

## Sickness, Illness and Allergies Policy

Grafton Childcare aims to provide a healthy environment in which children can develop and flourish. We take all necessary precautions to reduce cross infection of viruses and bacterial infections and aim to keep children with allergies safe and healthy through identifying allergies and preventing contact with the allergenic substances.\*

\*This Policy also links to our Medication, Hygiene Policy, Food and Hygiene Policy, Health and Safety and Wellbeing Policy, Risk Assessment and Record Keeping Policies\*

This Sickness, Illness and Allergies Policy has been put together after reviewing advice and guidance provided by Ofsted and Public Health England including the "Guidance on Infection Control in Schools and Other Childcare Settings", which was published in September 2014.

### Diarrhoea and Vomiting Illnesses

Infection or Complaint	Minimum Period to be excluded from Grafton Childcare.	Additional Comments
Diarrhoea and/or Vomiting including E. coli & Cryptosporidiosis	48 hours from last episode of diarrhoea or vomiting. Further exclusion may be required for some children until they are no longer excreting and stools and resumed to normal for that child.	During an outbreak at Grafton Childcare (of 3 or more cases) we will also exclude children who display a high temperature and stomach pains or similar, to minimise the spread of the infection for a minimum of 48 hours. During outbreaks of 3 or more cases all parents will be informed via our blog. Longer exclusions may be required for children who have difficulty in adhering to good hygiene practices. These children may be excluded until normal stools have resumed.

### Rashes, Skin Infections, Respiratory Infections & Other Infections

Infection or Complaint	Minimum Period to be excluded from Grafton Childcare.	Additional Comments
Athlete's foot	None	Athlete's foot is not a serious condition, although medical treatment is recommended .
Chickenpox** ***	Until all spots have crusted over	If your child becomes unwell they must not return until one to two weeks after their last croup of Chicken Pox spots have all crusted over.
Cold sores, (Herpes simplex)	None	Avoid kissing and contact with the sores. Cold sores are generally mild and self-limiting

<b>Conjunctivitis</b>	24 hours after starting eye drops or other recommended treatment	If an outbreak/cluster occurs, we will consult our local Public Health England centre for advice.
<b>Diphtheria *</b>	Exclusion is essential. Always consult with our local PHE centre.	Family contacts must be excluded until cleared to return by our local Public Health England centre. Preventable by vaccination. Our local PHE centre will organise any contact tracing necessary
<b>Fever/High temperature</b>	Grafton Childcare will dispense Paediatric Paracetamol once in a 24 hour period if supplied by the Parent or guardian. However if the Paediatric Paracetamol fails to bring down the child's temperature you will be asked to collect your child and they will be excluded until well enough to return when Paediatric Paracetamol is no longer needed to control their temperature.	As Parent/guardian you will have previously be asked to provide prior written permission to dispense over-the-counter medications supplied by yourselves, such as pain and fever relief or teething gel etc when there is an accepted health reason to do so. Grafton Childcare is permitted to give over-the-counter medication such as pain and fever relief or teething gel the type which often contain Paracetamol i.e. Paediatric Paracetamol with your prior written consent provided by yourself once in a 24 hour period.
<b>Flu (influenza)</b>	Until recovered	
<b>German measles (rubella)* ***</b>	Four days from onset of rash (as per "Green Book")	Preventable by immunisation (MMR x2 doses).
<b>Glandular fever</b>	None	
<b>Hand, foot and mouth</b>	None	Exclusion may be considered if a large number of children contract HF&M..
<b>Head lice</b>	None	Treatment is recommended only in cases where live lice have been seen
<b>Hepatitis A*</b>	Exclude until seven days after onset of jaundice (or seven days after symptom onset if no jaundice)	In an outbreak of hepatitis A, our local PHE centre will advise on control measures
<b>Hepatitis B*, C*, HIV/AIDS</b>	None	Hepatitis B and C and HIV are bloodborne viruses that are not infectious through casual contact.
<b>Impetigo</b>	Until all lesions are crusted and healed, or 48 hours after starting antibiotic treatment	Antibiotic treatment speeds healing and reduces the infectious period

