



## **4. Health Procedures**

### **4.5 Poorly Children**

- If a child appears unwell during the day, for example has a raised temperature, sickness, diarrhoea or pains, the parents are contacted and informed. Whether or not the child needs to be collected will depend on the symptoms displayed.
- If a child has a temperature, we will strip the child according to the environment, if the environment is too warm, we may open a window and a lightweight blanket or sheet may be used to cover the child. If a child's temperature continues to be a concern, the parent/carer will be asked to come immediately to collect their child and Calpol will be administered\*. An ambulance will be called if the child's condition deteriorates whilst waiting to be collected.

\*Written consent for administering Calpol needs to be given on the registration form and verbal consent given when parents are informed of the high temperature. The Manager or Assistant Manager will make the decision for Calpol to be administered.

- A child's temperature is taken and checked regularly and recorded.
- In an emergency, an ambulance is called and the parents are informed.
- Parents are advised to seek medical advice before returning their child to the setting; the setting can refuse admittance to children who have a raised temperature, sickness and diarrhoea or a contagious infection or disease.
- Where children have been prescribed antibiotics for an infectious illness or complaint, parents are recommended to keep them at home for 48 hours.
- If a child has two unexplained loose stools whilst at the setting, the parents will be called and asked to arrange collection of the child. Parents are asked to keep children home for 48 hours following the last episode. We reserve the right to extend the 48-hour period if an outbreak occurs. An outbreak is defined as a case/cases which are required to be reported to Public Health England (PHE). Parents/carers will be notified, should this situation arise.

- If a child vomits at the setting, consideration is given to the 'bigger picture' i.e. are they eating? What are they eating? Are they upset? If there is no obvious cause of the vomiting, parents will be requested to collect their child as soon as possible.
- Some activities, such as sand and water play and self-serve snack, will be suspended for the duration of any outbreak.
- For all other infections, exclusion will be for the period recommended on the Guidance on Infection Control in Schools and other Child Care Settings published by the Health Protection Agency available at [www.hpa.org.uk](http://www.hpa.org.uk)
- The setting manager notifies the Chair of Committee if there is an outbreak of an infection and keeps a record of the numbers and duration of each event. The setting manager contacts Public Health England (PHE) and Ofsted in the event of an outbreak.
- A list of notifiable communicable diseases can be found here <https://www.gov.uk/topic/health-protection/infectious-diseases>
- 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 procedure**

HIV virus, like other viruses such as Hepatitis, (A, B and C), are spread through bodily fluids. Hygiene precautions for dealing with bodily 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 absorbent granules and mild disinfectant solution and mops; cloths used are disposed of with clinical waste.
- Tables and other furniture or toys affected by blood, urine, faeces or vomit are cleaned using a disinfectant.

## **Nits and 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 treatment methods if they are found.

## **Further guidance**

Good Practice in Early Years Infection Control (Pre-school Learning Alliance 2009)

Medication Administration Record (Early Years Alliance 2019)

Guidance on infection control in schools and other childcare settings (Public Health Agency)

[https://www.publichealth.hscni.net/sites/default/files/Guidance\\_on\\_infection\\_control\\_in\\_schools\\_poster.pdf](https://www.publichealth.hscni.net/sites/default/files/Guidance_on_infection_control_in_schools_poster.pdf)