

## **ILLNESS EXCLUSION POLICY**

**Over the Rainbow Early Learning Centre Ltd** believes in the interest of the child who is ill and the welfare of other children and staff, children who are unwell should not attend the service. When groups of children play and learn together, illness and disease can spread from one child to another even when the service's stakeholders implement recommended hygiene and infection control practices. Our service is committed to preventing the spread of infectious illnesses through the implementation, monitoring and maintaining of simple strategies such as, handwashing, effective cleaning procedures, and an understanding and knowledge of children's health.

### **Principle**

This policy is underwritten by the Child Care Act 1991 (Early Years Services) Regulations 2016, the Child Care Act 1991 (Early Years Services) (Amendment) Regulations 2016 and the Tusla Quality and Regulatory Framework.

This policy should be read in conjunction with our Infection Control policy, Immunisation Policy, Hygiene policy and Covid-19 Policy.

All parents/guardians are informed of this policy on enrolment. Staff members will check with parents that they have read and understood the policy and provide any assistance needed.

A summary of this policy will be included in the parent handbook. This policy will also be reviewed with staff members at induction and annual staff training.

A copy of all policies will be available during all hours of operation to staff members and parents in the Policy Folder located in the setting.

Parents/guardians may receive a copy of the full policy and procedures at any time upon request. Parents/guardians and all relevant staff members will receive written notification of any updates to this policy.

### **Aims:**

- To work co-operatively with parents in the effective management of sick children
- For staff to be able to recognise signs and symptoms of illness
- For staff to know the procedures for identifying, documenting and managing children who are ill
- To ensure the comfort and safety of sick children until they are collected.

### **Rationale:**

The well-being of all children who attend the service and the staff employed is of the highest priority. Although some illnesses do not require exclusion, sometimes illness requires a child or staff member to be excluded from care to prevent the spread of infection to other children and staff and to allow the child time to rest, recover and be treated for the illness.

It is important to note that from time-to-time, the service may have pregnant staff members and or children with compromised immune systems to whom being exposed to an infectious illness could be life threatening or harmful to an unborn child.

Young children can become sick in a very short time and staff should be aware of the signs and symptoms of illness in children. Effective observation and documentation are required when monitoring a child showing signs of illness. Other staff and the child's parents may need to be notified of any atypical behaviour or symptoms of illness. It is essential staff are sensitive and responsive to children when sick and showing signs of distress. Reducing the spread of infectious disease and hygiene practices are also important in the management of sick children and staff.

### **Strategies/Practices/Procedures:**

#### **Parents will:**

- Refer to the Infectious disease exclusion recommendations information located in the Parent Handbook, or contact the manager if unsure about whether their child can attend.
- Keep children at home or arrange alternative care for sick children until they are fully recovered. Management reserves the right to not allow a child who arrives to the services with an infectious illness to attend until management deems the child well enough to return.
- Notify staff on arrival of any signs or symptoms of possible illness for staff to monitor.
- Be notified of any signs or symptoms of illness by phone if these occur during the day within the service.
- Maintain current emergency contact information on the enrolment forms for notification of sick children.
- Be notified of an outbreak of an infectious disease within the service.
- Collect their child if their child falls ill during the day and follow exclusion guidelines.
- Provide up to date immunisation records for the service.
- Provide a 'Clearance Letter' from their doctor before their child returns to the service after illness if requested by the manager.

#### **Staff will:**

- Be aware of the signs and symptoms of illness for children and staff (see attached information).
- Wash their hands, on arrival and departure.
- If a child seems unwell:
  - tell the manager and the parents
  - take the child's temperature if you think the child may have a high temperature.
  - remind a child who is coughing or sneezing to cough/sneeze into their elbow. Ask the child to wash their hands afterwards if they were using a tissue.
  - if you wipe a child's nose, wash your hands
  - if you touch a child who might be sick, avoid touching other children until you have washed your hands
  - keep moist skin conditions and abrasions covered unless directed otherwise by a doctor or a nurse
  - encourage parents to tell you when someone in the family is sick. If someone in the family is sick, watch for signs of illness in the child.
  - Ensure the comfort and safety of a sick child. Cushions, a sheet or blanket, soft toy, books etc. will be provided for the child.

- Complete an 'Illness Observation Form', monitor the child and consult the Guide to infection prevention and control booklet to determine whether the suspected illness is excludable.
- The parent will be contacted to collect their child if it is required that they are to be excluded. If the child is excluded, the register for sick children must be completed.
- Notify the manager if a staff member becomes ill while at the centre or ASAP if an absence from work is required.
- Be sensitive and responsive to a child's distress if unwell. The child should be comforted whilst still maintaining standard hygiene practices.
- Be sensitive to the pressure parents often feel to fulfil work commitments when their child is sick.

