should be vigilant in recognising signs of illness in children, including common symptoms such as:

* Infection
* Fever
* Vomiting & Diarrhoea (Individuals can return 48 hours after diarrhoea and vomiting have stopped.)
* High temperature
* Flu (Until recovered)
* Chickenpox (At least 5 days from onset of rash and until all blisters have crusted over.)
* COVID-19 (Individuals should not attend if they have a high temperature and are unwell. Individuals who have a positive test result for COVID-19 should not attend the setting for 3 days after the day of the test.)
* Ear infection and high temperature or severe earache

Other illnesses are covered in the Guidance - Children and young people settings: tools and resources. Link: <https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/children-and-young-people-settings-tools-and-resources>

*Prompt Communication:*

* Open and timely communication between parents and the nursery is essential. Parents must inform the nursery by **8am** if their child is unwell, and the nursery must communicate effectively regarding any illnesses observed during the child's stay.

*Early Identification of Symptoms:*

* Parents and staff should be vigilant in recognising signs of illness in children, including common symptoms such as infection, fever, cough, vomiting, diarrhoea, or other contagious conditions.

*Right to refuse admission*

* 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. 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.

*Immediate Action for Illness:*

* If a child becomes ill during the nursery day:
* The Nursery manager will contact parents to pick up the child as soon as possible.
* Comfort the child, preferably by their key person, with verbal and physical reassurance.
* Fill in a sickness monitoring form when signs of illness appear.
* Spend one-on-one time with the child to assess the situation and administer first aid if needed.
* A child's temperature is taken and checked regularly, using Fever Scans or other means i.e. ear thermometer.
* Medication Policy:
* No prescribed medication without prior permission and specified dose from the parent/carer.
* The use of paracetamol-based medicine may not be agreed in all cases. A setting cannot take bottles of nonprescription medicine from parents to hold on a 'just in case' basis, unless there is an immediate reason for doing so. Settings do not normally keep such medicine on the premises as they are not allowed to 'prescribe'.
* Nursery staff may refuse medication administration if uncomfortable, respecting staff decisions.
* If a baby's temperature does not go down, and is worryingly high, then Calpol may be given after gaining written or verbal consent from the parent. This is to reduce the risk of febrile convulsions, particularly for babies under 2 years old.

Paracetamol based medicines (e.g. Calpol):

* However, given the risks to very young babies of high temperatures, insurers may allow minor infringement of the regulations as the risk of not administering may be greater. Ofsted is normally in agreement with this.
* In all cases, parents of children under two years must sign to say they agree to the setting administering paracetamol-based medicine in the case of high temperature on the basis that they are on their way to collect.
* Such medicine should never be used to reduce temperature so that a child can stay in the care of the setting for a normal day. The use of emergency medicine does not apply to children over 2 years old. A child over two who is not well, and has a temperature, must be kept cool and the parents asked to collect straight away.
* Whilst the brand name Calpol is referenced, there are other products which are paracetamol or Ibuprofen based pain and fever relief such as Nurofen for children over 3 months.
* Exclusion Policy:
	+ Keep children away for a minimum of 24 hours or until the fever is normal.
	+ Parents will be called to administer Calpol for temperature reduction.
* Communication and Decision-Making:
	+ Inform the manager or deputy manager of any unwell child.
	+ Staff may contact parents if no improvement is observed.
	+ Management involvement if a decision to send a child home is needed.
* Parent Contact Procedure:
	+ Inform management before calling parents about a sick child.
	+ If necessary, contact parents, explaining signs and symptoms, and request immediate pickup.
* Child Comfort and Privacy:
	+ Offer fluids and address abnormal temperature promptly.
	+ Provide privacy in a quiet area with a staff member, preferably the key person.
	+ If symptoms worsen, inform the manager or deputy manager immediately.
* Emergency Situations:
	+ In extreme cases, call an ambulance if symptoms deteriorate.
	+ Inform parents to meet at the local hospital and administer necessary first aid.

*Maintaining Confidentiality:*

* Information about a child's illness is treated with utmost confidentiality. The nursery respects the privacy of families and ensures that health-related information is only shared with those who have a legitimate need to know.

*Promoting Hygiene Practices:*

* Hygiene plays a crucial role in preventing the transmission of illnesses. The nursery emphasizes and promotes good hygiene practices, including regular handwashing, sanitization of surfaces and toys, and proper disposal of tissues.
* Ensure good respiratory hygiene amongst children and staff by promoting 'catch it, bin it, kill it approach.
* Where necessary, for instance, where there is an infection outbreak, wear appropriate PPE.

*Gradual Reintegration:*

* Children will not be allowed to return to nursery until they have been symptom free for at least 24 hours for a fever and 48 hours for sickness or diarrhoea. In some cases, a note from a doctor may be necessary. By signing this contract, you are agreeing to staff seeking any necessary emergency medical advice or treatment during their time at The Little Bumblebee Nursery.
* Following an illness, a child is reintegrated into the nursery environment gradually. This approach considers both the child's recovery and the need to prevent the spread of lingering infections.

*Adherence to Health and Safety Regulations:*

* The child sickness and illness policy align with health and safety regulations, ensuring that the nursery operates within the framework set by relevant authorities to maintain a secure and healthy environment for all children. 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 infection.

