



SICK CHILD POLICY

Sick Child Policy

Bush-e-Babes recognises it has a responsibility to promote a culture where health issues are discussed in an open and positive way to achieve high standards. The health and well being of all the children at Bush-e-Babes is of paramount importance in our setting.

We provide care for healthy children through preventing cross infection of viruses and bacterial infections and promote health through identifying allergies and preventing such contact to the best of our ability.

Procedures for children who are sick or infections

To ensure sick children are identified.

To ensure sick children are cared for appropriately.

To protect children and adults from preventable infection.

To enable staff and parents to be clear about the requirements and procedures when children are unwell.

Guidelines

If a child is thought to be unwell within the setting it is important to assess the condition of the child. This will be done in a kind and caring manner. The child may be distressed, so it is important to be calm and reassuring. The Setting Manager needs to be informed of any sick children.

We understand the needs of working parents and do not aim to exclude children from the nursery unnecessarily. However, the decision of the Setting Manager is final when requesting the exclusion of a child for illness or infection. Decisions will take into account the needs of the child as well as the needs of others within the setting. It is imperative that you collect your child from our setting immediately upon receiving a phone call.

Once diagnosed children with infectious or contagious diseases will be excluded for certain periods. If staff suspects that a child has an infectious or contagious disease, they will request that parents consult a doctor before returning the child to the Bush-e-Babes.

Should a child become unwell whilst at nursery, the Setting Manager or Key Worker will contact the parent or an emergency contact. While awaiting the arrival of parents, the staff will ensure the comfort of the child, taking appropriate action, which would include seeking medical advice if necessary. If the child is in danger, the staff will seek medical advice immediately.

Staff will report any worries about a child's health to the parents/guardians immediately. Parents are responsible for keeping the nursery informed about the child's health. A phone call text or email to keep us informed would be appreciated.

No child may attend the nursery while suffering from one of the communicable diseases and they should be excluded for the minimum periods recommended.

Coughs and colds do not normally require the child to be excluded but this depends on the severity and how the child is able to cope with the nursery day. Children with heavy coughs and colds should not be brought into nursery as they will not benefit from being at Nursery if they are under the weather. A child who is, or who appears to be unwell may be refused admission.

Please be aware that it is not necessary for medication to be prescribed in order for it to be administered in a school or nursery.

This is pertinent as NHS England have recommended that medicines which are available “over the counter” (OTC) i.e. from a pharmacy or supermarket are not routinely prescribed.

All head teachers and nursery managers have been notified that their policies on administering medication should allow OTC medication to be administered

The school or nursery’s policy on administering medicines should highlight the following:

- The medication container should have the child’s name on it.
- The medication is in date.
- A consent form should also be completed that clearly details the dose and time of administration.
- The parent/carer should confirm that medicine has been previously administered without adverse effect.

Note - The use of OTC medicines should normally be limited to 24-48 hours (except for seasonal conditions such as hay fever). If symptoms persist then it may be appropriate for the parents/carer to seek medical advice

Teething

Some babies are born with their first teeth. Others start teething before they are 4 months old, and some after 12 months. But most babies start teething at around 6 months.

The arrival of his/her first molars around the 13- to 19-month-mark can take the discomfort to a whole new level.

Thanks to their larger size and double edges, the 1-year and 2-year molars can be twice as difficult to cut as those baby incisors — and that usually means double the toddler teething pain.

Some babies are born with their first teeth. Others start teething before they are 4 months old, and some after 12 months. But most babies start teething at around 6 months.

Teething symptoms

Baby teeth sometimes emerge with no pain or discomfort at all. At other times, you may notice:

- your baby's gum is sore and red where the tooth is coming through
- one cheek is flushed
- they are rubbing their ear
- your baby is dribbling more than usual
- they are gnawing and chewing on things a lot
- they are more fretful than usual

Teething can sometimes cause other symptoms, such as loose stools (diarrhoea) and fever

Temperature - If your child has had a temperature during the evening/night, they should not be brought in the next day.

If your child is on antibiotics, please make sure you keep them at home for the first 48 hours of taking the medicine. If they are well enough to return, we cannot administer antibiotic during the morning session and parents should ensure doses are given before or after nursery. Children staying a full day should complete a form for administering medicine at lunchtime; however, if your child is unwell, they should not be at nursery.

Although exposure of children to a communicable disease is not in itself sufficient reason to require their exclusion from nursery, any child who comes into contact with COVID 19, diphtheria, poliomyelitis, typhoid and paratyphoid fevers will be excluded. If anyone has been in contact with any communicable diseases we must be informed immediately.

Please Follow current NHS guidelines. If You or your child has been in contact with someone with Covid19. Isolation of 10 days will be required or a negative certificate received.

A child who has sickness or diarrhoea whilst at the nursery is to be collected immediately and kept away for 48 hours following the last bout of sickness or diarrhoea.

Parents will always be contacted and informed if their child has a high temperature of 101F / 38C or above.

Conjunctivitis - To prevent the spread of conjunctivitis, suspected cases will be reported immediately to parents who will be requested to take their child from nursery to be seen by a doctor.

Chicken Pox – Children need to be absent from nursery for a minimum of 5 days from the onset of the rash. After this time, if all the spots have dried and scabbed over, the child can return to nursery. Parents will also be contacted if their child develops a rash or suspected thrush. This will need to be checked by a doctor whose advice should be followed.

If your child has not been his / her normal self at home but is not showing signs of illness when brought to Bush-e-Babes, please mention it to the staff and let them know how best to contact you throughout the day.

Should the Setting Manager or Deputy consider the illness / situation to warrant immediate medical attention, the emergency services will be contacted to take the child directly to Hospital and the parent / guardian notified accordingly.

Nits and head lice are not excludable conditions, although in some cases a parent may be asked to keep the child away until the infestation has cleared. On identifying cases of head lice, all parents are informed and asked to treat their children and all the family if they are found to have head lice.

Bush-e-Babes reserve the right to refuse entry should it be considered best that your child not attend Bush-e-Babes.