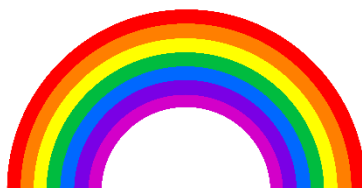


The Village Nursery Bellingdon Ltd



“Building a firm foundation”

Sick Child Policy

Please also see Safeguarding Children and Promoting Children’s Welfare Policy

At The Village Nursery Bellingdon we promote the good health of all children attending and take the necessary steps to prevent the spread of infection to other children and staff. 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 with parents rather than at nursery. It is the parents’ responsibility to ensure that their child does not attend nursery and put other children and staff at risk. Therefore, if a parent continually sends a sick or unwell child to nursery we will be forced to review the child’s place at The Village Nursery.

We will not admit any child onto the premises who appear to be suffering from an infectious or contagious illness or disease. We follow the guidance from the UK Health Security Agency, however do reserve the right to refuse/exclude children if they have an illness that is contagious and will have an impact on the well-being of the rest of the children and staff. This decision will be taken by the manager on duty and is non-negotiable.

<https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities>

Please do not bring children into nursery who are unwell as they will be sent home upon arrival. This includes children who have been given Calpol or other pain relieving medication prior to coming to nursery as this may mask the symptoms of an illness or infectious disease.

Procedures

In order to take appropriate action of children who become ill and to minimise the spread of infection we will implement the following procedures:

- If a child becomes ill during the nursery day, a member of staff will contact their parent(s) to inform them of their child’s illness and request that they pick up their child as soon as possible. It is parents responsibility to ensure that contact information is up to date at all times.
- The child will be cared for in a quiet, calm area. We follow the guidance given to us by Public Health England in Guidance on Infection Control in Schools and other Child Care Settings.
- 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.

- If the child has a temperature of 38 centigrade or above they must be collected as soon as possible. We can give Calpol; we will contact parents or carers first to gain verbal permission. A high temperature in a young child can be very serious and can lead to febrile convulsions. If a child who has a febrile convulsion whilst at nursery, an ambulance will be called and the procedures highlighted below will be followed.
- Children who have received vaccinations may attend nursery if they are well enough to do so, we will administer Calpol in these instances if temperature is slightly raised and below 38 centigrade. This does not apply to the chicken pox vaccine; this is not part of the routine vaccination program in the UK. **If your child receives the chicken pox vaccine they should stay away from nursery for two weeks following the first injection and five days after the second injection.** The chicken pox vaccine contains a small amount of live virus and in rare circumstances, it is possible to catch chickenpox, including severe chickenpox, from a person who has been vaccinated with VARIVAX. This may occur in persons who have not previously been vaccinated or have not had chickenpox, as well as persons who fall into one of the following categories: – individuals with a weakened immune system. – pregnant women who have never had chickenpox. – newborn babies whose mothers have never had chickenpox.
- Children who are teething may experience a slightly raised temperature which does not normally go over 38 centigrade. We will administer Calpol in these circumstances and the child may remain at nursery assuming that they are well enough to do so and have no other symptoms.
- We inform all parents if there is a contagious infection identified in the nursery, 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.
- Please keep children with colds at home, again to reduce the spread of infection; young children are not very good when it comes to personal hygiene.
- We exclude all children on antibiotics or other medication for the first 24 hours of the course as per Public Health England guidance (unless this is part of an ongoing care plan to treat individual medical conditions e.g. asthma and the child is not unwell). This is because it is 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.

Allergens

All parents will have completed the registration form highlighting the presence of any allergies. It is parents' responsibility to inform the nursery of any changes to their child's allergies and a care plan must be in place to manage an incident.

Piriton is kept on site in the case of an emergency and will be administered with consent from a parent.

Anaphylaxis is a medical emergency that may require resuscitation methods. An ambulance will always be called.

Transporting children to hospital procedure

Should the need arise, children may be transported to hospital via ambulance under the following procedures: An ambulance will be called immediately if the illness is severe. Whilst waiting for the ambulance, parents will be contacted and if necessary, arrangements made to meet at the hospital. Two members of staff will accompany the child and remaining staff will be redeployed if necessary to ensure there is adequate staff deployment to care for the

remaining children. This may mean temporarily grouping the children together. All relevant information such as registration forms, relevant medication sheets, accident form, medication and the child's comforter will be gathered.

