SICKNESS, ILLNESS, INFECTION PREVENTION & EXCLUSION POLICY

Applies to all children, families, employees, volunteers and visitors at Dots & Tots Day Nursery.

Policy Statement

At Dots & Tots Day Nursery, the health, safety and wellbeing of our children, families and staff is a priority.

We recognise that coughs, colds and minor childhood illnesses are an inevitable part of nursery life. Children do not need to remain at home for every runny nose or minor cough where they are otherwise well and able to participate comfortably in their normal nursery day.

However, young children play closely together, share resources and require intimate care including feeding, nappy changing, toileting and comforting. Infectious illnesses can therefore spread quickly through an early years environment.

Clear and consistently applied sickness procedures help protect children, families and staff, reduce the spread of infection and ensure sufficient healthy staff remain available to provide safe and appropriate care.

Parents/carers are informed of our sickness and exclusion procedures when registering their child and are expected to follow them throughout their child's time at Dots & Tots.

When a Child Should Not Attend Nursery

A child should not attend nursery where they:

• have diarrhea and/or vomiting; and the 48 hours following the last known incident

• have had three or more loose or watery stools which are unusual for that child;

• have a high temperature of 38°C or above and are unwell;

• are clearly unwell, distressed, unusually lethargic or unable to comfortably participate in their normal nursery day;

• have symptoms of an infectious illness requiring exclusion;

• have live head lice;

• have been advised by a healthcare professional or Health Protection Team not to attend;

• require a level of medical care or monitoring that cannot safely or reasonably be provided within the nursery environment without additional training or medical equipment; or

• have symptoms which management reasonably considers may pose an infection risk to other children or staff.

A child who has received Calpol/paracetamol or another medicine before nursery may still attend where they are otherwise well and the medicine has not been given simply to enable an unwell or feverish child to attend.

Parents must tell staff about any medication administered before arrival, including the medicine, dose and time it was given. A medicine form must then be complete with all relevant information including time and dosage.

Children Becoming Unwell at Nursery

Where a child becomes unwell during the nursery day, staff will assess their general wellbeing and, where appropriate, take and record their temperature.

The child will be kept comfortable, reassured and closely supervised by a familiar practitioner.

Parents/carers will be contacted where the child:

• develops a high temperature over 38°C;

• vomits;

• develops diarrhoea;

• has three loose/watery stools which are unusual for them;

• becomes significantly lethargic or distressed;

• develops symptoms of a potentially infectious illness;

• has live head lice identified;

• has a temperature and requires medicine to control this. Should the temperature not reduce within one hour of the first permitted dose of Calpol/paracetamol, continues to rise, or returns and requires a second dose then parents will be called again;

• is no longer well enough to comfortably participate in their normal nursery day.

Where collection is required, parents/carers are expected to arrange collection as soon as reasonably possible.

If a parent/carer cannot be contacted, the nursery will contact the child's authorised emergency contacts given by parents on admission documents. The child will remain appropriately supervised and cared for until collected.

Diarrhoea, Vomiting & Loose Stools

Children who have experienced vomiting or diarrhoea must remain away from nursery for a minimum of 48 hours after the last known episode of either vomiting or diarrhoea. If another episode of either occurs, the 48-hour exclusion period starts again from that most recent episode. The child must also be well enough to return.

Where a child experiences three loose or watery stools which are unusual for that individual child during a nursery day, their parent/carer will be contacted and they will be sent home.

Staff will consider the child's usual bowel pattern. Naturally loose stools in babies, for example, will not automatically be treated as diarrhoea.

Where diarrhoea is associated with a diagnosed infection such as E. coli, Cryptosporidium or another gastrointestinal infection, additional exclusion requirements or medical clearance may apply. Advice from the child's healthcare professional and/or Health Protection Team will be followed.

Temperatures, Fever & Calpol/Paracetamol

A temperature of 38°C or above is considered a high temperature in a child.

Where a child develops a temperature at nursery, staff will assess the whole child, rather than relying solely upon the thermometer reading. Consideration will be given to their behaviour, alertness, comfort, fluid intake, breathing, skin colour and any other symptoms.

