



Mountain community children's centre inc.

Unwell Children Policy

Rationale: Children may become unwell while at the Centre, or demonstrate characteristics that require further medical advice or inhibit their participation in our daily activities.

Aim: To provide a healthy and safe environment for children, staff, families and visitors to our Centre, whilst meeting the health and care needs of each individual.

Procedure:

Without breaching personal confidentiality for anti-discrimination purposes, parents / guardians are expected to notify the Centre of pre-existing medical conditions that may affect the child's health during their daily attendance at the Centre, such as Asthma, Anaphylaxis or Diabetes (please refer to Medical Conditions Policy).

There will always be a staff member with first aid qualifications on the premises.

If a child becomes unwell while at the Centre, staff will;

- 1 Assess the situation to determine the severity of the condition (that is, does the child require immediate first aid or medical attention. If so administer the appropriate first aid and follow the procedure for Life Threatening / Emergency Treatment as per our Accident and Administration of First Aid Policy.
- 2 If not an emergency, staff will follow the guidelines set out in the Table of Medical Conditions – Exclusions. Staff will act upon any symptoms being displayed such as rashes, vomiting, diarrhea, temperature, lethargy.
- 3 As indicated by recommended minimum exclusion periods table (attached), if the child has a **temperature** staff will remove excess clothing, and sponge the child with tepid water.
- 4 The parent / guardian or emergency contact will then be called to collect the child from the Centre immediately to enable them to continue to monitor their child with a possibility of seeking further medical attention. *If the parent / guardian or emergency contact can not be located or are unable to make arrangements to collect the child immediately (eg. leave work and begin to drive to the Centre), staff will call an ambulance to transport the child to hospital with the ambulance cost being billed to the family (as per our Accident – First Aid Policy).* An unwell child will be excluded from the group/other children until they are collected.
- 5 In the event that a child has become unwell at the Centre the staff member monitoring the child must complete the Incident, Injury, Trauma and Illness Record.

- 6 At the direction of the Nominated Supervisor or Responsible Person a child may be sent home during the day if showing signs of being unwell. These may include excess yellow or green mucous from the nose or continuous coughing.
- 7 When the child is collected the Incident, Injury, Trauma and Illness Record is to be signed by the parent / guardian then signed by the staff witness. The Form is to be photocopied with the original given to the family and the copy placed into the child’s file.
- 8 Notices will be displayed on the sign in areas and notice boards notifying families of any illnesses that have been in the centre.
- 9 Families are encouraged to notify the centre of any illnesses that their child or a family member may have had since their previous days of attendance.
- 10 Illnesses will then be recorded in the communication diary. The details to be recorded will be the name, age, symptoms, room, date, time of onset and any further comments. See sample below;

Date	Name	Age	Symptoms	Room	Time of Onset	Comments

Please find below recommended minimum exclusion periods taken from Staying Healthy in Childcare, 5th Edn 2012.

Table 1.1 Recommended minimum exclusion periods

Condition	Exclusion of case	Exclusion of contacts ^a
<i>Campylobacter</i> infection	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
Candidiasis (thrush)	Not excluded	Not excluded
Cytomegalovirus (CMV) infection	Not excluded	Not excluded
Conjunctivitis	Exclude until discharge from the eyes has stopped, unless a doctor has diagnosed non-infectious conjunctivitis	Not excluded
<i>Cryptosporidium</i>	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
Diarrhoea (no organism identified)	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
Fungal infections of the skin or nails (e.g. ringworm, tinea)	Exclude until the day after starting appropriate antifungal treatment	Not excluded
Giardiasis	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
Glandular fever (mononucleosis, Epstein–Barr virus [EBV] infection)	Not excluded	Not excluded
Hand, foot and mouth disease	Exclude until all blisters have dried	Not excluded
<i>Haemophilus influenzae</i> type b (Hib)	Exclude until the person has received appropriate antibiotic treatment for at least 4 days	Not excluded Contact a public health unit for specialist advice
Head lice (pediculosis)	Not excluded if effective treatment begins before the next day at the education and care service The child does not need to be sent home immediately if head lice are detected	Not excluded
Hepatitis A	Exclude until a medical certificate of recovery is received and until at least 7 days after the onset of jaundice	Not excluded Contact a public health unit for specialist advice about vaccinating or treating children in the same room or group
Hepatitis B	Not excluded	Not excluded
Hepatitis C	Not excluded	Not excluded
Herpes simplex (cold sores, fever blisters)	Not excluded if the person can maintain hygiene practices to minimise the risk of transmission If the person cannot comply with these practices (e.g. because they are too young), they should be excluded until the sores are dry Sores should be covered with a dressing, where possible	Not excluded
Human immunodeficiency virus (HIV)	Not excluded If the person is severely immune compromised, they will be vulnerable to other people's illnesses	Not excluded
Human parvovirus B19 (fifth disease, erythema infectiosum, slapped cheek syndrome)	Not excluded	Not excluded