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. We will always encourage privacy for the affected child to prevent any unnecessary distress to other children or staff.

Parents should let us know if their child has or has had an illness in order that we can perform the appropriate deep cleaning measures; different viruses and bacteria require different cleaning protocol.

Exclusion periods

Infection or symptom	Exclusion period	Comments
Anaesthetic	48 hours	
Athlete's foot	None	Children must keep shoes and socks on
Chicken pox	Until all blisters have crusted over	Pregnant staff to contact their midwife.
Cold	Whilst the child has a high temperature and until 24 hours medication free	The child must be well enough to cope with a session at nursery.
Cold sores	24 – 48 hours to prevent an outbreak	Avoid contact with the sores
Conjunctivitis	Until discharge has gone or from 48 hours following the start of antibiotic treatment	
Covid-19	Whilst testing positive	Children must NOT attend nursery if they are positive for covid-19. If a family member is positive, children should stay away from that family member, however, if this is unavoidable, parents should exercise caution when sending the child to nursery. It is the parents responsibility to be open and honest with the setting.
Diarrhoea and vomiting	Until 48 hours have passed following the last bout.	Additional exclusion may be required if Norovirus is suspected or E. Coli
Diphtheria	Essential.	UKHSA involvement
Flu or flu like illness	Until recovered	Outbreaks will be reported to Local HPT
Glandular fever	None	
Hand foot and mouth	Until all lesions have crusted over	NHS does not state that exclusion is necessary however we reserve the right to exclude due to the

		nature of the illness and it being highly contagious.
Head lice	Children can return once they have received treatment	
Hepatitis A	Until 7 days after the onset of jaundice or other symptoms	Local HPT involvement
Hepatitis B, C and HIV	None	These are blood borne viruses that are not infectious through casual contact.
High Temperature of 38 centigrade and above	Child must be free of high temperature without the use of Calpol or other medication for at least 24 hours	If we give a child Calpol at nursery they may return after 28 hours have passed assuming they have had no more medication in the meantime. We treat the first 4 hours as under the influence of the medication.
Impetigo	Until lesions have crusted over or 48 hours after onset of antibiotic treatment	Antibiotic treatment speeds healing and reduces the infectious period.
Measles	Once the rash has gone and if well enough	Pregnant staff to seek advice from midwife.
Meningococcal meningitis or septicaemia	Until recovered	Local HPT involvement
Meningitis due to other bacteria	Until recovered	UKHSA HPT involvement
MRSA	none	
Mumps	5 days after the onset of swelling	
Respiratory infections	Children should not attend if they have a high temperature or are unwell in themselves.	Children with mild symptoms such as a clear runny nose or lingering cough may continue to come to nursery assuming they are well in themselves.
Ringworm	Not usually required but 24-48 hours may be applied to prevent an outbreak	Treatment is needed
Rubella (German Measles)	5 days from onset of rash	Pregnant staff to contact midwife
Scabies	After first treatment	Household and close contacts will also require treatment
Scarlet fever	Until 24 hours after starting antibiotic treatment	Children not receiving treatment must be excluded until all symptoms have subsided. Contact UKHSA HPT if 2 or more cases.
Slapped cheek / Fifth disease	None (once rash has developed)	Pregnant staff to contact midwife

Threadworms	None after treatment	Treatment recommended for whole household
Tonsillitis	None	
Tuberculosis	2 weeks after the start of antibiotic treatment	Local HPT involvement for contact tracing
Warts and verrucae	None	Verrucae should must be covered
Whooping cough	2 days from the start of antibiotic treatment or 21 days from onset of symptoms if no antibiotics	Local HPT involvement for contact tracing

There are no exceptions to these exclusion periods and any parent attempting to return their child to nursery will be advised as such. If a parent persists and leaves their child within the exclusion period, the nursery will contact the HPT and Local Authority who will notify Social Services. By following these guidelines, parents are helping to prevent any outbreaks and cross infection.

This policy was adopted by the Village Nursery on 1st May 2025 and will be reviewed every 12 months.

Signed on behalf of the nursery

This policy was reviewed on: