



Little Villagers

Illness Exclusion Policy

This Policy has been implemented to ensure that a healthy and safe environment is provided for the children and staff of Little Villagers at all times. Infection in a club setting can spread rapidly, therefore Little Villagers will endeavor to prevent the spread of infection and to promote good health and hygiene practices.

Parent Responsibilities

- Parents/carers of children must ensure that they provide and keep up to date for the out of school staff an emergency contact number in the case of emergency situations that may occur at the out of school site and the child needs to be taken away from the premises as a matter of urgency.
- Parents/carers are responsible for making the out of school staff aware of any medical conditions and allergies that require medication, particular observation or any other attention.
- Parents must ensure that they are able or a contact person can arrive at the out of school site no later than one hour after they have been informed of the child's illness. It is not conducive to the ill child and other children/staff to be exposed to children who may have infectious conditions.
- LVOOSCP staff will be flexible and understanding to the needs of the working parent/carer, however Staff follow the 'Child Sickness Protocol' that states that -
 - For conditions such as diarrhoea, vomiting, suspected infectious disease, then the child will be expected to be collected by the parent/carer/nominated person within the hour.
- The following guidance is used by out of school Staff to assist them to make the decision to contact parents/carer/nominated person. Guidance for timeframes for this has been obtained by discussion with a GP and guidance from the NHS.



Staff Responsibilities

- It is the Club's responsibility to ensure that children, parents and staff who have a contagious illness are excluded from Little Villagers for the recommended exclusion period for that illness.
- It is the Club's responsibility to ensure that sick children are not admitted to Little Villagers.
- Staff cannot undertake the care of sick children, in particular those with infectious diseases, diarrhoea, vomiting and high temperatures. It is not conducive to the health of the Nursery Staff or the other children attending the out of school service to be exposed to these unnecessarily.
- It is the Club's responsibility to inform parents of any outbreak of a contagious infection which may affect the health of their children.
- It is the responsibility of all staff to care for children who become unwell whilst attending Little Villagers and to adhere to the Little Villagers Incident and Accident Policy.

Little Villagers aims to prevent the spread of infection by and to identify signs of illness in children and staff whilst attending Little Villagers. To do this the following steps will be taken -

1. Contact with parents/carers will be made in the first instance following any symptoms of the child being unwell.
 2. Administration of appropriate medication if necessary provided that written permission by the parent/carer is obtained.
 3. Monitor the child over the next hour.
 4. If no improvement in child's condition the parent/carer/nominated person is expected to collect the child within one hour of informing them
- In cases where the parent cannot be contacted staff will contact the emergency contact given on the child's membership form.
 - To limit contact between children who are unwell and other children until they can be collected, taking into consideration the sensitivity of such a situation and ensuring that the child is not made to feel bad as a result.



- To prevent the spread of germs
- To report incidents of certain infections to other parents and staff whilst maintaining the anonymity of children and staff concerned. Infections which would be reported are:
 - head lice
 - measles
 - chickenpox
 - mumps
 - scabies
 - meningitis
 - whooping cough
- To highlight the importance to parents that in the event of an outbreak of an infection at Little Villagers, children who have not been immunised will often be at more risk of infection. This is of particular importance in cases of the following:
 - measles
 - mumps
 - rubella
 - whooping cough
- To exclude children, staff and parents with contagious infections from Little Villagers, until the infection is treated and considered to no longer pose a risk to others. Any exclusion should be handled in a manner so as to cause no further distress or embarrassment to those concerned and to maintain confidentiality.
- To monitor other children and staff for signs of the same infection.
- To monitor all cases of infections in the Little Villagers Incidents & Accidents Book, along with the action taken.
- Staff members who become ill whilst at work or begin to show signs of a contagious infection will be sent home. The Co-ordinator will immediately contact a replacement member of staff to maintain the child to staff ratio. Should this not be possible Emergency Closure procedures may have to be followed.



Dealing With Children Who Become Unwell

Staff are vulnerable and do contract illnesses from children they care for, as do other children attending the out of school service. As a result and in order to comply with Health and Safety Policies, and maintain essential children: staff ratios, the health of the out of school Staff cannot be compromised by caring for children with any suspected illnesses. e.

If a child becomes unwell during the course of a session, staff will ensure that that the child is treated promptly and appropriately and that the risk to other children is minimised. All such incidents will be recorded in accordance with Little Villagers Incidents & Accidents Procedures.

In cases where some form of minor treatment has been administered due to illness or an accident involving a child, Little Villagers Administration of Medicines Procedure will be adhered to.

