



### **Early Years Illness Policy and Procedure.**

It is our intention in Early Years to protect the health and wellbeing of all the children and the staff of the school by excluding any child or member of staff, who is ill or infectious.

We will not exclude children unnecessarily as we understand the need for working parents. It is at the Head of Early Years discretion whether or not to allow a child stay in school if they are showing signs of illness, even if there is no exclusion period or if this is after any exclusion period has passed or if a doctor has stated that they are not infectious. The Head of Early Years will need to take into account the demeanour of the child and whether they are well enough to participate in school activities.

#### **If a child becomes unwell at school**

We aim to make them as comfortable as possible until their parents or an authorised adult can collect them. We strongly believe that if a child is unwell, there is no place better for them than at home.

#### **Procedure**

- In a kind and caring manner, the condition of the child should be assessed.
- A member of staff should get the thermometer from the first aid box located in the Nursery bathroom and take the temperature of the child.
- The Early Years Lead should be informed of any sick children and will assess the child.
- If the child is unwell, the parents or emergency contacts will be contacted to collect the child.
- The child will be comforted by the Keyworker or lie down on a bed inside the classroom away from other children.
- If a child becomes seriously ill and needs medical attention before parents can collect them, the child will be taken to the Medical Centre accompanied by two members of staff.

**Clínica Vida - La Orotava**

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#### **If a child has sickness or diarrhoea at school**

Children will always be dealt with in a respectful manner and made to feel as comfortable as possible.

#### **Procedure**

- The child should be taken to the nearest bathroom. If possible, all other children should be moved away from the area as quick as possible.
- A member of staff should always remain with the child.
- Another member of staff should clear up the mess.
- Once the child is ok, the child should be washed and cleaned. Refer to the cleaning and washing children procedure.
- The Early Years Lead should be informed.
- The parents or emergency contacts will be contacted to collect the child.
- The child will be comforted by the Keyworker or lie down on a bed inside the classroom away from other children.

- If a child becomes seriously ill and needs medical attention before parents can collect them, the child will be taken to the Medical Centre accompanied by two members of staff.

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#### **If a child has a fever at school**

If a child shows a change in their behaviour or looks unwell.

##### **Procedure.**

- Take the temperature of the child using the thermometer located in the first aid box in the Nursery bathroom.
- If a child has a temperature, then it is important to keep them as comfortable as possible. The Early Years Lead should be informed.
- The parents or emergency contacts will be contacted to collect the child.
- The child will be comforted by the Keyworker or lie down on a bed inside the classroom away from other children.
- Encourage the child to drink water to prevent dehydration.
- Monitor the child regularly.
- Check the temperature every 10 Minutes until parents arrive as we are unable to administer medication.
- If the temperature raises quickly then the child should be taken to the medical centre accompanied by two members of staff.

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#### **If a child has an asthma attack.**

Staff should deal with the situation in a calm manner.

##### **Procedure.**

- If a child seems to be having difficulty breathing, a staff member must always remain with the child and someone should call the Early Years Lead or the Early Years first aider.
- An ambulance must be called if the child appears to be under stress and having trouble breathing.
- If the child has an inhaler on the premises this should be administered as per medical form previously signed by parents. (Please read Medicine Policy)
- The parents or emergency contacts will be contacted.
- If a child requires an ambulance, a member of staff must accompany the child in the ambulance.
- If the child needs to go to the medical centre, they must be accompanied by two members of staff.

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**It is the parent's responsibility to**

- Adhere to the exclusion requirements for each illness.
- Inform the school if a child has been unwell.
- Inform the school if the child has an illness.
- If a child is prescribed antibiotics, they cannot come to school for 24hrs after the first dose has been given.
- If the child is sent home with a fever the child should remain at home for 24hrs until after the last symptoms.