Where prior written parental permission is held, children's paracetamol such as Calpol may be administered in accordance with:

• the manufacturer's instructions;

• the child's age and appropriate dosage;

• the required interval between doses;

• information provided by parents regarding previous doses; and

• the Dots & Tots Medication Policy.

All medication administered will be recorded and parents/carers informed.

Following the first dose

Following the first permitted dose of Calpol/paracetamol, staff will monitor the child and recheck and record their temperature within one hour. If their temperature has not reduced, continues to increase, or the child becomes more unwell at any point, parents/carers will be contacted and the child must be collected. If the temperature reduces and the child is otherwise well, they may remain at nursery with continued observation.

Second dose

If the child's temperature reduces after the first dose but rises again when a further dose is due, the nursery may administer one further dose, provided at least four hours have passed since the first dose and the child's age, product instructions, maximum daily dose, any doses given at home and parental consent permit this. The child's parent/carer must be contacted and asked to collect the child because a second dose has become necessary.

This will be the final dose of Calpol/paracetamol administered by nursery during that nursery day.

The child must be collected following the second dose, even if their temperature reduces. Staff will continue to monitor and care for the child while awaiting collection. If the child deteriorates or displays concerning symptoms, staff will seek urgent medical assistance as appropriate rather than waiting for the one-hour review or collection.

Medication will never be repeatedly administered simply to enable an unwell child to remain at nursery.

Head Lice

Head lice spread easily through close head-to-head contact, which is particularly difficult to avoid among young children.

Where live head lice are identified or strongly suspected at nursery, the child's parent/carer will be contacted and the child will be collected.

Before returning:

• an appropriate head-lice treatment must have been completed in full;

• the child's hair must have been thoroughly checked and combed;

• no live lice should remain; and

• parents/carers should remove eggs/nits as thoroughly as reasonably possible.

Where the treatment product requires a second treatment, this must be completed at the interval specified by the manufacturer to address any newly hatched lice.

Parents/carers should check other members of the household and treat anyone found to have live head lice.

If live lice are subsequently identified again, the child will be sent home again, regardless of how recently or how frequently they have previously experienced head lice. The same procedure applies on each occasion to help minimise transmission throughout the nursery. Staff are not permitted to treat headlice on any occasion.

Coughs, Colds & Respiratory Illness

Children with a mild cough, runny nose or sore throat may attend nursery where they:

• are otherwise well;

• do not have a high temperature; and

• are able to comfortably participate in their normal nursery activities.

A child should remain at home where respiratory symptoms are accompanied by a high temperature or they are significantly unwell.

Good respiratory hygiene will be encouraged, including catching coughs and sneezes in tissues, disposing of tissues immediately and washing hands.

Individual Infectious Illness & Exclusion Guide

Information about specific infectious illnesses, including their symptoms, exclusion periods and when children may return to nursery, is provided in the separate Dots & Tots Infectious Illness & Exclusion Guide. Staff and families should refer to that guide alongside this policy. The Nursery Manager will follow current UKHSA and local Health Protection Team advice where additional precautions or exclusion requirements apply.

Staff Sickness

Staff must not attend work where they are significantly unwell or their illness could present an unacceptable risk to children or colleagues.

Staff must inform the Nursery Manager as soon as possible where they:

• have diarrhoea or vomiting;

• develop a high temperature or significant infectious illness;

• are diagnosed with a contagious disease;

• are advised by a healthcare professional not to attend work; or

• believe their illness may pose a risk to children or colleagues.

Staff with minor coughs or colds may work where they are otherwise well enough to undertake their duties safely.

Staff must maintain high standards of hand and respiratory hygiene at all times.

Staff diarrhoea and vomiting

Staff who have experienced vomiting or diarrhoea must remain away from nursery for a minimum of 48 hours after the last known episode of either vomiting or diarrhoea. If another episode of either occurs, the 48-hour exclusion period starts again from that most recent episode. Staff must also be sufficiently recovered to safely undertake their role before returning. Staff members must ensure extended hand hygiene and general hygiene rules apply.

