Sickness and Illness

Our aim is to provide the best possible care for all our children at Playwise Childcare LTD especially when they are contagious to others. It is the parents’ responsibility to ensure that their child does not attend nursery and put other children/staff at risk. Therefore, if a parent continually sends a sick or unwell child to nursery, we will be forced to review the child’s place.

Could we please ask that parents/carers keep us informed about their child’s health and contact us via telephone or email to inform us if your child is unwell and unable to attend nursery. This allows us to communicate this to staff and parents, as well as Health Protection and Ofsted if it is a disease that requires notification.

This is particularly important in case a child has to come into contact with a pregnant member of staff or parent.

 If a child appears to be unwell as they are brought into nursery, they may be refused admission. We do not provide day care for children who are unwell, have a temperature or have diarrhoea, sickness or have an infectious disease. If your child is not well enough to participate in the daily activities, they should **not attend nursery.**

 An unwell child requires 1:1 care, which we cannot provide at nursery.

 If your child has not been themselves at home but is not showing signs of illness when brought into nursery, please make a member of staff aware of this and let them know the best contact number for you to be reached on throughout the day.

Parents **MUST** inform staff if they have administered medications such as Calpol or other pain relief or antihistamine to the child prior to them coming to nursery. This information is vital if we need to call for medical assistance. Children who are on antibiotics cannot attend Playwise Childcare for the first 48 hours of starting them.

Children on long term medication will be assessed on an individual basis.

 If there is an outbreak of an illness in the nursery, the nursery manager will consult with the Local Health Protection unit for advice. We may decide to exclude children to control the outbreak, even where this is not listed in the Governments Exclusion Table for Schools, Nurseries, and other childcare facilities.

Parents **MUST** inform the nursery if any child attending the nursery is admitted to hospital, and the discharge instructions must be followed prior to the child attending nursery. A child should not return to nursery for A FULL 48 HOURS after an anaesthetic or antibiotics have been given.

 If your child needs to receive medication whilst in nursery care, please see the policy regarding administration of medication. If a child is on antibiotics, then they must be forty-eight hours into the course before returning to the nursery or at the managers/deputy manager discretion.

 You will be contacted by a member of staff using the contact details provided to collect your child immediately if they become unwell whilst they are in our care. The child will be cared for by a member of staff in a quiet area away from other children until parents/carers arrive to collect them. (please ensure your child’s contact details are always updated).

 If a child has a notifiable illness or serious injury the nursery will contact OFSTED and any local child protection agencies.

**Please use the following guidelines before bringing your child back to nursery:**

Coughs, colds and flu: coughs and colds do not normally require the child to be excluded from nursery, but this depends on the severity of the illness and how the child is able to cope with the nursery day. The child should have a normal temperature and feel fit and healthy.

 Conjunctivitis: Creams must have been received from the doctor/ pharmacist and treatment should have commenced. Eyes should not have any discharge from them.

Chicken pox: All spots must have completely scabbed over (usually five days incubation period) A text will be sent to inform parents of any cases of chicken pox within the nursery.

Impetigo: Medical advice must have been sought and sores must not be weeping. (usually a five day incubation period).

Hand, foot, and mouth: All sores must have been treated by a doctor and sores should not be weeping. (usually a five-day incubation period).

Head lice: Parents will be contacted via telephone and asked to collect their child so that treatment can commence as soon as possible. A text will be sent to inform parents of any cases of head lice within the nursery.

 Measles: Rash should have gone and child should be fit and healthy.

 Sickness/diarrhoea: At least 48 hours since last bout.

 Temperature: The normal temperature for a child is 37c. If a child’s temperature reaches 39c or above parents will be contacted for medical advice or collection.

 Unknown rashes: Medical advice should be sought with a doctor’s note informing us that the condition isn’t contagious if a child returns with the rash.

Broken limbs/stitches: According to medical advice and based on the individual child this will be discussed with parents. We will report any cases to OFSTED, if a child was required to stay in hospital overnight.

Covid: If you or your child have tested positive for COVID-19:

* try to stay at home and avoid contact with other people for 3 days after the day the test was taken if you or your child are under 18 years old – children and young people tend to be infectious to other people for less time than adults
* try to stay at home and avoid contact with other people for 5 days after the day you took your test if you are 18 years old or over

**Meningitis procedure**

If a parent informs the nursery that their child has meningitis, the nursery manager will contact the Local Area Infection Control (IC) Nurse. The IC Nurse will give guidance and support in each individual case. If parents do not inform the nursery, we may be contacted directly by the IC Nurse and the appropriate support given. We will follow all guidance given and notify any of the appropriate authorities including Ofsted where necessary.

**We will follow the transporting children to hospital procedure in any cases where children may need hospital treatment.**

The nursery manager/staff member must:

• Inform a member of the management team immediately

* Call 999 for an ambulance immediately if the illness is severe. DO NOT attempt to transport the unwell child in your own vehicle
* Follow the instructions from the 999-call handler!
* Whilst waiting for the ambulance, a member of staff must contact the parent(s) and arrange to meet them at the hospital.
* Redeploy staff if necessary to ensure there is adequate staff deployment to care for the remaining children. This may mean temporarily grouping the children together.
* Arrange for the most appropriate member of staff to accompany the child taking with them any relevant information such as 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 cuddles and reassurance. Staff may also require additional support following the accident.

*\*If a child has an accident that may require hospital treatment but not an ambulance and you choose to transport children within staff vehicles Citation advice is to consider the following in your policy:*

* *Requesting permission from parents*
* *Ratio requirements of the setting being maintained*
* *The age and height of the child, in regards to will they need a car seat? Further guidance can be found at* [*www.childcarseats.org.uk/types-of-seat/*](http://www.childcarseats.org.uk/types-of-seat/)
* *There are some exceptions for needing a child seat depending again on their age. Further guidance can be found at* [*www.childcarseats.org.uk/the-law/cars-taxis-private-hire-vehicles-vans-and-goods-vehicles/#under-three*](http://www.childcarseats.org.uk/the-law/cars-taxis-private-hire-vehicles-vans-and-goods-vehicles/#under-three)
* *With the fitting of the car seat, we also need to ask has the individual had training in carrying in carrying this out.*
* *Is this transport covered under business insurance, so a call to your insurance company will be needed, or do they have business insurance on their vehicle?*
* *Safeguarding of the child needs to be looked at. In certain situations, e.g. a designated member of staff should be appointed to plan and provide oversight of all transporting arrangements and respond to any difficulties that may arise. Wherever possible and practicable it is advisable that transport is undertaken other than in private vehicles, with at least one adult additional to the driver acting as an escort. Staff should ensure that the transport arrangements and the vehicle meet all legal requirements. They should ensure that the vehicle is roadworthy and appropriately insured and that the maximum capacity is not exceeded.*
* *Emergency procedures, e.g., what happens if the child’s health begins to deteriorate during the journey.*