little feet childcare centre we care for your child

Little Feet Childcare Centre Limited

"we care for your child"

Children's Health/Illness Policy HS26/PH27

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 main office.
- 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:

Date of Review:19th October 2021

- 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.

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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.

Date of Review:19th October 2021

Rotavirus

Condition

This disease is spread by

Early Symptoms

Time between exposure and sickness

early childhood centre, **Exclusion from school**, or work*

Diarrhoea & Vomiting illnesses continued

Norovirus

Contact with secretions from infected people.

Nausea, diarrhoea/and or vomiting

Direct spread from infected person.

Nausea, diarrhoea/and or vomiting.

Diarrhoea (may be bloody),

fever, stormach pain.

contact with an infected person.

Contaminated food or water,

Contaminated food or water,

Shigella

1-2 days 1-2 days

Until well and for 48 hours after the last episode of diarrhoea or vomiting. episode of diarrhoea or vomiting.

Until well and for 48 hours after the last

Discuss exclusion of cases and their contacts with public health service.

12 hours-1 week

2-10 days

Discuss exclusion of cases and their contacts with public health service.

Respiratory Infections

(Verocytotoxin- or shiga toxin-producing E. coli) VTEC/STEC

unpasteurised milk. Direct contact with animals or infected person.

Sudden onset of fever with cough,

sore throat, muscular aches

and a headache.

hospitalisation and complications

stomach pain. High rate of

High incidence of bloody diarrhoea,

An untreated sore throat could lead Headache, vomiting, sore throat. to Rheumatic fever.

Contact with secretions of a sore throat.

Streptococcal sore throat

Whooping

Influenza-like illness (ILI)

Influenza and

(Coughing, sneezing etc.)

Coughing and sneezing. Direct contact with infected person.

Runny nose, persistent cough followed by "whoop", vomiting or breathlessness.

Coughing. Adults and older children can pass on the infection to babies.

5-21 days

antibiotic treatment for at least 24 hours. Exclude until well and/or has received

1-3 days

Until well

1-4 days (average about 2 days)

reatment or, if no antibiotic treatment then 21 days from onset of illness or until no more coughing, whichever comes first. Five days from commencing antibiotic

Other Infections

Pertussis)

cough

Conjunctivitis

Meningococcal Pink eye

N. Salar

Meningitis

N. Land Meningitis - Viral

Mumps

Close contact with oral secretions. (Coughing, sneezing, etc.)

Spread through different routes including

Coughing, sneezing and infected saliva coughing, sneezing, faecal-oral route.

2-10 days (usually 3-4 days)

sometimes there is a discharge

or with items contaminated by the discharge. Direct contact with discharge from the eyes

Irritation and redness of eye.

While there is discharge from the eyes.

Until well enough to return

Until well

Variable

Generally unwell, fever, headache, vomiting, sometimes a rash.

3-7 days

Urgent treatment is required Generally unwell, fever,

Pain in jaw, then swelling

headache, vomiting.

in front of ear and fever

12-25 days

facial swelling develops, or until well. Exclude until 5 days after

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or further information contact: Your Public Health Nurse

Your Public Health Service







Condition

This disease s spread by

Early Symptoms

Time between exposure and sickness

Exclusion from school, early childhood centre, or work*

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Rashes



contact with weeping blisters.

Coughing, sneezing and

Hand, foot and mouth disease

Fever, flu-like symptoms - rash on soles

and palms and in the mouth.

and poor hand washing

Coughing, sneezing,

Itchy scalp, especially behind ears.

Occasionally scalp infections that require treatment may develop.

Head lice (Nits)

an infested person's hair Coughing and sneezing.

Direct contact with

None, but ECC/school should be informed.

freatment recommended

N/A

to kill eggs and lice.

Non-immune contacts of a case may

7-18 days

Runny nose and eyes, cough and fever, followed a few days later by a rash.

be excluded.

None, but skin contact

should be avoided

4-6 weeks

5 days after the appearance of rash.

Exclude until blisters have dried. If blisters

I week from appearance of rash, or until all blisters have dried

10-21 days after being exposed.

Fever and spots with a blister

on top of each spot.

able to be covered, and child feeling well

they will not need to be excluded.



Measles

Direct contact with an infected person.

Rubella (German Measles) Ringworm

Scables

School sores (Impetigo)

The virus may be passed from mother to child during pregnancy. Direct contact with infected sores Coughing and sneezing.

Blisters on the body which burst and turn into scabby sores

Variable

4-20 days

Red cheeks and lace-like rash on body

Unnecessary unless unwell.

Until sores have dried up or 24 hours

Exclude until the day after

4-6 weeks (but if had scabies before

14-23 days

Fever, swollen neck glands and a rash

Coughing and sneezing. Also direct

Contact with infected skin

Highly infectious.

bedding and clothing

contact with an infected person.

Contact with infected skin,

bedding and clothing.

Hat, ring-shaped rash

on the face, scalp and body

it may develop within 1-4 days)

appropriate freatment.

Until well and for 7 days rom appearance of rash after antibiotic treatment has started.

Diarrhoea & Vomiting illnesses

luman parvovirus infection)

Slapped cheek

Cryptosporidium Campylobacter

Salmonella

É

confaminated water. Direct spread from an infected person or animal

Undercooked food,

Contaminated food or water, direct spread from an infected person.

Hepatitis A

sickness. Jaundice a few days later Nausea, stomach pains, general

15-50 days

Cryptosporidium 1-12 days Campylobacter 1-10 days Salmonella 6-72 hours Giardia 3-25 days

Stomach pain, fever, nausea, diarrhoea

and/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.

Until well and for 48 hours after the last

episode of diarrhoea or vomiting.

7 days from the onset of jaundice.

"Seek further advice from a healthcare professiona

or further information contact Your Public Health Nurse

Your Public Health Service







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Revised March 2016. 86/2016. Code HE1215