Sickness Policy

1. Staff cannot undertake the care of sick children, those with infectious diseases, diarrhoea, vomiting and high temperatures. It is not acceptable for staff or other children to be exposed to these conditions unnecessarily.
2. Unwell children need to be at home with their parents / carers. Staff and other children are vulnerable and may contract illnesses from infectious children they meet. **The** **Orchard Day Nursery** reserves the right to refuse admittance to any child who appears unwell on arrival at the nursery.
3. If a child falls ill during their time at **The Orchard Day Nursery**, staff cannot administer Calpol without both the advance written consent and the verbal permission of a parent / carer on the day of illness. A parent / carer will be contacted to seek this permission should staff feel a child needs Calpol, and they will be given a summary of the child’s symptoms. If they consent to the administration of Calpol, staff will then administer it immediately and complete the Administering Medication Form.
4. The child’s condition will then be monitored for the next hour. If there is no improvement the parent / carer will be contacted again and asked to collect the child as soon as possible.

1. For conditions such as diarrhoea, vomiting or suspected infectious disease the one-hour monitoring period will not apply. Parents / carers will be contacted and asked to collect their child immediately. The parent/carer will be informed when collecting the child that exclusion from the nursery will be for 48 hours from their last episode of the illness.
2. If the Nursery Manager feels a child needs immediate medical attention they will be taken to the appropriate facility by ambulance or other appropriate transport. Children are not permitted to travel in vehicles owned by staff. Parents / carers will be kept informed at all stages of this process and special permission will be sought prior to any treatment being given where possible. A member of staff will always remain with the child.
3. If a staff member is also a child’s parent or carer, or identified as a child’s ‘Important Person’, and they wish to comfort the child they will then cease to be counted as a staff member and will no longer be counted in ratio. If they wish to travel with the child to hospital an alternative staff member must travel with them too.
4. Prescribed medication will be administered in accordance with our Medication Policy.
5. If necessary, parents / carers of other children may be informed that an unnamed child cared for by **The Orchard Day Nursery** has contracted an infectious disease and informed of the symptoms to look out for. If this occurs any parent / carer who suspects that their child may be displaying any of the listed symptoms is requested to keep their child away from **The Orchard Day Nursery,** even if they have not yet been diagnosed by a GP. This is to control any outbreaks of infectious diseases as swiftly as possible.
6. If a child is showing symptoms of or diagnosed with any of the illnesses below, parents / carers are requested to inform **The Orchard Day Nursery** so that staff can be particularly vigilant about looking for symptoms in other children.
7. The table below shows a list of illnesses and the minimum period that a child with that illness is to be kept away from **The Orchard Day Nursery.** Whilst some of the exclusion periods are more extensive than those which may be recommended by individual doctors or the NHS website, they will be adhered to. Other illnesses will be dealt with on a case-by-case basis, and parents / carers and staff will follow the advice of a GP for infection control. The final decision as to whether a child can attend nursery rests with **The Orchard Day Nursery** management.

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| **Illness** | **Minimum exclusion period** |
| Chicken Pox | 5 days from the onset of the rash. It is necessary to wait until all spots have healed or scabbed, even if this takes longer than 5 days. |
| German Measles (Rubella) | 4 days from the onset of the rash. The child is infectious before the symptoms appear, but most children should be immunised. |
| Hand, Foot & Mouth Disease | 6 days after symptoms begin. There is no need to wait until the last blister is gone if the child is otherwise well. |
| Impetigo | Until lesions are healed or after at least 48 hours of antibiotic treatment. |
| Measles | 4 days from the onset of the rash |
| Ringworm and similar fungal infections known as “tinea” | 2 days after treatment has been initiated. Anti-fungal treatment by GP is necessary.  |
| Scabies | Until a full course of effective treatment (prescribed by GP) has been completed. |
| Scarlet Fever | At least 24 hours after starting treatment with antibiotics. Without antibiotic treatment, 2 weeks. |
| Diarrhoea and/or vomiting (with or without a specified diagnosis) | At least 48 hours after the last instance of diarrhoea or vomiting. |
| Conjunctivitis | Until there is no longer any discharge from either of the eyes.  |
| Mumps | 5 days from the onset of swollen glands. The child is also infectious before symptoms develop. |
| Threadworms | Until effectively treated by GP. Every item that the child touches whilst infectious should be cleaned and fingernails should be kept short. |
| Head Lice | Until treatment has begun. |

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Date to be reviewed: **20/11/2020**