#### **Management will:**

- Monitor staff compliance with this policy through observations of the staff interacting with sick children and implementing appropriate practices.
- Consistently seek ways to improve the service's standards for caring for sick children by adhering to current information from recognised health authorities.
- Provide parents with an exclusion schedule for infectious diseases in the parent handbook on enrolment and again when required or requested by parents.
- Ensure at all times there is at least one staff member with a current first-aid, CPR, anaphylaxis and asthma qualifications on duty.
- Through staff meetings, keep staff up to date with their responsibilities and practices for managing sick children.
- Ensure children are excluded from the centre if they are non-immunised and an outbreak occurs or if they have an infectious disease.
- Notify the Public Health Unit in the event of a notifiable disease outbreak.
- Encourage all staff and children/parents to be up to date with immunisations (see immunisation policy)
- Notify all parents of any outbreak of an infectious disease, signs and symptoms, infectious period and the treatment.

#### **Signs and Symptoms of Illness**

These are some of the things to look for:

- Severe, persistent or prolonged coughing (child goes red or blue in the face, and makes a high pitch croupy or whooping sound after coughing)
- Breathing difficulty
- Yellowish skin or eyes
- Conjunctivitis (tears, eyelid lining is red, irritated eyes, followed by swelling and discharge of pus from eyes)
- Unusual spots or rashes
- Patch of infected skin (crusty skin or discharging yellow area of skin)
- Feverish appearance
- Unusual behaviour (child is cranky or less active than usual, cries more than usual, seems uncomfortable or just seems unwell)
- Frequent scratching of the skin or scalp
- Grey or very pale faeces
- Unusually dark, tea coloured urine
- Sore throat or difficulty in swallowing
- Headache, stiff neck
- Vomiting

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- Loss of appetite
- Diarrhoea (an increase in the frequency, runniness or volume of faeces)
- Mucous discharge from the nose (thick, green or bloody)
- High Temperatures / Fevers In the case of a fever (over 38°C) the child will need to go home as soon as possible as this indicates the body is fighting an infection which may be contagious.
- Emergency Involving Anaphylaxis or Asthma medication may be administered to a child without an authorisation.
- The service must contact the following as soon as practicably possible
  - A parent of the child.
  - Emergency services.
  - The child will be positively reassured, calmed and removed to a quiet area under the direct supervision of a suitably experienced and trained educator.

Certain symptoms in children and adults may suggest the presence of communicable diseases. Children/staff who display any of the symptoms will at the management's discretion be excluded from the playschool until;

- a) the symptoms have subsided or
- b) the disease is no longer contagious
- c) In some cases a medical certificate stating fitness to return to playschool/work might be required

**The Management reserves the right to exclude a child from the playschool when they are ill and may refer the parent to a doctor before admission is regained.**

Disease/Illness	Minimal Exclusion Period
<b>Common Rashes and Skin Infections</b>	
Chickenpox	Until scabs are dry, usually 5-7 days from onset of rash.
German Measles (Rubella)	7 Days from onset of rash
Measles	4 Days from appearance of the rash
Slapped cheek / fifth disease / Parvovirus B19	Until recovered
Hand, Foot and Mouth	Until recovered
Scarlet fever	24 hours after commencing antibiotic treatment
Shingles	Exclude if rash is weeping and cannot be covered
Impetigo	Until lesions are crusted and healed or 24 hours after commencing antibiotic treatment
Scabies	Until after the first treatment
Ringworm of Scalp	Until cured
Ringworm of Body	Seldom necessary to exclude provided treatment is been given
<b>Diarrhoea and Vomiting illness</b>	
Vomiting and/or Diarrhoea	48 hours from the last episode of vomiting or diarrhoea
E. Coli O157 Vtec	Until 2 negative stool specimens have been taken at least 48 hr apart. Some may require microbiological clearance.
Typhoid and paratyphoid Fever	Until declared free from infection and no longer excreting. Some may require microbiological clearance.
Shigella (dysentery)	Exclusion may be required for certain types of Shigella infections, medical certificate required
Cryptosporidiosis	48 hrs from last episode of diarrhoea
<b>Respiratory Infections</b>	
Flu (influenza)	Until recovered
Tuberculosis	Medical certificate required
Pertussis (whooping cough)	5 days from commencing antibiotic treatment, or 21 Days from onset of illness if no antibiotic treatment is used
Covid-19	14 days from positive test result or being confirmed a close

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	contact. See HSE Isolation quick guide dated 29/09/2021
<b>Other</b>	
Antibiotics prescribed	First two days at home
Temperature	If sent home ill, child must be off for 24 hrs
Conjunctivitis	Keep at home for 2 days; thereafter until eyes are no longer weeping.
Hepatitis A	7 Days from onset of jaundice or 7 days after symptom onset if no jaundice
Hepatitis B, C, HIV/AIDS	None
Mumps	Until the swelling has subsided and in no case less than 7 days from onset of illness
Tonsillitis and Streptococcal	24 hrs after commencing antibiotic treatment
Glandular fever	none
Head lice (Pediculosis)	Until appropriate treatment has been given
Meningococcal C meningitis / septicaemia	Until recovered
Meningitis due to other bacteria (HIB and pneumococcal meningitis)	Until recovered
Meningitis viral	None
Threadworms	None
MRSA	None
Respiratory Symptoms	At the Managers discretion parents will be contacted
Fresh air and exercise significantly enhance the healthy growth of a child. Parents, who feel their child is too ill to participate in outdoor activities, will be advised by management to keep child home for an extra day to ensure complete recovery	
If in any doubt the Management will consult with Public Health Nurse or H S E or any other relevant professional	

### **Covid-19 specific requirements**

No-one with symptoms consistent with Covid-19 should be attending the setting without having discussed it with their GP. We have been asked to take a precautionary approach meaning if your child is 'off form', please do not attend.

