



Little Feet Childcare Centre Limited

"we care for your child"

Children's Health/Illness Policy

Rationale

Little Feet Childcare Centre aims to ensure that all adults and children are safe from infection and would take reasonable steps to minimize the spread of infection amongst all.

Procedure:

- Parents are requested not to send sick child/children to the centre.
- Parents must document in the enrolment form and inform the centre Manager/Supervisor/staff of their child's allergies, special diet or health risks during enrolment.
- Staff and children with contagious or infectious disease will be excluded from attending the centre until medical clearance has been given.
- Parents will be asked to collect their sick child/children from the centre if in the opinion of the Manager/Supervisor/Staff, the child needs medical attention or is too unwell to participate in the centre programme.
- Any child who is sick will be temporary kept at a safe distance from other children in the designated sick bay which located in the Whanau Room.
- Any child in the sick bay will be able to lie down comfortably on a stretcher bed and will always be under supervision.
- A bucket with lid will be kept in the sick bay to for any dirty linen ,clothing.
- Any child who is picked up due to an illness in the Centre, Illness Recording Chart must be filled.
- Parents who have been asked to collect their child are expected to do so as soon as possible, but no longer than one hour after been contacted by the centre.

Vomiting and Diarrhoea:

- Staff and children need to be clear for 48 hours after the last episode of vomiting or diarrhoea before returning to the centre. In an event of an epidemic, this is extended to 72 hours.
- Following three episodes of vomiting or diarrhoea at the centre, the Manager/Supervisor/Staff will contact the parent and request them to collect their child.

High Temperature:

- If a child's temperature is higher than normal (37 degrees Celsius) but less than 38 degrees Celsius, the child will be stripped and sponged with Luke warm water by the staff with a current first aid certificate. The Staff will also offer the child fluids as required.
- If the child's temperature is 38 degrees Celsius and more, the staff will contact the parent who will be requested to collect their child from the centre.
- Staff will administer paracetamol (or any other medication for high fever) only with prior written parental consent as stated in the Centre's Medication Policy.

Unexplained Rash:

- Any child with unexplained rash must be seen by the doctor to diagnose the cause of the rash. If the rash is not contagious, the child will be allowed to return to the centre on presentation of a medical certificate.

Conjunctivitis:

- The child will be excluded until the discharge from eyes have been cleared for 24 hours.

Hand, Foot, and Mouth Disease:

- The child will be excluded from the centre until all blisters have been dried out and upon presentation of a medical certificate.

Nits and Lice:

- Any child/children found to have nits and lice will need to leave the centre as soon as possible. They will not be able to return until treatment has been done and no live nits are found walking on their scalp.
- Follow up treatment must be administered as per the product manufactures instructions.

Asthma:

- If a child has asthma, upon enrolment, parent must supply the centre with an "asthma action plan" from the child's doctor. This asthma action plan will be kept in the medication folder and a copy will be filed with the child's enrolment form.
- Any medications such as pumps, inhalers etc should be clearly labelled with the child's name.

- This medication can either be kept in the centre or brought in each day the child attends and handed to a staff member.

Antibiotics:

- Antibiotic which has been prescribed to the child for the first time, the child must have been taking them for 24 hours before they can return to the centre. This is to allow time for the medication to begin working.

Immunisation:

- Parents must ensure that their child's immunisation must be up to date as per the Plunket guidelines.
- A copy of the child's immunization record is required during enrolment. All other future immunisation records must be handed over to the office as soon as your child has been immunised.

Infectious Diseases:

- Any child diagnosed with any infectious disease, the parents must notify the centre immediately and the child needs to remain home until the clearance has been given by the doctor.
- In case of an epidemic, parents will be informed through newsletters and the Centre information board.
- Parents are requested not to send their child to the centre if they are infected of any disease for the period specified in the Ministry of Health guidelines.

Appendix A

List of Infectious Diseases.