Medical / Illness Rules

1. LVOOSCP Staff reserves the right to refuse admittance to any child who appears unwell on arrival at Little Villagers or if they show signs of any ailment that could be contagious or could affect the ability of staff to care for the sick child and other children.
2. Similarly, staff who appear for work showing signs of a contagious, or other ailment, that affects their ability to care for the children, will be excluded in accordance with the exclusion procedures below.
3. LVOOSCP cannot be held responsible for any child contracting any of the common diseases, such as a cold, flu, chicken pox etc.
4. LVOOSCP Staff cannot administer pain relief or Prescription Medicines without the written consent of the parent/carer on the day of attendance of the child at Little Villagers. Forms are available for this on request but parents/carers may provide the Staff written permission together with the medicine to be administered, dosage, time to administer and other relevant data on the day of their child's attendance at Little Villagers.
5. If a child becomes unwell after arrival at Little Villagers, the Staff cannot administer pain relief without parents/carers written permission. The parents/carer/person nominated as the emergency number will be contacted and asked to collect the child as soon as possible.
6. If Staff feel that a child is in immediate need of further medical aid



they will be taken immediately to the appropriate facility by ambulance or staff transport. In such circumstances parents/carers will always be informed prior to this. However, special consent from the parents/carers is necessary to allow for the Staff to obtain treatment without delay, which may include surgery recommended by a doctor or dentist for any acute condition of alleviation of pain.

7. Senior Staff observed by one other staff member will administer medicines. The medicine, dosage, time and quantity will be logged into the Medicine Book, signed by both staff members and then shown to the parent/carer when they collect the child at the end of the session. The parent/carer will be asked to countersign the book to confirm that the medicine was administered.
8. Parents /carers of children with identified medical need such as asthma, febrile convulsions etc, will also need to complete a medicine form, but this will be kept on record for reference purposes, as and when there is the need to administer appropriate medication.
9. Any child who has an illness that results in a greater need for care than staff can provide will be excluded until treatment has been received and the child is feeling better.
10. Any staff member who has an illness that affects their ability to properly care for the children will be excluded until treatment has been received and they are feeling better.

Exclusion Criteria & Timescales

In cases where a child, parent or member of staff are known to have contracted a contagious infection or an illness that could affect other children and staff, Little Villagers will implement the following recommended exclusion procedures:

All infectious illnesses must be reported to the Co-ordinator who will advise on the exclusion period, if any, and will inform staff and other parents if necessary. In some cases the Local Health Authority may be contacted for advice and guidance.

<u>ILLNESS</u>	<u>RECOMMENDED PERIOD TO BE KEPT AWAY</u>
Diarrhoea and/or Vomiting (with or without a specified diagnosis)	Until diarrhoea and vomiting has cleared for a minimum of 48 hours. Period of exclusion varies according to length of time illness clears.
Rash with fever or behavioural change	Exclusion until a doctor has determined the illness is not infectious.



Influenza / Fever/throat infections	Exclusion until feeling better and fever has gone down
Swine Flu (H1N1)	Any child who displays symptoms which could be Swine Flu will be isolated until they can be collected - other parents/carers will be informed especially those in high risk groups. All children who are experiencing symptoms should stay away from the club until symptoms have subsided. Once diagnosed children should stay away until advised by your GP
Shingles	Exclusion until lesions are crusted
Strep throat	Exclusion until 24 hours after treatment has been initiated
Chickenpox	7 days from onset of rash - it is necessary to wait until all spots have healed or scabbed
German measles	7 days from onset of rash - child is most infectious before the diagnosis is made and most children should be immune due to immunizations.
Hand, foot and mouth disease	Exclusion until treatment has been received and last lesion has disappeared.
Impetigo	Exclusion for at least 48 hours after antibiotic treatment has commenced and spots are no longer weeping fluid
Measles	5 days from onset of rash
Ringworm	Those who have the infection on an exposed area such as the scalp or hands will be excluded for one week and permitted to return only after treatment has commenced. Those who have the infection on an area that can be covered with clothing can return within 24 hours of commencing treatment. Those affected should not share clothing or towels with others and should wash hands thoroughly before eating and after using the toilet.
Scabies	Until treated
Scarlet Fever	5 days from commencing antibiotics
Whooping Cough	Exclusion for 5 days as long a course of antibiotics has been completed, otherwise 14 days
Conjunctivitis	Until treated with medication by GP and treatment



	commenced for at least 24 hours prior to return to Nursery - Medicine must be brought to Nursery to be administered by Staff
Head Lice	Until exclusion until full course of treatment has been received and live headlice eradicated.
HIV	Exclusion is not necessary. Little Villagers will consult with the child's parents/guardians, doctors and other appropriate health workers to put into place necessary Health & Safety and Emergency Procedures. The identity of any child who has HIV will remain confidential in accordance with Little Villagers Policy On Confidentiality. The child should not be seen to be treated differently from other children, this being especially true in event of an accident.
Verruca	No need for exclusion, but verrucae must be covered if going swimming
Mumps	9 days from onset of swollen glands - child most infectious before diagnosis is made
Threadworms	Until treatment with medication by GP
Meningitis	Exclusion until feeling well enough to return
TB	Cases are rare, exclusion until non-infectious
Herpes Simplex	Exclusion until cold sores have dried up or the appropriate anti-viral treatment has commenced
Hepatitis A	Exclusion until one week after onset of illness or jaundice (if symptoms are mild).
Hepatitis B & C	Exclusion is not necessary unless the child is unwell to the extent that they are distressed and the ability of staff to care for other children is affected. Any open sores, cuts or abrasions that are weeping or moist must be covered up by a waterproof covering and securely attached. If a potentially infectious event occurs, e.g. a carrier bites another child and breaks the skin the wound should be washed thoroughly and the child should be taken to the hospital or emergency doctor
Other Illness	Exclusion period will depend on illness and guidance from GP