

6.2 Sickness and Illness

EYFS: The Safeguarding and Welfare Requirements 3.45, 3.36, 3.47, 3.48

Policy Statement

At Hopes and Dreams Montessori Nursery, we promote the good health of all children attending. To help keep all children healthy and minimise infection, we cannot accept 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 with adults they know best rather than at nursery with their peers.

The EYFS States: The provider must promote the good health of children attending the setting. They must have a procedure, discussed with parents and/or carers, for responding to children who are ill or infectious, take necessary steps to prevent the spread of infection, and take appropriate action if children are ill. This is our legal requirement therefore we expect support from all parents on this.

The nursery follows the guidance provided by Public Health England (PHE) in Guidance on Infection Control in Schools and other childcare settings and advice from our local health protection unit on exclusion times for specific illnesses, e.g. sickness and diarrhoea, measles, and chicken pox. For others illnesses, we have created our own exclusion periods to protect other children at the nursery.

Procedures

- Staff and visitors are asked not to attend if they are unwell
- Parents are asked not to bring any child/children into the nursery who have an infectious disease or shows signs of the following:
- conjunctivitis
- vomiting and/or diarrhoea
- head lice
- fever

If a child becomes ill during the day, we contact the parents 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.

Conjunctivitis – We will inform parents after the first instance of having to clean their eyes to prepare them that if there is a second instance, the child will need to be collected.

Diarrhoea – We will inform parents after the second instance to prepare them that if there is a third instance, the child will need to be collected.

Vomiting – We require the child to be collected after one instance of vomiting. In saying this, staff will assess the situation to see if this is necessary, as we are aware that it might be from coughing, or drinking their milk too fast etc.

Fever – If a child's temperature reaches 37.8'c then we will undress the child and offer fluids. Staff will then monitor the child for up to 30 minutes prior to calling parents. We may call immediately if the temperature is extremely high.

* Please note that during Covid-19 or any such pandemic, any legal requirements made of us will override this policy.

Please see policy 6.3 Medication for further information

Please be aware that the nursery may call and to request that parents collect their child earlier than stated above if we already have other cases to try and reduce the spread of the infection.

Meningitis Procedure

If a parent informs the nursery that their child has meningitis, the nursery manager will contact the Local Area Infection Control (IC) Nurse. The IC Nurse will give guidance and support in each individual case. If parents do not inform the nursery, we may be contacted directly by the IC Nurse and the appropriate support given. We will follow all guidance given and notify any of the appropriate authorities including Ofsted where necessary.

Minimum Periods of Exclusion from the Nursery

If a child has been prescribed any medication for any reason, we require parents to keep the child at home for a minimum of 24 hours. This will ensure that your child does not suffer a reaction at the nursery, but also give the medication time to take effect.

The Management Team will only allow a child or staff member to return to the nursery if they are well enough in themselves – this decision is at their discretion and final.

You may be informed by your GP that there is no exclusion necessary for one or two of the illnesses listed below, but at Hopes and Dreams, the health and well-being of

all our children and staff is paramount, therefore we have specified the exclusion periods below into our policies and procedures as a course of best practice.

Following the Covid-19 pandemic, we have all learned that this list is not exhaustive, and the nursery staff retain the right to ask you to collect your child and be excluded for a period deemed necessary by the Nursery Management Team for illnesses or symptoms other than those listed below.

Disease / Illness	Minimal Exclusion Period	Comments
Raised Temperature for 3 days in a row	24 hours of no raised temperature.	Children who have been vaccinated within 10 days do not need to be excluded if they are well in themselves/
Chickenpox/Shingles	Until all lesions are crusted over, usually 5-7 days from appearance of rash.	Vulnerable Children Women /Pregnancy
Conjunctivitis	Been clear of any symptoms for at least 48 hours.	
Diarrhoea and/or vomiting	Been clear of any symptoms for at least 48 hours	
Flu (influenza)	Until fully recovered.	Vulnerable Children.
Gastroenteritis, food poisoning, Salmonellosis and dysentery and rota virus	Until authorised by doctor in writing.	
Glandular Fever	None if the child is well.	
Hand, foot, and mouth	Until all blisters have healed up.	
Head lice/Nits	12 hours from effective treatment.	
Hepatitis A **	7 days after the onset of jaundice or other symptoms.	Cleaning up body fluids spills.
Hepatitis B & C	None, if your child is well.	Cleaning up body fluids spills.
HIV/AIDS	None	Cleaning up body fluids spills.
Impetigo	Until lesions are crusted or healed or 48 hours from commencing antibi-oti	

