

Illness and Accident Policy



At Children's Respite Trust we will deal promptly and effectively with any illnesses or injuries that occur while children/young people are in our care. We take all practical steps to keep staff and children/young people safe from communicable diseases.

All parents or carers must give consent through our parent platform Family when their child joins the setting, requesting permission for emergency medical treatment for their child in the event of a serious accident or illness.

We will record any accidents or illnesses, together with any treatment given, on an **Incident Record** or **Accident Record** on Family as appropriate, which the parent or carer will be asked to acknowledge when they receive a notification.

Children Respite Trust cannot accept children/young people who are ill. If any children/young people are ill when they first arrive at the Centre we will immediately notify their parents or carers to come and collect them. Any children/young people who have been ill should not return to the Centre until they have fully recovered, or until after the minimum exclusion period has expired (see table at the end of this policy).

First aid

The Centre's designated First Aider is **Gavin Fisher and Michelle Hulse** the Designated First Aider has a current first aid certificate and has attended a 12-hour paediatric first aid course, which complies with the requirements of **Annex A of the EYFS**. First aid training will be renewed every three years. To ensure that there is a qualified first aider present and available at all times when the Centre is running, other members of staff will also receive first aid training. We will take into account the number of children/young people and layout of the premises to ensure that first aiders are able to respond quickly to any incident.

The location of the first aid box and a list of qualified first aiders are clearly displayed on the display board in the reception and in the office. The designated First Aider regularly checks the contents of the first aid box to ensure that they are up to date, appropriate for children/young people and comply with the Health and Safety (First Aid) **Regulations 1981**.

The manager will ensure that a first aid kit is taken on all outings and that at least one member of staff on the outing holds a current paediatric first aid certificate.

Procedure for a minor injury or illness

The first aider at the session will decide upon the appropriate action to take if a child becomes ill or suffers a minor injury.

- If a child becomes ill during a session, the parent or carer will be asked to collect the child as soon as possible. The child will be kept comfortable and will be closely supervised while awaiting collection.
- If a child complains of illness which does not impair their overall wellbeing, the child will be monitored for the rest of the session, and the parent or carer will be notified when the child is collected.

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- If a child suffers a minor injury, first aid will be administered, and the child will be monitored for the remainder of the session. If necessary, the child's parent will be asked to collect the child as soon as possible.

Procedure for a major injury or serious illness

In the event of a child becoming seriously ill or suffering a major injury, the first aider at the session will decide whether the child needs to go straight to hospital or whether it is safe to wait for their parent or carer to arrive.

- If the child needs to go straight to hospital, we will call an ambulance and a member of staff will go to the hospital with the child. The staff member will take the child's **medical information** with them and will consent to any necessary treatment (as approved by the parents on the **medical Form** on Family).
- We will contact the child's parents or carers with all urgency, and if they are unavailable we will call the other emergency contacts that we have on file for the child.
- After a major incident the manager and staff will review the events and consider whether any changes need to be made to the Centre's policies or procedures. We will notify Ofsted and child protection agencies in the event of any serious accident or injury to a child in our care as soon as reasonably possible and within 14 days at the latest.
- We will notify HSE under RIDDOR in the case of a death or major injury on the premises (e.g. broken limb, amputation, dislocation, etc. – see the HSE website for a full list of reportable injuries).

Communicable diseases and conditions

If a case of head lice is found at the Centre, the child's parents or carers will be discreetly informed when they collect the child. Other parents will be warned to check their own children/young people for head lice, but care will be taken not to identify the child affected.

If an infectious or communicable disease is detected on the Centre's premises, we will inform parents and carers as soon as possible.

If there is an incident of food poisoning affecting two or more children/young people looked after at the Centre, the Manager will inform Ofsted as soon as possible and within 14 days at the latest.

If there is an outbreak of a notifiable disease at the Centre, we will inform the local health protection unit, HSE under RIDDOR (if appropriate), and Ofsted.

Useful contacts

Health Protection Unit: PHE Surrey and Sussex Health Protection Team (Southeast),
County Hall, Chart Way,
Horsham,
RH12 1XA

Ofsted: 0300 123 1231

RIDDOR Incident Contact Unit: 0845 300 99 23

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Minimum exclusion periods for infectious conditions and diseases

Disease/Condition	Exclusion period
Chicken Pox	Until all vesicles (spots) have crusted over
Cold Sores	None. Avoid contact with sores
Conjunctivitis	None
Covid-19 and Scarlet fever	See separate Covid-19 and Scarlet fever policy
Diphtheria*	Exclusion always necessary, consult local Health Protection Team
Diarrhoea and Vomiting	48 hours after last episode of diarrhoea or vomiting
Glandular Fever	None
Gastro-enteritis, E. Coli, Food Poisoning, Salmonella and Dysentery	48 hours after last episode of diarrhoea – further exclusion may be required for some children/young people
Hand, Foot and Mouth disease	None
Head lice	None- Treatment is only needed at home if live lice are seen
Hepatitis A*	Until 7 days after onset of jaundice
Hepatitis B* and C*	None
High temperature	24 hours
HIV/AIDS	None
Impetigo	Until lesions are crusted and healed, or 48 hours after starting antibiotic treatment
Influenza	Until recovered
Measles*	4 days from onset of rash
Meningitis*	Until recovered
Molluscum Contagiosum	None
Mumps*	5 days from onset of swollen glands
Pediculosis (lice)	None
Pertussis* (Whooping cough)	5 days from commencing antibiotic treatment or 21 days from the onset if antibiotics not given
Ringworm	Exclusion not usually required
Rubella* (German Measles)	4 days from onset of rash
Scabies	Until first treatment has been given
Scarlet fever*	24 hours after starting antibiotic treatment
Slapped Check, Fifth Disease	None (once rash has developed)
Threadworms	None

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Tonsillitis	None
Tuberculosis*	Consult local Health Protection Team
Typhoid*, Paratyphoid*	48 hours after last episode of diarrhoea – further exclusion may be required for some children/young people
Warts (including Verruca)	None. Verruca sufferers should keep feet covered
Whooping cough	48 hours after treatment with antibiotics or 21 days from onset of illness if no antibiotic treatment.

* Denotes a notifiable disease.

If in any doubt contact local health services for further information.

This policy was adopted by: Michelle Hulse	Date: 18/9/2025
To be reviewed: September 2026	Signed: