

Sickness and Illness

At **More2Nurseries** we promote the good health of all children attending. To help keep children healthy and minimise infection, we do not expect children to attend nursery if they are unwell. If a child is unwell it is in their best interest to be in a home environment rather than at nursery with their peers.

Understanding what a 'well child' is for nursery

This is the definition we use:

- A child who is happy and able to take part fully in nursery life
- A child who does not have a temperature
- A child who is not dependent on Calpol or other pain relieving medication for a short term illness
- A child who is not reliant on 1-1 care

Nursery Exclusion Periods as set out by Public Health England for the commonest childhood illnesses.

Illness	Length of Exclusion from nursery
Chicken Pox	At least 5 days, all lesions should be crusted over before child returns to nursery
Cold Sores	None
Conjunctivitis	None
Diarrhoea and Vomiting Illness	48 hours from last episode of diarrhoea or vomiting
Diphtheria	Exclusion essential until recovered
German Measles (rubella)	Six days from onset of rash
Glandular Fever	None
Headlice	None (but treatment or nit combing required to clear)
Hepatitis A	Exclude until seven days after onset of jaundice (or seven days after symptom onset if no jaundice)
Hand, Foot and Mouth	Children can return to nursery when they are feeling better
Headlice	None (but treatment or nit combing required to clear)
Hepatitis A	Exclude until seven days after onset of jaundice (or seven days after symptom onset if no jaundice)
Impetigo	Until lesions are crusted and healed, or 48 hours after commencing antibiotic treatment
Influenza	Until recovered
Meningococcal meningitis/septicaemia	Until recovered
MRSA	None
Mumps	Exclude child for five days after onset of swelling

Ringworm	Not usually needed but treatment required
Scabies	Child can return after first treatment
Scarlet Fever	Child can return 24 hours after commencing appropriate antibiotic treatment
Slapped Cheek	None
Threadworms	None
Tonsillitis	None
Whooping Cough	Five days from commencing antibiotic treatment

Our procedures

- In order to take appropriate action of children who become ill and to minimise the spread of infection we implement the following procedures:
- If a child becomes ill during the nursery day, we contact their parent(s) and ask them to pick up their child as soon as possible. During this time we care for the child in a quiet, calm area with their key person, wherever possible
- We follow the guidance given to us by Public Health England (formerly the Health Protection Agency) in Guidance on Infection Control in Schools and other Child Care Settings and advice from our local health protection unit on exclusion times for specific illnesses, e.g. sickness and diarrhoea, measles and chicken pox, to protect other children in the nursery.
- Should a child have a fever (a temperature over 38C), they should not go to nursery until **24 hours** after their temperature returns to normal and they are feeling better. This also includes not using calpol or other temperature lowering medicines for 24 hours (as they can mask illness).
- Should a child have an infectious disease, such as sickness and diarrhoea, they must not return to nursery until they have been clear for at least 48 hours. We notify Ofsted as soon as possible and in all cases within 14 days of the incident where we have any child or staff member with food poisoning. We inform all parents if there is a contagious infection identified in the nursery (ie chickenpox), to enable them to spot the early signs of this illness. We thoroughly clean and sterilise all equipment and resources that may have come into contact with a contagious child to reduce the spread of infection
- We exclude all children on antibiotics for the first 24 hours of the course due to possible adverse reaction (even if the medicine has been previously prescribed by a medical professional). It is also important that children are not subjected to the rigours of the nursery day, which requires socialising with other children and being part of a group setting, when they have first become ill and require a course of antibiotics
- We have the right to refuse admission to a child who is unwell. This decision will be taken by the manager on duty and is non-negotiable
- We make information/posters about head lice readily available and all parents are requested to regularly check their children's hair. If a parent finds that their child has head lice we would be grateful if they could inform the nursery so that other parents can be alerted to check their child's hair.

Meningitis procedure

If a parent informs the nursery that their child has meningitis, the nursery manager will contact the Infection Control (IC) Nurse for their area. The IC Nurse will give guidance

and support in each individual case. If parents do not inform the nursery, we will be contacted directly by the IC Nurse and the appropriate support will be given. We will follow all guidance given and notify any of the appropriate authorities including Ofsted if necessary.

Coronavirus procedure for anyone showing symptoms of Covid-19 (updated Nov 2022 in line with government and Dfe advice)

If you suspect your child has COVID-19 then a lateral flow test can be used (available from chemists). If a lateral flow test returns a positive result then the nursery should be informed. Anyone under the age of 18 with a positive COVID-19 test result is advised to stay at home and avoid contact with other people for three days after the day they took the test (when they are most infectious). They can then return to nursery without taking another test if they are well enough. For anyone over the age of 18 the advice is to stay at home for five days.

Transporting children to hospital procedure

The nursery manager/staff member must:

- Call for an ambulance immediately if the sickness is severe. DO NOT attempt to transport the sick child in your own vehicle
- Whilst waiting for the ambulance, contact the parent(s) and arrange to meet them at the hospital
- Redeploy staff if necessary to ensure there is adequate staff deployment to care for the remaining children. This may mean temporarily grouping the children together
- Arrange for the most appropriate member of staff to accompany the child taking with them any relevant information such as registration forms, relevant medication sheets, medication and the child's comforter
- Inform a member of the management team immediately
- Remain calm at all times. Children who witness an incident may well be affected by it and may need lots of cuddles and reassurance. Staff may also require additional support following the accident