*Financial Considerations:*

* No refund will be given for periods where the place is unfulfilled due to illness or holidays on the part of either party. Monthly fees include all sick days and holidays taken as these are paid days. Fees are based on booked days not attendance. Refunds and credits will not be given for days where your child does not attend due to sickness or holiday.
* We do not allow swapping of days unless we have been given two weeks' notice and approved it, we will try to accommodate swapping of days in cases of emergency or under special circumstances.

*Gradual Re-integration*

* Children will not be allowed to return to nursery until they have been symptom free for at least 24 hours for a fever and 48 hours for ear infection, sickness or diarrhoea. In some cases, a note from a doctor may be necessary.
* Infection Control

*Illnesses requiring antibiotics.*

* 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.

*Conjunctivitis*

* With a case of conjunctivitis, we ask that the child does not return to the nursery for 24 hours after starting medication.

*Head Lice*

* Nits and head lice are not an excludable condition; although in exceptional cases parents may be asked to keep the child away from the setting until the infestation has cleared.
* On identifying cases of head lice, all parents are informed and asked to treat their child and all the family, using current recommended treatments methods if they are found.
* 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.

*Diarrhoea and Vomiting*

* All children must be kept away from the 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 the nursery when they are well enough and have regained their appetite.

*Fever*

* All children must be kept away from the nursery for a minimum of 24 hours or until their fever has returned to normal. The nursery will call the parents) to ask to administer Calpol to bring your child's temperature down. 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.

*Meningitis*

* 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.

*Ebola*

* If staff suspect that a child who falls ill whilst in their care is suffering from a serious disease that may have been contracted abroad such as Ebola, immediate medical assessment is required. The setting manager or deputy calls NHS111 and informs parents.

*HIV/AIDS*

* HIV virus, like other viruses such as Hepatitis, (A, B and C), are spread through body fluids. Hygiene precautions for dealing with body fluids are the same for all children and adults.
* Single use vinyl gloves and aprons are worn when changing children's nappies, pants and clothing that are soiled with blood, urine, faeces or vomit.
* Protective rubber gloves are used for cleaning/sluicing clothing after changing.
* Soiled clothing is rinsed and bagged for parents to collect.
* Spills of blood, urine, faeces or vomit are cleared using mild disinfectant solution and mops; cloths used are disposed of with clinical waste.
* Tables and other furniture or toys affected by blood, urine, faces or vomit are cleaned using a
* disinfectant.
* Baby mouthing toys are kept clean and plastic toys cleaned in sterilising solution regularly.

**Emergency Medical Response:**

* In an emergency an ambulance is called, and the parents are informed.
* Acknowledging the necessity for staff to seek emergency medical advice or treatment if required during a child's time at the nursery, with parental consent.

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.
* 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 (EpiPen) may be required and only staff with EpiPen training should be called upon to administer such treatment. The staff who deal with all of the above will be asked how they are feeling and be offered time out if they should need it. Parents will be supported by staff giving verbal updates and texts when possible.

Transporting Children to Hospital

* 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 registration forms, relevant medication sheets, medication, and the child's comforter. A member of the management team must also be informed immediately.
* Always remain calm. 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:

**The Little Bumblebee Nursery**

**Office 3, 2a Curzon Road**

**W5 1NF**

**Explain to the operator they need to pull up on Curzon Road and take the first driveway on the right.**

* 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.
* Reporting to Ofsted

Early years providers have a duty to inform Ofsted of any serious accidents, illnesses or injuries as follows:

* + Anything that requires resuscitation.
	+ Admittance to hospital for more than 24 hours
	+ A broken bone or fracture
	+ Dislocation of any major joint, such as the shoulder, knee, hip or elbow any loss of consciousness severe breathing difficulties, including asphyxia.
* Anything leading to hypothermia or heat-induced illness.

In some circumstances this may include a confirmed case of a Notifiable Disease in their setting, if it meets the criteria defined by Ofsted above. Please note that it is not the responsibility of the setting to diagnose a notifiable disease. This can only be done by a clinician (GP or Doctor). If a child is displaying symptoms that indicate they may be suffering from a notifiable disease, parents must be advised to seek a medical diagnosis, which will then be 'notified' to the relevant body. Once a diagnosis is confirmed, the setting may be contacted by the UKHSA, or may wish to contact them for further advice.

Key Contacts:

**Nursery Manager:**

For any inquiries or concerns related to the child sickness and illness policy, individuals may contact the Nursery Manager directly.

Email: info@little-bumblebee.co.uk

Phone: 020 4501 4097

**Policy management and review**

* The Little Bumblebee will review this policy annually. In cases of relevant legal or procedural changes, we will review this policy accordingly. The policy should be made available on the Nursery website, with paper copies provided by the Nursery upon request.
* The policy should be approved, signed and dated and the date for review noted.
* The policy should be provided to and followed by all staff and volunteers.

This policy statement was adopted on 01/01/2023.

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| Reviewed By: Mojdeh Najafpoor | Date: 01/01/2024 |
| Signed:A handwritten oval shape with a black line  Description automatically generated with medium confidence | Next Review Date: 01/01/2025 |