Information & exclusion list

Condition










This disease is spread by

Early Symptoms

Time between exposure and sickness

Exclusion from school, early childhood centre, or work*

Rashes and skin infections

 <p>Chickenpox</p>	Coughing, sneezing and contact with weeping blisters.	Fever and spots with a blister on top of each spot.	10–21 days after being exposed.	1 week from appearance of rash, or until all blisters have dried.
 <p>Hand, foot and mouth disease</p>	Coughing, sneezing, and poor hand washing.	Fever, flu-like symptoms – rash on soles and palms and in the mouth.	3–5 days	Exclude until blisters have dried. If blisters able to be covered, and child feeling well, they will not need to be excluded.
 <p>Head lice (Nits)</p>	Direct contact with an infested person's hair.	Itchy scalp, especially behind ears. Occasionally scalp infections that require treatment may develop.	N/A	None, but ECC/school should be informed. Treatment recommended to kill eggs and lice.
 <p>Measles</p>	Coughing and sneezing. Direct contact with an infected person. Highly infectious.	Runny nose and eyes, cough and fever, followed a few days later by a rash.	7–18 days	5 days after the appearance of rash. Non-immune contacts of a case may be excluded.
 <p>Ringworm</p>	Contact with infected skin, bedding and clothing.	Flat, ring-shaped rash.	4–6 weeks	None, but skin contact should be avoided.
 <p>Rubella (German Measles)</p>	Coughing and sneezing. Also direct contact with an infected person.	Fever, swollen neck glands and a rash on the face, scalp and body.	14–23 days	Until well and for 7 days from appearance of rash.
 <p>Scabies</p>	Contact with infected skin, bedding and clothing.	Itchy rash.	4–6 weeks (but if had scabies before it may develop within 1–4 days)	Exclude until the day after appropriate treatment.
 <p>School sores (Impetigo)</p>	Direct contact with infected sores.	Blisters on the body which burst and turn into scabby sores.	Variable	Until sores have dried up or 24 hours after antibiotic treatment has started.
 <p>Slapped cheek (Human parvovirus infection)</p>	Coughing and sneezing. The virus may be passed from mother to child during pregnancy.	Red cheeks and lace-like rash on body.	4–20 days	Unnecessary unless unwell.

Diarrhoea & Vomiting illnesses

 <p>Campylobacter Cryptosporidium Giardia Salmonella</p>	Undercooked food, contaminated water. Direct spread from an infected person or animal.	Stomach pain, fever, nausea, diarrhoea and/or vomiting.	Campylobacter 1–10 days Cryptosporidium 1–12 days Giardia 3–25 days Salmonella 6–72 hours	Until well and for 48 hours after the last episode of diarrhoea or vomiting. Cryptosporidium – do not use public pool for 2 weeks after symptoms have stopped. Salmonella – Discuss exclusion of cases and contacts with public health service.
 <p>Hepatitis A</p>	Contaminated food or water, direct spread from an infected person.	Nausea, stomach pains, general sickness. Jaundice a few days later.	15–50 days	7 days from the onset of jaundice.

* Seek further advice from a healthcare professional or public health service

or further information contact:

Your Public Health Nurse

Your Public Health Service

Vaccine-preventable and/or on National Immunisation Schedule

Notifiable disease (Doctors notify the Public Health Service)

Pregnant women should seek advice from their maternity provider or G.P

New Zealand Government

hpa health promotion agency

MINISTRY OF HEALTH

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Information & exclusion list

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Diarrhoea & Vomiting illnesses continued

Norovirus	Contact with secretions from infected people.	Nausea, diarrhoea/and or vomiting.	1-2 days	Until well and for 48 hours after the last episode of diarrhoea or vomiting.
Rotavirus	Direct spread from infected person.	Nausea, diarrhoea/and or vomiting.	1-2 days	Until well and for 48 hours after the last episode of diarrhoea or vomiting.
Shigella	Contaminated food or water, contact with an infected person.	Diarrhoea (may be bloody), fever, stomach pain.	12 hours-1 week	Discuss exclusion of cases and their contacts with public health service.
VTEC/STEC (Enterocytotoxin- or stiga toxin-producing E. coli)	Contaminated food or water, unpasteurised milk. Direct contact with animals or infected person.	High incidence of bloody diarrhoea, stomach pain. High rate of hospitalisation and complications.	2-10 days	Discuss exclusion of cases and their contacts with public health service.

Respiratory Infections

Influenza and Influenza-like illness (ILI)	Coughing and sneezing. Direct contact with infected person.	Sudden onset of fever with cough, sore throat, muscular aches and a headache.	1-4 days (average about 2 days)	Until well.
Streptococcal sore throat	Contact with secretions of a sore throat. (Coughing, sneezing etc.)	Headache, vomiting, sore throat. An untreated sore throat could lead to Rheumatic fever.	1-3 days	Exclude until well and/or has received antibiotic treatment for at least 24 hours.
Whooping cough (Pertussis)	Coughing. Adults and older children can pass on the infection to babies.	Runny nose, persistent cough followed by "whoop", vomiting or breathlessness.	5-21 days	Five days from commencing antibiotic treatment or, if no antibiotic treatment then 21 days from onset of illness or until no more coughing, whichever comes first.

Other Infections

Conjunctivitis (Pink eye)	Direct contact with discharge from the eyes or with items contaminated by the discharge.	Irritation and redness of eye. Sometimes there is a discharge.	2-10 days (usually 3-4 days)	While there is discharge from the eyes.
Meningococcal Meningitis	Close contact with oral secretions. (Coughing, sneezing, etc.)	Generally unwell, fever, headache, vomiting, sometimes a rash. Urgent treatment is required.	3-7 days	Until well enough to return.
Meningitis - Viral	Spread through different routes including coughing, sneezing, faecal-oral route.	Generally unwell, fever, headache, vomiting.	Variable	Until well.
Mumps	Coughing, sneezing and infected saliva.	Pain in jaw, then swelling in front of ear and fever.	12-25 days	Exclude until 5 days after facial swelling develops, or until well.

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