

November 2024	<b>Polykids Child Health Policy</b>
Contact Authority	Manager: Polykids Childcare Centre
Rationale	Exclusion of children with infectious diseases from the Centre is sometimes necessary where there is potential for further spread of infection. The health of other children and teachers is a prime consideration.
National Guidelines	<b>Te Whariki</b> Well-Being- Goal 1: Children experience an environment where their health is promoted.
Licensing Criteria (2008)	Administration of Medicine (HS28) Sick and/or Soiled Tamariki Procedures (HS30) Serious Injury, Illness, and Incident Notification Procedure (HS34) Positive Guidance Procedure (C10)
<p>As a Centre we follow the guidance of the Ministry of Education and Ministry of Health - we acknowledge that the Centre is a group learning environment in which we provide care and education. Our duty of care is to maintain high levels of wellbeing for Tamariki, and for all who participate within our Polykids community.</p> <p>Adults and tamariki will make every effort to protect those in the centre environment from contacting infectious diseases. Our standard processes include handwashing, hand sanitization, coughing into elbow, and the disposal of used tissues immediately.</p> <p>The use of paracetamol or ibuprofen is prohibited for the treatment of fever or pain relief- and will only be administered when used in conjunction with a medical plan advised by a G.P. An example of this would include children with a history of febrile convulsions.</p> <p>When addressing bone fractures and breaks for tamariki, a comprehensive medical plan and medical certificate are essential.</p> <p><b>The following information must be included:</b></p> <p>A clearance for the child, indicating that physical condition is satisfactory to permit attendance at the Centre during recovery from injury.</p> <p><b>Type of Medication:</b> Specify the name of the medication prescribed (e.g., pain relief, anti-inflammatory) alongside the rationale for its use (e.g., managing pain, reducing inflammation).</p> <p><b>Dosage:</b> Clearly define the amount of medication to be administered.</p> <p><b>Frequency:</b> Outline how often the medication should be taken (e.g., every 6 hours).</p> <p><b>Duration:</b> Indicate how long the medication will be necessary (e.g., for 2 weeks, until the follow-up appointment).</p> <p>In conjunction with the medical requirements, an additional support plan will be developed that details how the centre can assist tamariki while addressing any potential limitations. Key considerations might include water play and the need to limit, or the ability to access toileting facilities while recovering from injury.</p> <p><b>Children should be kept home when they:</b> (Please note that stand down periods apply to <i>children and adults</i> who enter our learning environment)</p> <ul style="list-style-type: none"> <li>▪ Seem unwell and have no interest in activities or play.</li> <li>▪ Have little energy and want or need to sleep or rest for long periods.</li> <li>▪ Constantly want to be held and comforted.</li> <li>▪ Require antibiotics for bacterial infection (excluded 24 hours from first dose)</li> <li>▪ Have a contagious/infectious illness.</li> <li>▪ Have suffered from a seizure or febrile convulsion, we request a 24-hour stand-down period.</li> <li>▪ When paracetamol and/or ibuprofen has been administered within the home environment to control fever or as pain relief children will not be permitted to attend the Centre (24-hour exclusion from the administered dose)</li> <li>▪ Gastroenteritis- includes vomiting or diarrhoea, or a combination of both. Sick children need to stay away for a <b>minimum of 48 hours</b> after the last symptoms of diarrhoea and/or vomiting. If the 48-hour exclusion has passed but the child is obviously still not well (i.e., has fever, lethargic and unable to participate) they will be sent home. This takes into consideration the wellbeing of the child and others within the learning environment.</li> </ul>	

- Have any of the following conditions: unusually persistent crying, difficulty breathing, distressing and persistent coughing, and other signs of severe illness or pain.
- Illness prevents the child from participating in program activities.
- Illness results in greater care than we can provide without compromising the health and safety of other children and staff.

**Process for Whānau contact-** *In the event of Elevated temperature/ fever or sudden illness:*

If a child develops an elevated temperature/fever (38° or above) parents will be contacted to collect child. The acceptable time frame is 30 minutes of receiving phone call.

If parents are not able to be contacted, the emergency contacts will be phoned to come and collect the child.

If parents and emergency contacts **do not** make contact and a child has a febrile convulsion, we will call an ambulance while following the advice of Healthline.

**ANYTIME**-When the centre requires assistance regarding a child's health, Healthline **(0800 611 116)** will be utilized to assist with further guidance regarding keeping a child comfortable. Healthline is a free service with expert advice and guidance.

**Fever-Temperature** (38°C and above) **a 24 hour stand down is required from when temperature ceases.**

**Fever- Temperatures and Sleep:** Children with temperatures of 37.7° C and above will not be placed in the sleep rooms to rest or sleep, instead whānau will be given the option to have their child stay up and monitored or come and collect their child so that they can be rested in the home environment. When temperatures elevate to 38° C or above the **Process for whānau contact** will commence.

**Contagious and infectious illness- information and exclusion list**

- **Chicken Pox** – 1 week from appearance of rash, or until all blisters have dried.
- **Conjunctivitis** – 24-hour exclusion and until treatment has commenced and there is no discharge from the eye.
- **Croup** – children should remain at home until after the fever is gone and they are feeling better.
- **Diarrhoea** – until well and for 48 hours after the last episode of diarrhoea ( a formed bowel motion is a good indicator that the infection has passed)
- **Head lice** - until treatment has commenced (treatment may include chemical treatments as well as natural remedies such as combing).
- **Impetigo (School Sores)** – 24 hours after treatment has begun and sores are not weeping. Sores on the torso, legs and upper arms must be hygienically covered to be able to attend Centre.
- **Mumps** - until 5 days after facial swelling develops, or until well.
- **Rash** - A child displaying an unidentified rash will need to be checked by a doctor and requires medical clearance to return to the Centre.
- **Scabies** - until 24 hours after treatment has commenced.
- **Strep Throat** - until 24 hours after treatment has begun, and until 24 hours after the fever has stopped.
- **Threadworm** - until treated.
- **Tuberculosis** - until the child's doctor or public health official advises that the child is not infectious.
- **Vomiting** - until well and for 48 hours after the last episode of vomiting.
- **Whooping Cough** – until antibiotic treatment is completed or advised by a doctor that the disease is no longer communicable.
- When a disease is vaccine preventable, there is a requirement to exclude unimmunized children who may have had contact with other infected persons. This applies to Measles, Diphtheria, and Whooping Cough and would be arranged on advice from the Medical Officer of Health
- **Public Health- Te Whatu Ora- exclusion guidelines will be followed for any conditions not covered above.**
- Individual health plans will be written for children who suffer from ongoing conditions such as asthma, epilepsy, allergies, or other medical conditions as required. A GP or a Public Health Nurse can assist you with this documentation.
- We reserve the right to request a medical certificate from a health professional before a child can return to the Centre.

**The following basic First Aid treatment will be administered to bites, grazes and cuts.**

Positive guidance strategies will be used to encourage children to have injuries sanitized, children do have the right to refuse the cleaning process.

- When the skin is grazed or broken, the skin will be cleansed with warm water and a mild soap solution, then followed with saline solution. A cold compress will be applied to reduce swelling.
- When the skin is not broken, a cold compress and arnica cream will be applied to reduce swelling.
- **Note:** Arnica cannot be applied to broken skin.

*This Policy has had full consultation with Whānau and Polykids staff.*

**Review Date: November 2025**