

Tocumwal Pre-School

SECTION: 2 – Children’s Health and Safety

POLICY NO: 2.5.1

POLICY: Managing a Child with Acute Fever

REVIEW DATE:

DATE OF APPROVAL:

Introduction

Centres have a *Duty of Care* to provide appropriate care to ensure the needs of all children and families are being met. Children can become ill or develop a fever quickly and subsequent treatment and medical attention must be administered swiftly. There is limited evidence that paracetamol is effective in lowering fever in a child compared to cooling the child and providing fluids. Fever generation may be a protective mechanism and reducing fever with pharmacological agents may be counterproductive to the body’s efforts to mount an immunological response to viral infection. Its use is more appropriate for reducing pain and discomfort in a child with acute fever or illness. Children can generally tolerate fever under 38.5°C. It is more important to ensure the child is not dehydrated.

Goals – What are we going to do?

The centre will facilitate effective care and health management of children who develop an acute fever whilst in care. In accordance with the Education and Care Services National Amended Regulations 2014, the centre will plan for and respond effectively to medical emergencies in the event of illness.

National Quality Framework Quality Area 2: Children’s Health and Safety

Standard 2.1 Each child’s health is promoted

- 2.1.1 Each child’s health needs are supported
- 2.1.3 Effective hygiene practices are promoted and implemented
- 2.1.4 Steps are taken to control the spread of infectious diseases and to manage injuries and illness, in accordance with recognised guidelines

Standard 2.3 Each child is protected

- 2.3.1 Children are adequately supervised at all times
- 2.3.3 Plans to effectively manage incidents and emergencies are developed in consultation with relevant authorities, practiced and implemented.

Strategies – How will it be done?

To ensure effective care of a child with a fever attending the Service, the following guidelines and expectations will be followed:

Key things to remember about fever:

- The normal temperature for a child is up to 38°C.
- Fevers are common in children.
- If the child seems well and is happy, there is no need to treat a fever.
- If the child is unhappy, treatment is needed to comfort them. Give clear fluids and, if the parents give permission, paracetamol.
- Watch the child and monitor how they are feeling.

Reducing the fever

It is usually not necessary to reduce a fever, because fever in itself is not harmful. However, medication is sometimes given to 'bring a fever down' because there is no doubt that fever can make a person feel miserable. Some studies show that giving medication to reduce the fever can actually slow down the body's immune response to infection.

- **Contact the parent, guardian or nominated person** in any case of a child being acutely ill or developing a sudden fever whilst in care, manage the situation as an emergency, and ask the parent or nominated person to collect the child as soon as possible. Advise them to take the child to their doctor, in accordance with Sections 2.2 and 2.3 in relation to managing an acutely ill child.
- **Ensure the child is well hydrated** by offering the child small frequent amounts of cool water to drink until the child is collected by their parent, guardian or nominated person.
- **Ensure an injury or acute illness incident report form is completed** for any situation where a child develops an acute illness or fever or requires emergency administration of medication.

- **Ensure Regulation and other Guidelines are adhered** to in respect of administering medication (See Section 2, Policy 2.5.0) and treatment in emergencies (See Section 2, Policies 2.8.1, 2.8.2, 2.9.0, 2.9.1, 2.9.2), particularly parental or guardian written consent (See Section 2, Policy 2.8.0 Authority for Emergency Treatment), and a Medication Authority Form (See Section 2, Appendix 4) has been completed and signed.
- **In any medical emergency involving a child with a fever**, the Centre should immediately **dial 000 for an ambulance**, in accordance with the Regulation and guidelines on emergency procedures **and administer first aid or emergency medical aid according to** the Centre's **First Aid Information and Contacts** (See Section 2, Policy 2.8.2), then notify the families (See Section 2, Policy 2.9.0)
- Do not worry about treating the fever itself—instead, focus your attention on the way the child looks and behaves, their level of alertness, and whether there are any other symptoms that indicate serious infection, such as vomiting, coughing or convulsions.
- If a child has a fever, ensure they are not overdressed.
- Avoid cold-water sponging or cold baths that make the child shiver. If sponging or bathing makes the child feel more comfortable, use lukewarm water.
- Do not allow the child to become cold. If the child becomes too cold, dress the child again

Managing a child at risk of a febrile convulsion

- If the centre is enrolling a child who is known to be at risk of a febrile convulsion or is known to have had a febrile convulsion in the past, the centre should follow the procedures outlined in See Section 2, Policy 2.3.3 Managing Children with a Chronic Medical Condition

Managing a child who has had a febrile convulsion while in care

- **In any medical emergency involving a child who has had or having a convulsion, (whether febrile or other)** the Centre should immediately **dial 000 for an ambulance**, in accordance with the Regulation and guidelines on emergency procedures **and administer first aid or emergency medical aid according to the child's Individual Chronic Medical Condition Management Plan**, or a doctor's

instructions, or if these are not available, use the Centre's **Emergency Febrile Convulsion Plan (See Section 2, Appendix 25)**, then notify the families (See Section 2, Policy 2.9.0)

Statutory Legislation

- *Work Health and Safety Act 2010*
- *National Quality Standard for Early Childhood Education and Care and School Age Care 2011*
- *Education and Care Services National Amended Regulations 2014, Regulations 85-87, 92-96, 168, 177-178, 181-184*

Sources

- *Staying Healthy Preventing Infectious Diseases in Early Childhood Education and Care Services, National Health and Medical Research Council, 5th Edition www.nhmrc.gov.au*
- *St John Ambulance of Australia, Febrile Convulsions Fact Sheet*
http://stjohn.org.au/assets/uploads/fact%20sheets/english/FS_febrileconvulsions.pdf
- *St John Ambulance of Australia, DRSABCD Action Plan*
<http://stjohn.org.au/assets/uploads/fact%20sheets/english/DRSABCD%20A4%20poster.pdf>