

## **Guide to Illnesses and Medication in Childcare**

### **Adelaide University Childcare Services Inc 2021**

This information is provided for families to support them in appropriate management of illnesses and medication for children attending childcare. The guide has used information from the Commonwealth Department of Health's *Staying Healthy in Childcare* (fifth edition updated 2013) and the Centre's own health and safety policies.

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#### **Information to give your doctor**

##### **Please ask your doctor to:**

- Schedule medication outside Centre hours whenever possible.
- Complete a medication plan if medication needs to be administered at the Centre.
- Be specific when writing instructions: '**As needed**' is **not** sufficient direction for staff. They need to know **exactly** when the medication is required and the **exact** dose.
- Nominate the simplest method of administration. For example oral or 'puffer' medication is much easier to administer than a nebuliser.

##### **Be aware that education and care staff:**

- Accept only medication that has been ordered by a doctor and is provided in the original, fully-labelled pharmacy container.
- Do not monitor the effects of a medication as they have no training to do this. Children must be kept at home for observation for 24 hours when they commence a new medication.

#### **Information to give your pharmacist**

##### **Please ensure that the pharmacist:**

- Dispenses medication appropriately, i.e. fully labelled on the original, pharmacy container (not the box) with the correct name, dosage and instructions for administration. Hand written edits will not be accepted nor will medication dispensed for another child.
- Please consider asking for an information sheet when medication is dispensed.

#### **Important information for parents**

- Any medication that children need to take at the Centre must be accompanied by a centre medication plan completed by a medical practitioner. Forms are available from the Centre or via the website at <https://www.adelaide.edu.au/childcare/health-information>
- If your child has a medical condition, or an allergy or intolerance that may require administration of medication at the Centre, you must obtain the appropriate medical management plans from the Centre and have these completed by a medical practitioner.
- The Centre does not maintain a supply of paracetamol or ibuprofen and does not administer paracetamol to children without a specific medication plan from the child's doctor.

#### **Managing common infections and illnesses**

The information on the reverse of this sheet is a guide to the most common infectious diseases and illnesses in young children. Parents should discuss any issues in respect to individual children with their doctor and the childcare staff at the time of the infection/illness.

#### **Exclusion periods**

- *Recommended exclusion periods are based on the time that a person with a specific disease or condition might be infectious to others.*
- *In some cases a doctor's clearance may be required.*
- *Recommended non-exclusion means that there is no significant risk to others. A child who is not excluded may still need to stay at home because they feel unwell.*
- *Children who require 1:1 attention should be kept at home.*

Thank you for your assistance and support in reducing the spread of infection and illness in our Centres.

**For up to date information about the management of COVID related symptoms please speak to your Centre Director**

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<b>Condition</b>	<b>Exclusion of cases</b>	<b>Exclusion of contacts</b>
<b>Chickenpox (Varicella)</b>	Exclude until all blisters have dried. This is usually for at least 5 days after the first rash appears in unimmunised children and less in immunised children	Exclude child with immune deficiency or receiving chemotherapy for their own protection. Otherwise no exclusion. Advise pregnant women to avoid contact
<b>Cold/ Bronchitis/ Bronchiolitis</b>	Exclude until well. Child requiring 1:1 attention should be kept at home.	Not excluded
<b>Conjunctivitis</b>	Exclude until discharge from eyes has ceased unless Dr has diagnosed non-infectious conjunctivitis.	Not excluded.
<b>Croup</b>	Exclude until child is feeling well.	Not excluded
<b>Cytomegalovirus (CMV)</b>	Exclusion not necessary	Pregnant women/women considering pregnancy to pay attention to hand hygiene after contact with body fluids
<b>Diarrhoea (Giardiasis Campylobacter, Rotavirus and salmonella included)</b>	Exclude until there has been no loose bowel motion or vomiting for 24 hours. If child develops lactose intolerance and ongoing loose bowels a doctor's certificate is required.	Not excluded
<b>Hand, Foot and Mouth disease</b>	Exclude until all blisters have dried.	Not excluded.
<b>Head lice</b>	Not excluded if effective treatment begins before the next day at the education and care service.	Not excluded
<b>Herpes (cold sores)</b>	Young children unable to comply with good hygiene practices should be excluded while lesion is weeping and/or if lesion cannot be covered.	Not excluded
<b>High temperature (39°C or above)</b>	Exclude until temperature is stabilised at normal level. Note: If a child has a temperature above 38°C and shows other signs of being unwell, time at home may reduce the length of their developing illness.	Not excluded
<b>Human Parvovirus (erythema infectiosum, fifth disease, slapped cheek syndrome)</b>	Exclusion not necessary	Not excluded
<b>Impetigo (School sores)</b>	Exclude until appropriate antibiotic treatment has commenced. Sores on exposed surfaces must be covered with a watertight dressing.	Not excluded
<b>Influenza and influenza like illnesses.</b>	Exclude until well.	Not excluded
<b>Measles</b>	Exclude for at least 4 days after rash appears. Immunised contacts not excluded.	Non immunised contact refer public health unit. Immunocompromised children exclude until 14 days after appearance of rash in last case
<b>Meningococcal infection</b>	Exclude until children complete a course of antibiotics	Not excluded
<b>Molluscum contagiosum</b>	Exclusion not required	Not excluded
<b>Mumps</b>	Excluded for 9 days after onset or until swelling goes down (whichever is sooner).	Not excluded
<b>Norovirus</b>	Exclude until there has not been a loose bowel motion or vomiting for 48 hrs.	Not excluded
<b>Pertussis (whooping cough)</b>	Exclude until 5 days after starting appropriate antibiotic treatment or 21 days after onset of coughing	Not excluded
<b>Ringworm, Scabies, pediculosis (lice)</b>	Exclude until the day after appropriate treatment has commenced.	Not excluded
<b>Roseola</b>	Exclusion not required	Not excluded
<b>Rubella (German measles)</b>	Exclude for at least 4 days after the onset of rash or until well.	Not excluded. Advise pregnant women to contact doctor
<b>Streptococcal throat and scarlet fever)</b>	Exclude until child has received anti-biotic treatment for 24 hours and child is well.	Not excluded
<b>Worms</b>	Exclude if loose bowel movements occurring. Exclusion not necessary if treatment has occurred	Not excluded