Staff involved in food preparation must additionally comply with applicable food-hygiene requirements.

Infection Prevention & Hygiene

All staff are responsible for maintaining effective infection-control procedures. These include:

• thorough handwashing with soap and warm water;

• handwashing following nappy changes and toileting;

• handwashing before handling or preparing food;

• encouraging children to wash their hands appropriately;

• using disposable gloves and aprons for appropriate personal-care tasks;

• cleaning changing areas following use;

• appropriate cleaning and disinfection of toys and frequently touched surfaces;

• safe disposal of nappies and bodily fluids;

• appropriate laundering of contaminated fabrics;

• cleaning bodily-fluid spillages promptly using appropriate products and procedures;

• ensuring good ventilation;

• encouraging respiratory hygiene; and

• increasing cleaning measures during outbreaks where appropriate.

Staff will model good hygiene practices and support children to develop increasing independence in caring for their own health and hygiene.

Parents' Responsibilities

Parents/carers are expected to:

• provide accurate information about their child's health;

• inform nursery of diagnosed infectious illnesses;

• keep children at home during required exclusion periods;

• collect promptly when contacted because their child is unwell;

• inform staff of medication given before nursery;

• follow treatment programmes where required;

• inform nursery where their child has been advised to remain away by a healthcare professional;

• keep emergency contact information current; and

• respect that exclusion decisions are made to protect the health and wellbeing of the wider nursery community.

Where parents disagree with an exclusion decision, this should be discussed with the Nursery Manager. However, a child who meets the nursery's exclusion criteria will not be permitted to remain at the setting.

Outbreaks of Infectious Illness

Where several linked cases of the same or similar illness occur, the Nursery Manager will assess whether this may constitute an outbreak.

The nursery may:

• increase cleaning and disinfection;

• temporarily remove difficult-to-clean shared resources;

• increase ventilation;

• reinforce handwashing and respiratory hygiene;

• inform families of increased illness within the setting while maintaining confidentiality;

• seek advice from the relevant Health Protection Team;

• follow any additional exclusion or infection-control measures advised; and

• maintain appropriate records.

• notify Ofsted or other relevant outside agencies for guidance and advice

Serious Illness & Emergency Medical Attention

Staff will seek urgent medical assistance where a child's condition causes serious concern.

999 will be called immediately where a child displays symptoms of a medical emergency, including but not limited to:

• serious difficulty breathing;

• loss of consciousness;

• a seizure requiring emergency intervention;

• signs of severe allergic reaction;

• significant deterioration;

• a non-blanching rash alongside signs of illness; or

• any other symptoms where staff believe emergency medical attention is required.

Parents/carers will be contacted immediately.

The child's safety will take priority and emergency treatment will not be delayed while waiting for a parent/carer to arrive.

Confidentiality & Informing Other Families

Where an infectious illness is identified within the nursery, other families may be informed where this is necessary to enable them to monitor their children or take appropriate precautions.

The affected child or member of staff will not be identified.

Additional information may be provided to families particularly where an infection could present increased risks to pregnant people, babies or individuals with weakened immune systems.

Returning to Nursery

Completing a specified exclusion period does not automatically mean that a child or staff member is well enough to return.

They should also be sufficiently recovered to participate safely and comfortably in the nursery day or undertake their normal duties.

Where there is uncertainty about whether an individual can safely return, the Nursery Manager may seek further advice from the relevant healthcare professional or Health Protection Team.

Where medical or public-health advice specifies a longer period than that contained within this policy, that advice will take precedence.

Monitoring & Review

This policy will be reviewed annually and sooner where:

- EYFS requirements change;
- UKHSA/public-health guidance changes;
- learning is identified following an outbreak or significant illness;
- nursery procedures change; or
- management identifies that additional infection-control measures are required.

The Nursery Manager is responsible for ensuring that staff understand and consistently implement this policy.

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Signed

Christie Patton

Company Owner