

## Procedure for Vomiting and Diarrhoea

- The Room Leader/Key person should ascertain the nature of the child's sickness.
- For diarrhoea the Manager/Assistant manager will contact the Parents/Carers after two episodes of diarrhoea within one session.
- The Parent/Carer will be asked to keep the child at home for 48 hours after the last bout of vomit or diarrhoea.

## Procedure for a very high temperature

- If a child is suspected of having a high temperature the child's temperature is taken twice to get an accurate reading.
- If the child's temperature is above 38°C the Parent/Carer is called to advise them of their child's condition
- The child is stripped down to their vest or nappy and a tepid compress is applied to the back of the child's neck to try and reduce the temperature.
- Permission is sought via a telephone call to the Parent/Carer, to administer Calpol/Nurofen (provided the parent has supplied a labelled bottle), if consent has not already been given. Under no circumstances will Calpol/Nurofen be given, until Parents/Carers are able to confirm that no Calpol/nurofen has been administered to that child within the last four/six hours hours.
- In all cases where Calpol/nurofen has been administered, a form will be filled in and will be signed by the Parent/Carer when the child is collected.
- The Parent/Carer will be asked to telephone the nursery after 30 minutes of administer medication. If there is no improvement after this period, even when Calpol/nurofen has been administered, the Parent/Carer will be required to collect their child. If the temperature is over 39C at any point the parent will be asked to collect the child immediately. If no contact can be made with parents and the temperature rapidly rising an ambulance will be called.

## INFECTION CONTROL

Is also at Management discretion based on the severity of each case and the child's behaviour.

ILLNESS	EXCLUSION PERIOD
Bronchiolitis	Until FULLY recovered
Chicken Pox and Shingles	At least 6 days after the appearance of the last crop of spots, when they are fully crusted over and when the child feels well enough.
Conjunctivitis	None
Diarrhoea and Vomiting	48 Hours after the symptoms have ceased
"Slapped cheek" disease	Until they feel physically well
Hand foot and mouth disease	Until all the blisters have healed
Head Lice	Until the treatment has been given
Hepatitis A	Until they feel well and for 5days after the onset of the jaundice
Cold Sores	Until the child is well enough
Impetigo	Once the infection has completely healed
Measles	At least 4 days after the rash first appears and the child is well enough
Mumps	9 days after the swelling subsides

Ringworm	At least 24 hours after the first course of treatment has been given.
Rubella ( German Measles)	At least five days after the rash first appears and until the child is well enough
Scabies	At least 24 hours after the first course of treatment has been given
Scarlet Fever	At least 48 hours after first course of antibiotics has been given and they are well enough
Threadworms	At least 24 hours after the first course of treatment has been given
Verrucae	Verrucae must be covered with a waterproof plaster or clear nail varnish
Whooping Cough	At least 48 hours after the first course of antibiotics has been given and they are well enough
A child on antibiotics	At least 24 hours after the first course of antibiotics has been given and the child is well enough.
Meningitis	Until the child is well enough

## ALLERGIES

- When a child is first enrolled into the nursery Parents/Carers are required to provide full details of any allergies or specific needs / requirements. Premier Nursery requests full details of any allergy and whether this is a severe allergy.
- SEVERE is defined as ANY REACTION NO MATTER HOW MINOR
- The parent will then need to complete a form listing the effects that their child's allergy may have, should they come into contact with something they are allergic to.

- A medical plan will be obtained from the doctor or health carer if one is accessible.
- Details of the child's allergy will be available for staff (out of view from other parents) at all times in each of the rooms so that all staff are aware of the condition.