**Disease/illness Minimal exclusion Period**

**Diarrhoea**: defined by more watery stools - decreased form of stool that is not associated with changes in diet, and increased frequency of passing stool that is not contained in a nappy or use of toilet. Children may return after 24 hrs once the reason for change in bowel has been resolved and if the change is not due to Salmonella, Shigelloses or E. coli infections.

**Vomiting**: Exclude if child has vomited two or more times in the previous 24 hours unless the vomiting is determined to be due to a non-infectious condition and the child is not in danger of dehydration. Children may return after 24 hours of the last time they vomited.

**Abdominal pain** (persistent): that pain continues for more than 2 hours or intermittent pain associated with fever or other signs or symptoms.

**Conjunctivitis** (Pink Eye): A child should be excluded only for bacterial conjunctivitis (red eyes, green or yellow discharge). They may return after 24 hours after the treatment has started Other forms do not need to be excluded (allergy or viral cause).

**Hepatitis A**: Exclude until 1 week after onset of viral illness or until after immune serum globulin has been given to children and staff in the program, as directed by the local health department.

**Impetigo**: Exclude until 24 hours after treatment has begun.

**Measles**: Exclude until 5th day after rash disappears or local health department states patient is non-infectious.

**Mouth sores**: Exclude if mouth sores are coupled with drooling or child is not able to participate.

**Mumps**: Exclude until 5 days after onset of parotid gland swelling.

**Pediculosis** (Head Lice): Please see the Schools headlice policy

**Pertussis**: (Whooping Cough) Children should be excluded until five days of appropriate antibiotic has been completed or until local health department states patient is non-infectious.

**Rash**: with fever and/or behaviour change.

**Scabies**: Children should be excluded until after treatment is begun.

**Streptococcal pharyngitis** (Strep Throat), excluded until 24 hours after treatment has been begun and child is able to participate.

**Tuberculosis**: Tuberculosis (TB) Exclude until the child's physician or local health department authority states the child is non-infectious.

**Varicella-zoster** (Chicken pox): Exclude until all the lesions have dried and formed scabs, usually within six days of onset of rash.

**Hand, foot and mouth disease** is a non-itchy rash that develops on the palms of your hands and soles of your feet. It can also cause ulcers in your mouth and make you feel generally unwell, although some people have no symptoms. The incubation period is 3-6 days, usually with full resolution of skin and mouth lesions within **7-10 days**.

**Threadworms** is Irritation around rectum at night which may wake child. It is contagious and can be spread by scratching bottom which then transfers eggs to mouth and objects touched. No need for exclusion but prompt treatment is necessary for the whole family and the school should be informed.

**Ring worm** can be found anywhere on the body and is round red areas with raised border. It is contagious, spread by scratching and material under fingernails whilst skin infection present. It is necessary to exclude until the treatment provided has been given.

**Slap cheek Syndrome** is also called fifth disease or parvovirus B19) is a viral infection that's most common in children, although it can affect people of any age. It usually causes a bright red rash on the cheeks. Children should be excluded from school until fully recovered as this is harmful to expectant mothers.

**Scarlet Fever** also known as scarlatina, is an infection that can develop in people who have strep throat. It's characterized by a bright red rash on the body, usually accompanied by a high fever and sore throat. The same bacteria that cause strep throat also cause scarlet fever. Children should remain at home until fully recovered.

**Tonsillitis** can feel like a bad cold or flu. The tonsils at the back of the throat will be red and swollen. A child cannot be accepted into school until fully recovered and a course of treatment has been completed.

**Meningitis-** The school cannot expect children unless they have been cleared by a doctor.

**Croup** is a common childhood condition that mainly affects babies' and young children's airways. Croup symptoms usually come on after a few days and are often worse at night. Your child will usually have cold-like symptoms to begin with, such as a temperature, runny nose and cough

These are the symptoms of croup are a barking cough that sounds like a seal, a hoarse voice, difficulty breathing, a rasping sound when breathing in

If your child has croup, it's best to keep them home from school for at least three days.

**Updated January 2024**

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