<b>Measles* ** ***</b>	Four days from onset of rash	Preventable by vaccination (MMR x2).
<b>Meningococcal meningitis*/ septicaemia*</b>	Until recovered	Meningitis C is preventable by vaccination There is no reason to exclude siblings or other close contacts of a case. In case of an outbreak, it may be necessary to provide antibiotics with or without meningococcal vaccination to close contacts. Our local PHE centre will advise on any action if needed
<b>Meningitis* due to other bacteria</b>	Until recovered	Hib and pneumococcal meningitis are preventable by vaccination. There is no reason to exclude siblings or other close contacts of a case. Our local PHE centre will give advice on any action needed
<b>Meningitis viral*</b>	None	Milder illness. There is no reason to exclude siblings and other close contacts of a case.
<b>Molluscum contagiosum</b>	None	A self-limiting condition
<b>MRSA</b>	None	Good hygiene, in particular handwashing and environmental cleaning, are important to minimise any danger of spread.
<b>Mumps*</b>	Exclude child for five days after onset of swelling	Preventable by vaccination (MMR x2 doses)
<b>Ringworm</b>	Exclusion not usually required	But treatment is required
<b>Roseola (infantum)</b>	None	None
<b>Scabies</b>	Child can return after first treatment	Household and close contacts require treatment
<b>Scarlet fever*</b>	Child can return 24 hours after starting appropriate antibiotic treatment	Antibiotic treatment is recommended for the affected child
<b>Slapped cheek/fifth disease. Parvovirus B19 ***</b>	None (once rash has developed)	
<b>Shingles</b>	Exclude only if rash is weeping and cannot be covered	Can cause chickenpox in those who are not immune, ie have not had chickenpox. It is spread by very close contact and touch.
<b>Threadworms</b>	None	Treatment is recommended for the child and household contacts

<b>Tonsillitis</b>	None	There are many causes, but most cases are due to viruses and do not need an antibiotic
<b>Tuberculosis*</b>	Always consult your local PHE centre	Requires prolonged close contact for spread
<b>Warts and verrucae</b>	None	Verrucae should be covered during "Messy Play" activities at Grafton Childcare.
<b>Whooping cough* (pertussis)</b>	Five days from starting antibiotic treatment, or 21 days from onset of illness if no antibiotic treatment	Preventable by vaccination. After treatment, non-infectious coughing may continue for many weeks. Our local PHE centre will organise any contact tracing necessary

\*denotes a notifiable disease. It is a statutory requirement that doctors report a notifiable disease to the proper officer of the local authority (usually a consultant in communicable disease control). In addition, Grafton Childcare may be required to inform our local Public Health England centre (PHE) and the Office for Standards in Education (OFSTED) may wish to be informed.

Outbreaks: if an outbreak of infectious disease is suspected by Grafton Childcare, we will contact:-

Devon, Cornwall and Somerset PHE Centre Richmond Court  
Emperor Way  
Exeter Business Park  
Exeter  
Devon EX1 3QS  
Tel: 0300 303 8162 or 0344 225 3557

### **\*\* Vulnerable Children**

Some medical conditions make children vulnerable to infections that would rarely be serious in most children, these include those being treated for leukaemia or other cancers, on high doses of steroids and with conditions that seriously reduce immunity. Schools and nurseries and childminders will normally have been made aware of such children. These children are particularly vulnerable to chickenpox, measles or parvovirus B19 and, if exposed to either of these, the parent/carer should be informed promptly and further medical advice sought. It may be advisable for these children to have additional immunisations, for example pneumococcal and influenza.

### **\*\*\* Female Staff - Pregnancy**

If a pregnant woman develops a rash or is in direct contact with someone with a potentially infectious rash, this should be investigated according to PHE guidelines by a doctor. The greatest risk to pregnant women from such infections comes from their own child/children, rather than the workplace. Some specific risks are:

**Chickenpox** can affect the pregnancy if a woman has not already had the infection. Report exposure to midwife and GP at any stage of exposure. The GP and antenatal carer will arrange a blood test to check for immunity. Shingles is caused by the same virus as chickenpox, so anyone who has not had chickenpox is potentially vulnerable to the infection if they have close contact with a case of shingles

**German measles (rubella)**. If a pregnant woman comes into contact with german measles she should inform her GP and antenatal carer immediately to ensure investigation. The infection may affect the developing baby if the woman is not immune and is exposed in early pregnancy

**Slapped Cheek Disease (Parvovirus B19)** can occasionally affect an unborn child. If exposed early in pregnancy (before 20 weeks), inform whoever is giving antenatal care as this must be investigated promptly

**Measles** during pregnancy can result in early delivery or even loss of the baby. If a pregnant woman is exposed she should immediately inform whoever is giving antenatal care to ensure investigation

This advice also applies to pregnant students.

