Sick Children Policy

Quality Area 2: Children’s health and safety
Standard 2.1: Each child’s health is promoted.
Standard 2.2: Healthy eating and physical activity are embedded in the program for children.
Standard 2.3: Each child is protected.

This policy should be used in conjunction with the Service’s Control of Infectious Diseases Policy and Illness, Injury, Accident and Medical Emergency Policy

To protect the health of children and staff within the Service, it is important that children who are ill are kept away from the service for the recommended period.

- If a child becomes ill while at the service, the child’s parent/guardian will be contacted. If they are unable to be contacted, an alternative authorised person listed on the enrolment form will be contacted. Please ensure that you have someone on your contact list that is available to collect your child. Sick children are unable to remain at the Service for their own well-being and for the safety of the other children.

- If the child needs medical attention Educators will contact the appropriate medical professional. We will continue to attempt to contact an authorised carer for the child until one is found to care for the child.

- Children who have a common cold are to be excluded until the cold has passed, including a runny nose.

- A written medical certificate stating that the child is cleared of the infection will be required before a child returns to the Service.

- Children and staff are required to wash their hands after blowing their own nose or assisting children to blow theirs. Tissues are to be put into the toilet and flushed away to avoid the spread of infection or wrapped in a plastic bag to avoid contact with bodily fluids.

- A child who has passed two runny stools whilst at the Service will be sent home and may only return once a Doctor’s Certificate has been produced.

- Children that have had diarrhoea and vomiting will be asked to stay away from the Service for 48 hours after symptoms have ceased to reduce infection transmission as symptoms can develop again after 24 hours in many instances.

- Any child with a high fever of 39°C and above should not attend the Service. They should be carefully examined by a medical practitioner to exclude serious infections such as meningitis, urinary tract infection or pneumonia.

- Parents will always be alerted when a child registers a temperature of 38°C or above. The child does not need to be collected from the Service at this point.
Our Service is not equipped to care for sick children; however we will do everything we can to comfort a child who has become sick whilst in our care. To prevent the spread of disease, please monitor your child’s health and watch for:

- Runny, green nose
- High temperature
- Diarrhoea
- Red, swollen or discharging eyes
- Vomiting
- Rashes
- Irritability, unusually tired or lethargic

A child should not attend the Service if they have the symptoms stated above.

A child who has not been immunised will be excluded from the Service if; an infectious disease is reported within the Service community and that child is deemed to be in danger of contracting the illness. Please refer to our Control of Infectious Diseases Policy.

All notify-able Diseases reported to the Service will be reported to public health personnel and the Service community will be notified. The confidentiality of the child will be respected.

Keep records of any illness in children, Educators or other staff at the education and care service. It may also be useful for the parents and the child’s doctor to have written information on the child’s illness. It is important to record which part of the education and care service the person was in for most of the day.

Sample record of illness in the education and care service:

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Symptoms</th>
<th>Room</th>
<th>Date</th>
<th>Time of onset</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child’s name</td>
<td>2 years</td>
<td>Rash on head and neck</td>
<td>Toddlers</td>
<td>4 May 2011</td>
<td>2pm</td>
<td></td>
</tr>
<tr>
<td>Child’s name</td>
<td>6 months</td>
<td>Fever, runny nose</td>
<td>Infants</td>
<td>5 May 2011</td>
<td>1.30pm</td>
<td>Dad contacted. Paracetamol given 2.30pm</td>
</tr>
<tr>
<td>Child’s name</td>
<td>4 years</td>
<td>Weeping eye</td>
<td>Preschool</td>
<td>5 May 2011</td>
<td>4pm</td>
<td>Mum contacted. Will collect</td>
</tr>
<tr>
<td>Child’s name</td>
<td>Educator</td>
<td>Weeping eye</td>
<td>Preschool</td>
<td>5 May 2011</td>
<td>5pm</td>
<td></td>
</tr>
</tbody>
</table>
Records will help prevent the spread of infection, showing when the Service’s approach to infection control is working. They will also be used for staff and public health workers to identify the cause of any outbreak and how to control it.

This policy was made with consideration to Staying Healthy: Preventing infectious diseases in early childhood education and care services (5th Edition), Education and Care Services National Regulations 2011, Infectious Diseases in Early Childhood Settings: A Guideline for Early Childhood Service Providers, Guideline for the Control of Infectious Diseases in Child Care

Date that the policy was last updated or revised: January 2015

19/02/2015

Nadiya Khan
Director
Signed by: Nadiya.Khan@aiic.qld.edu.au

Australian International Islamic College Kindy