### ***Symptoms and period of infection***

- Symptoms include but are not limited to:
  - High temperature - 38° or above
  - New cough
  - Loss or change of sense of taste and/or smell
  - Shortness of breath or an existing breathing condition that has become worse
  - Vomiting and or diarrhea
  - Other symptoms associated with COVID-19 include fatigue, nasal congestion, conjunctivitis, sore throat, headache, muscle/joint pain, skin rash, chills or dizziness.
- The time between catching the virus and getting symptoms is most often five to six days but can be very short (1 day) or long (up to 14 days).
- People are most likely to spread the virus in the early stages when they become symptomatic.
- Infection can also spread from people a day or two before symptoms develop.
- Some people have very mild symptoms or no symptoms (don't consider themselves unwell).
- By 10 days from symptoms onset most people are not shedding the virus.
- Severe illness is more common in older people and people with some long-term illness than in children and adults in good health.
- Children:
  - May be less likely to catch infection
  - Much less likely to get serious disease

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- Less likely to spread infection than adults and older children

**Note:** Less likely does not mean impossible - children do get infected, a small number get severe disease and infection can spread from children to others.

Symptoms may present differently in different age groups and with different variants of the virus. Some symptoms may also be confused with common cold, hay-fever or flu. If you have any new acute symptoms suggestive of COVID-19, self-isolate and contact your GP. However, if you or your child's symptoms are very mild then stay at home, reassess after 48 hours and contact your GP for advice.

### **If your child does not feel well**

- If your child has symptoms of viral respiratory disease, even if they are mild, they must **not attend the setting**.
- Likewise, parents who have respiratory symptoms must not take their child to the setting or pick them up.
- Parents must not take their child to the setting if a parent or anyone else in your home or at work is suspected of having or known to have Covid-19.

### ***If you child becomes ill while attending the setting***

- They will be kept in our isolation area (with a member of staff), while we contact you to arrange for their collection as quickly as possible. You will be advised to contact your GP straight away and follow HSE advice. **It is vital that we have a contact number for parents/guardians where we can reach you at all times during the day.**
- If a parent/guardian cannot be reached at their provided phone numbers their emergency contacts will be called and asked to collect the child as soon as possible.
- Parent/guardian or authorized person will collect child at the back door (Pitch side). **Please do not enter the setting.**

### **New Requirement from the HSE**

When a child is ready to return to the setting after illness the **'Return to preschool declaration'** must be completed and returned to us before the child can attend. This form is available on the child overview page of ChildPaths and can be completed electronically.

This declaration is a requirement from the HSE in which the parent/guardian needs to provide a brief written declaration that:

- They are satisfied that the child has recovered.
- They have followed any medical advice given regarding staying away from childcare.
- They have no reason to believe that the child now represents a particular infection risk to other children or to staff.

### **Covid-19 testing (as per HSE memo dated 6 October 2021)**

#### **Children with symptoms**

Public Health advice remains the same for any child aged between 3 months and 13 years of age with symptoms of COVID 19. They need to immediately self-isolate, stay at home, and you should contact their GP for advice and COVID 19 testing.

#### **Children who are household close contacts**

Children aged between 3 months and 13 years who are household contacts of a confirmed case of COVID 19 will still have to restrict their movements and get a COVID 19 test. A

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child under 13 who is not fully vaccinated, is a household contact if they were present overnight in a house or residential setting while a person with COVID 19 was infectious in that house. This may be their own home or if they were staying overnight with family or friends.

From Monday 27/09/2021 children who **do not have symptoms** of COVID-19 and may have been in close contact with a confirmed case of COVID-19 in schools, childcare facilities, sports, and social settings, will not have to restrict their movements or get a COVID 19 test.

If your child has a runny nose, but is otherwise in good health and good form, then they can go to school. If your child has a runny nose and other symptoms and seems a little off form, then they should stay home from school or childcare. You should watch their symptoms and contact their GP for advice if you are worried. Children with chronic symptoms should not be regularly or routinely excluded from school or social and sporting settings.

This policy was adopted by **Over the Rainbow Early Learning Centre Ltd** on:

Date: \_\_\_\_\_

\_\_\_\_\_  
Manager

\_\_\_\_\_  
co-Manager

Review Date: \_\_\_\_\_