### **General Illness**

Any child who has presented with the symptoms of vomiting & diarrhoea or a heavy green nasal discharge will not be readmitted on the premises for at least **48 HOURS** from the last episode and full childcare fees will still be payable for your child's place in their absence.

If your child should become unwell whilst in our care i.e. vomiting and or diarrhoea or with a raised temperature which we have not been able to reduce with the use of paracetamol suspension or similar provided by the parents' then you will be contacted to arrange a speedy collection of your child.

Any child who has presented with the symptoms for flu, ear or throat infections or conjunctivitis will not be readmitted on the premises for at least **24 HOURS**. They must be fever free without the use of any fever reducing medication for a minimum of 24 hours, or in the case of conjunctivitis symptom free or attend with 'prescribed' eye drops and full childcare fees will still be payable for your child's place in their absence.

If you are ever in any doubt about whether or not we can care for your child because you think he/she might be unwell always check the above table **first** for our exclusion policy. Please don't turn up with a potentially infectious child and expect us to make a snap decision on the doorstep.

When your child returns from a bout of sickness we are more than willing to administer 'prescribed' antibiotics. However all medicines and lotions must be clearly marked with the child's full name where appropriate, the prescribed dosage and fitted with a child resistant cap and you have completed the necessary "Administering Prescribed Medicines" page in your child's Daily Diary or Communication Booklet. Grafton Childcare does not supply any medications, they must be all supplied by the parent. Medicines should only be brought to

Grafton Childcare when this is essential. Grafton Childcare may only accept medicines that have been either 'prescribed' by a doctor, dentist, nurse or pharmacist or dispensed via a 'prescription' given via a written instruction from a doctor or dentist.

When we use the word 'prescribe' we mean medicine that is recommended. Recent changes in the law mean that qualified nurse independent prescribers, and pharmacist independent prescribers, can prescribe any licensed medicine for any medical condition they have been trained to specialise in. For nurses, this includes some controlled drugs. So we can give medication that is recommended by a pharmacist or nurse without a written prescription, as well as any medication prescribed by a doctor, dentist or an appropriately qualified pharmacist or nurse. In your child's Daily Diary or Communication Booklet we will provide you with a quantity of medication forms to complete, stating the name of the medication and the doses schedule you wish us to follow should the need ever arise.

This means that we are permitted to give over-the-counter medication such as pain and fever relief or teething gel the type which often contain Paracetamol i.e. Paediatric Paracetamol with your prior written consent. However please note that we may only give children medicines containing Aspirin when 'prescribed' by a doctor. We hope that this clarifies the situation, if you were unsure.

## **Allergies**

Parents are requested to notify us of any know allergies when their child starts at Grafton Childcare via the child's "Parental Consent Forms" with which you will be supplied. In the case where a child is known to have a severe reaction (e.g. anaphylactic shock) a risk assessment will be completed in partnership with the child's parents/carers setting out the actions to be taken in the case of an allergic reaction whilst at Grafton Childcare.

When a child is known to have an allergy control measures will be put into place to ensure there is no cross contamination. Risk Assessments for children with severe allergies will be stored in their Learning Journals. Risks will be clearly displayed in the kitchen for the Staff, Volunteers and Students to see.

Where necessary staff will seek training from the parents/carers on administering emergency medication in the event of a severe allergic reaction (e.g. epi pen). Nut and nut products are not used at Grafton Childcare. All parents are asked not to provide any nuts or nut products in their children's lunch boxes or any celebrations cakes they may send into nursery. Grafton Childcare's insurance provider may be informed of any children attending suffering with chronic illness, severe disability which might require invasive procedures to be carried out and of any child with a severe allergy.

## **Absences from Grafton Childcare**

Parents/carers are asked to telephone Grafton Childcare by 9.00 am to report any absences, illness or sickness in your child, so that it may be recorded, when there are 3 or more cases of illness marked with \*, \*\* or \*\*\* in the table above all parents will be informed via our blog. It is recommend that both parents sign up to receive our weekly blog as this is our main form of information sharing between parents and nursery. Please follow this link to sign up to our blog if you have not yet done so. <https://graftonchildcare.wordpress.com/>