Condition	Exclusion of case	Exclusion of contacts^a
Hydatid disease	Not excluded	Not excluded
Impetigo	Exclude until appropriate antibiotic treatment has started Any sores on exposed skin should be covered with a watertight dressing	Not excluded
Influenza and influenza-like illnesses	Exclude until person is well	Not excluded
Listeriosis	Not excluded	Not excluded
Measles	Exclude for 4 days after the onset of the rash	Immunised and immune contacts are not excluded For non-immunised contacts, contact a public health unit for specialist advice All immunocompromised children should be excluded until 14 days after the appearance of the rash in the last case
Meningitis (viral)	Exclude until person is well	Not excluded
Meningococcal infection	Exclude until appropriate antibiotic treatment has been completed	Not excluded Contact a public health unit for specialist advice about antibiotics and/or vaccination for people who were in the same room as the case
Molluscum contagiosum	Not excluded	Not excluded
Mumps	Exclude for 9 days or until swelling goes down (whichever is sooner)	Not excluded
Norovirus	Exclude until there has not been a loose bowel motion or vomiting for 48 hours	Not excluded
Pertussis (whooping cough)	Exclude until 5 days after starting appropriate antibiotic treatment, or for 21 days from the onset of coughing	Contact a public health unit for specialist advice about excluding non-vaccinated contacts, or antibiotics
Pneumococcal disease	Exclude until person is well	Not excluded
Roseola	Not excluded	Not excluded
Ross River virus	Not excluded	Not excluded
Rotavirus infection	Exclude until there has not been a loose bowel motion or vomiting for 24 hours ^b	Not excluded
Rubella (German measles)	Exclude until the person has fully recovered or for at least 4 days after the onset of the rash	Not excluded
Salmonellosis	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
Scabies	Exclude until the day after starting appropriate treatment	Not excluded
Shigellosis	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
Streptococcal sore throat (including scarlet fever)	Exclude until the person has received antibiotic treatment for at least 24 hours and feels well	Not excluded
Toxoplasmosis	Not excluded	Not excluded

Condition	Exclusion of case	Exclusion of contacts^a
Tuberculosis (TB)	Exclude until medical certificate is produced from the appropriate health authority	Not excluded Contact a public health unit for specialist advice about screening, antibiotics or specialist TB clinics
Varicella (chickenpox)	Exclude until all blisters have dried—this is usually at least 5 days after the rash first appeared in non-immunised children, and less in immunised children	Any child with an immune deficiency (for example, leukaemia) or receiving chemotherapy should be excluded for their own protection as they are at high risk of developing severe disease Otherwise, not excluded
Viral gastroenteritis (viral diarrhoea)	Exclude until there has not been a loose bowel motion for 24 hours ^b	Not excluded
Worms	Exclude if loose bowel motions are occurring Exclusion is not necessary if treatment has occurred	Not excluded

a The definition of ‘contacts’ will vary according to the disease—refer to the specific fact sheet for more information.

b If the cause is unknown, possible exclusion for 48 hours until the cause is identified. However, educators and other staff who have a food handling role should always be excluded until there has not been a loose bowel motion for 48 hours. Adapted from SA Health Communicable Disease Control Branch <http://www.dh.sa.gov.au/pehs/ygw/index.htm>. Note that exclusion advice is consistent with the Communicable Diseases Network Australia Series of National Guidelines (SoNGs), where available.

Some diseases—such as pertussis, typhoid, tuberculosis, meningococcal disease and hepatitis A—can cause concern among parents and sometimes interest from the media. Education and care services should consult their local public health unit, which can provide support and education in the event of a concerning disease.