Measles**	4 days from onset of rash if the child is well enough.	Vulnerable Children Women/Pregnancy.
Meningitis/ septicaemia**	Until fully recovered.	
Mumps**	5-7 days from onset of swollen glands.	
Ringworm	None, but treatment is required.	
Rubella (German Measles) **	6 days from appearance of rash.	Women/Pregnancy.
Scabies	Until treatment has commenced.	
Scarlet fever & streptococcal Infection of throat**	24 hours after commencing antibiotic treatment.	
Slapped Cheek (fifth disease)	None	Vulnerable Children Women/Pregnancy.
Threadworms	None, but treatment is required.	
Tuberculosis**	Until declared free from infection in writing by a doctor. Usually 2 weeks after commencing treatment.	
Typhoid fever	Until declared free from infection in writing by a doctor.	
Whooping cough (pertussis)**	5 days commencing antibiotic treatment or 21 days from onset of illness if no treatment taken.	
Glandular Fever	None if the child is well.	

**Denotes a notifiable disease.

Ofsted must be notified of any notifiable diseases as defined by the Health Protection Agency: PHE North East and North Central London Health Protection Team, Ground Floor South Wing, Fleetbank House 2-6 Salisbury Square, London, EC4Y 8JX Tel: **020 3837 7084** (option 1). Out of hours for health professionals only: 020 7191 1860.

Notifiable diseases, other than above are:

- Acute encephalitis
- Acute infectious hepatitis

- Acute meningitis
- Acute poliomyelitis
- Anthrax
- Botulism
- Brucellosis
- Cholera
- COVID-19
- Diphtheria
- Enteric fever (typhoid or paratyphoid fever)
- Food poisoning
- Haemolytic uraemic syndrome (HUS)
- Infectious bloody diarrhoea
- Legionnaires' disease
- Leprosy
- Malaria
- Plague
- Rabies
- Severe Acute Respiratory Syndrome (SARS)
- Smallpox
- Tetanus
- Tuberculosis
- Typhus
- Viral haemorrhagic fever (VHF)
- Yellow fever

Vulnerable Children

- Some medical conditions make children vulnerable to infections that would rarely be serious in most children. These include:
 - o Those being treated for leukaemia or other cancers
 - o Those on high dose of steroids
 - o Those with conditions that seriously reduce immunity.
- We ask parents to inform us if their child is in this category.
- These children are particularly vulnerable to chickenpox, shingles or measles and if exposed to any of these the key-person or manager will inform the parents immediately and may seek further medical advice.
- It may be advisable for these children to have additional immunisations e.g. Pneumococcal and influenza.

Female staff/Parents/Visitors - Pregnancy

- In general, if a pregnant woman develops a rash or is in direct contact with someone with potentially infectious rash this should be investigated by a doctor.
- If we get a case of the diseases listed below at the nursery, we advise pregnant staff to speak to their doctor.

- We will also ensure that we personally inform all parents/visitors that we know are pregnant as well as putting up a sign so that anyone who is pregnant but has not yet informed us can also seek medical advice.
- Chickenpox/shingles can affect pregnancy if a woman has not already had the infection. If exposed early in the pregnancy (first 20 weeks) or very late (last 3 weeks), the GP and antenatal care should be informed promptly, and a blood test should be done to check immunity.
- Rubella/German measles. If a pregnant woman comes into contact with rubella, she should inform her GP and antenatal carer immediately to ensure investigation. The infection may affect the developing baby if the woman is not immune and is exposed in early pregnancy. All female staff under the age of 25 years are encouraged to check their immunity.
- **Slapped Cheek Disease** can occasionally affect an unborn child. If exposed early in pregnancy, (before 20 weeks) inform Doctor and antenatal carer promptly as this must be investigated immediately.
- Measles during pregnancy can result in the early delivery or even loss of the baby. If a pregnant woman is exposed, immediately inform the Doctor and antenatal carer to ensure investigation. All female staff under the age of 25 years are encouraged to check their immunity.

Immunisations

We recognise, where possible, that children are vaccinated in accordance with their age. If children are not vaccinated, it is the responsibility of the parents to inform the nursery to ensure that children/staff/parents are not exposed to any unnecessary risks of any sort.

Parents need to be aware that some children attending the in the nursery will not be vaccinated. This may be due to their age, medical reasons or parental choice. The nursery does not discriminate against children who have not received their immunisations and will not disclose individual details to other parents.

Information regarding immunisations are recorded on the children's 'Get to Know Your Child' questionnaire at the point of the child starting at the nursery and will be updated as and when necessary.

If we need to transport a child to hospital, then we will follow the procedures laid out in policy **6.1 Accidents and First Aid**

Legal framework

• Early Years Foundation Stage

• Reporting of Notifiable Diseases

Reviewed: April 2022 Next review date: April 2023

Signed on behalf of the nursery: L. Thome Zyranska