

## **POLICY NO.6 ILLNESS POLICY**

**REV: 12 DATE: 15.07.2022**

It is the policy of the Scamps and Scholars to promote a healthy lifestyle through prevention of illness. The service will comply with all relevant legislation in this area including:

The Child Care Act 1992  
The Child Care (Childcare Centre Services) Regulations 2006  
Childcare Regulations 2016

### **Please do not send your child to the Childcare Service if he/she is unwell.**

If your child is unwell, we cannot care for your child within the Centre. Sick children may pass on disease and illness causing cross infection to other children or staff. This may also lead to staff absences thus affecting the child/adult ratio.

### **ADMINISTERING MEDICATION**

No medicine may be administered to a child unless a parent has a **prescription** and has completed a medication authorization form.

Calpol or Nurofen will only be administered if the child has a high temperature. The parent will be contacted before administering this medication. If a parent does not want staff to administer Calpol or Nurofen for a high temperature, they must be prepared to collect the child within 10 mins of receiving the phone call about the high temperature. If there is no change to temperature 30/40 mins after taking the medication, the parent will be contacted to take the child home. **The recommended dose indicated on the box or bottle of the Calpol or Nurofen will only be administered unless otherwise directed by a prescription.**

### **LONG-TERM / CHRONIC HEALTH CONDITIONS:**

- Chronic health conditions, which may require repeated prescription medication treatments, such as respiratory conditions (asthma) as well as dermatological/skin conditions (eczema) are some examples of these chronic conditions.

There are strict guidelines as to the medication that can be given to children in a childcare service. Staff may give prescribed medication for long-term or chronic health conditions once medication forms are completed by parent / guardian and prescriptions for the medication are available also. Any administration of medication during a child's day with us must be acknowledged and sign by a parent daily.

**PERIODS OF EXCLUSION FROM CENTRE DUE TO ILLNESS**

**WHEN SHOULD MY CHILD RETURN TO SCHOOL/ CHILDCARE?**

<b>Chicken Pox</b> When scabs are dry	<b>Conjunctivitis</b> Until eyes are no longer weeping	<b>Diarrhoea or Vomiting</b> 48 hours after the last episode	<b>Flu</b> 5 days after start of illness	<b>Glandular Fever</b> No need to stay out*
<b>Hand, foot &amp; mouth</b> No need to stay out*	<b>Head Lice</b> See Head Lice policy	<b>Impetigo</b> When scabs are dry or 24 hours after starting antibiotics	<b>Measles</b> 4 days after rash appears	<b>Mumps</b> 5 days after swelling appears
<b>Scabies</b> After first treatment	<b>Scarlet Fever</b> 24 hours after starting antibiotics	<b>Slapped Cheek</b> No need to stay out*	<b>Threadworms</b> No need to stay out*	<b>Whooping Cough</b> 5 days after starting antibiotics or 21 days after start of illness
<b>Prescribed Antibiotic</b> First 24 hours at home	<b>High Temperature</b> Clear overnight to return next morning	<b>Gastroenteritis Dysentery</b> Until authorised by G.P.	<b>Infective hepatitis</b> 7 days from onset of jaundice	<b>German Measles</b> 4 days from appearance of the rash

This information is based on the Management of Infectious Diseases in Schools guidance document. \*No need to stay out if child is well but school or childcare provider should be informed.

Scamps & Scholars reserves the right to seek medical clearance for a child to return to the service if concerns regarding their well being and that of the group setting is potentially compromised.

A doctors note of clearance for any of the above listed conditions or others that are presented through the year that are not on the fore-mentioned list, may be sought at the Managers discretion.

Management discretion may apply to any of the above illnesses, if parents can establish and substantiate that the illness in question and the ramifications of same, are not appropriate to their child. The Managers decision is final.

**APPROVAL DATE:** \_\_\_\_\_

**IMPLEMENTATION DATE:** \_\_\_\_\_

**SIGNED:** \_\_\_\_\_  
(On behalf of the Board of Directors)