04 Health procedures

**04.5 Poorly children**

* If a child appears unwell during the day, for example has a raised temperature, sickness, diarrhoea and/or pains, particularly in the head or stomach then the setting manager calls the parents and asks them to collect the child or send a known carer to collect on their behalf.
* If a child has a raised temperature, they are kept cool by removing top clothing, sponging their heads with cool water and kept away from draughts.
* A child’s temperature is taken and checked regularly, using an in ear thermometer.
* In an emergency an ambulance is called and the parents are informed.
* Parents are advised to seek medical advice before returning them to the setting; the setting can refuse admittance to children who have a raised temperature, sickness and diarrhoea or a contagious infection or disease.
* If a child has been given paracetamol-based medicine such as Calpol, then they must be kept at home for 24 hours after the last dose has been given.
* If a child has had a temperature, then they must be kept at home for 24 hours after this.
* Where children have been prescribed antibiotics for an infectious illness or complaint, parents are asked to keep them at home for at least 24 hours after they begin taking the medication.
* After diarrhoea or vomiting, parents must keep children home for 48 hours following the last episode.
* Diarrhoea is defined as 3 or more liquid or semi-liquid stools in a 24-hour period. ([www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/chapter-9-managing-specific-infectious-diseases#diarrhoea-and-vomiting-gastroenteritis](http://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/chapter-9-managing-specific-infectious-diseases#diarrhoea-and-vomiting-gastroenteritis))
* Some activities such as sand and water play and self-serve snack will be suspended for the duration of any outbreak.
* The setting has information about excludable diseases and exclusion times.
* The setting manager notifies their line manager if there is an outbreak of an infection (affects more than 3-4 children) and keeps a record of the numbers and duration of each event.
* The setting manager has a list of notifiable diseases and contacts Public Health England (PHE) and Ofsted in the event of an outbreak.
* If staff suspect that a child who falls ill whilst in their care is suffering from a serious disease that may have been contracted abroad such as Ebola, immediate medical assessment is required. The setting manager or deputy calls NHS111 and informs parents.

# HIV/AIDS procedure

HIV virus, like other viruses such as Hepatitis, (A, B and C), are spread through body fluids. Hygiene precautions for dealing with body fluids are the same for all children and adults.

* Single use vinyl gloves and aprons are worn when changing children’s nappies, pants and clothing that are soiled with blood, urine, faeces or vomit.
* Protective rubber gloves are used for cleaning/sluicing clothing after changing.
* Soiled clothing is rinsed and bagged for parents to collect.
* Spills of blood, urine, faeces or vomit are cleared using mild disinfectant solution and mops; cloths used are disposed of with clinical waste.
* Tables and other furniture or toys affected by blood, urine, faeces or vomit are cleaned using a disinfectant.
* Baby mouthing toys are kept clean and plastic toys cleaned in sterilising solution regularly.

# Nits and head lice

* Nits and head lice are not an excludable condition; although in exceptional cases parents may be asked to keep the child away from the setting until the infestation has cleared.
* On identifying cases of head lice, all parents are informed and asked to treat their child and all the family, using current recommended treatments methods if they are found.

**Paracetamol based medicines (e.g. Calpol)**

The use of paracetamol-based medicine may not be agreed in all cases. A setting cannot take bottles of non-prescription medicine from parents to hold on a ‘just in case’ basis, unless there is an immediate reason for doing so. Settings do not normally keep such medicine on the premises as they are not allowed to ‘prescribe’.

**Further guidance**

Good Practice in Early Years Infection Control (Pre-school Learning Alliance 2009)

Medication Administration Record (Early Years Alliance 2019)

Guidance on infection control in schools and other childcare settings (Public Health Agency) <https://www.publichealth.hscni.net/sites/default/files/Guidance_on_infection_control_in%20schools_poster.pdf>