



## **Infection Control Policy**

### **Purpose of Policy**

This policy is designed to ensure that a safe, healthy environment is maintained at Little Dreams Nursery. The nursery recognises that infections can spread quickly amongst children in a childcare environment; therefore, we will endeavour to ensure that infections are controlled, and good health and hygiene practices are maintained.

### **Who is Responsible?**

It is the responsibility of management to ensure that any children, parents/carers and members of staff who have a contagious illness are excluded from the nursery for the recommended period.

The Manager / Director / Supervisor has a responsibility to inform parents and carers when their child enters the setting with a contagious illness; they must also inform all parents if more than 10% of the children attending the setting have a contagious illness.

All members of staff have a responsibility to ensure that any children who arrive at the setting unwell, the child's parent or carer must speak to management / senior staff before a decision is made on whether the child should remain at nursery or go home.

All members of staff have a responsibility to ensure that they do not attend the session if they have an infectious illness, which will assist Little Dreams Nursery in preventing the spread of any infectious illness.

### **How the Policy will be Implemented**

Little Dreams Nursery aims to prevent the spread of infectious illnesses and infections by adhering to the following procedures:

- Excluding children with infectious illnesses and infections for the recommended period (please see the NHS Exclusion Guidelines for further information on this).
- Excluding all members of staff with infectious illnesses and infections for the recommended period (please see the NHS Exclusion Guidelines for further information on this).
- Identifying signs of illness in children and staff whilst they are in the setting
- Informing parents and carers of sick children that their children are ill and arranging for them to be collected at the earliest opportunity.
- Limiting the contact of sick children with other children until they can be collected from the setting, considering the sensitivity of the situation and that the child does not feel bad because of any action.
- Preventing the spread of infection by adhering to the setting's health and safety policy, personal hygiene policy and food safety policy and procedures.
- Reporting incidences of certain infections to other parents and members of staff whilst maintaining the anonymity of all children and members of staff involved.

The following are the types of infections that would be reported to parents and members of staff:

- Sickness/diarrhoea
- Head Lice
- Measles
- Chicken Pox
- Mumps
- Meningitis
- Whooping Cough

Highlight the importance to parents/carers that if their children have not been immunised, then they will be in a high-risk category if an infectious illness presents itself in the setting.

Parents/carers have the right to choose whether they will send their child to the setting. This is particularly relevant in cases of:

- Measles
- Mumps
- Rubella
- Whooping Cough

Monitoring of children and members of staff where there has been exclusion for signs of the same illness.

All cases of infectious illnesses are recorded in an illness form and are signed by the child's parent or carer on collection.

Members of staff who become unwell during working hours will immediately be sent home, and a relief member of staff will be called in to ensure ratios of staff and children are maintained.

#### **Dealing with Children who become unwell**

In accordance with setting registration guidelines, children will not be admitted into the setting if they are showing signs of any ailment that could be contagious or could affect the setting's ability to care for the child and the other children in attendance. Similarly, any member of staff who attends work showing signs of any ailment that could affect their ability to carry out their duties will be sent home, and a replacement member of staff will be called in to cover the minimum child-to-adult ratios.

Children who become unwell during the session will be made comfortable and will be cared for by a member of staff until their parent or carer can collect them. The dignity of the child will remain paramount, and the child will not be made to feel bad because of their illness, but the setting will put measures in place to ensure that the risk of the illness spreading is minimised.

In instances where any medication is administered as a form of treatment, such medication will be administered in accordance with the administration of medication policy and will only be administered with the express permission of the child's parent. All administration of medications will be recorded in the medicine administration form.

A child's parent or carer will be contacted upon a child becoming unwell and will be asked to come and collect the child or decide for the child to be collected as soon as possible. Where the parent or carer cannot be contacted, the setting will contact the child's emergency contact provided on the registration form. The person collecting the child will be asked to sign any records, for example, the illness form and the administration of medication form.

### **Exclusion Guidelines**

In cases where a child, parent or member of staff is known to have contracted a contagious illness or infection that could affect other children or staff, the nursery will implement the following exclusion guidelines:

- Any child who has an illness that results in a greater need for care than members of staff can provide and who may be placing other children at risk will be excluded until treatment has been received and the child is feeling better.
- Any member of staff who has an illness that affects their ability to carry out their duties and who may be placing children or other members of staff at risk will be excluded until treatment has been received and they are feeling better.
- Any child or member of staff showing signs of fever, lethargy, or difficulty breathing or any other manifestations of severe illness will be excluded until a diagnosis has been made, treatment received, and they are feeling better.
- Gastric upset: exclusion for 48 hours after the last attack of vomiting or diarrhoea.
- Rash with fever or behavioural change: exclusion until medical advice has been sought and a determination of further infection is made.
- Fever temperature above normal/Throat infections: exclusion until 24 hours after fever has gone down without the use of medication.
- Shingles: exclusion only if rash is weeping and cannot be covered.
- Impetigo: exclusion for at least 48 hours after treatment has been started or until lesions are crusted or healed.
- Head lice: exclusion until treatment has been given
- Ringworm: those who have the infection in an exposed area, such as the scalp and hands, will be excluded for 1 week and permitted to return only after treatment has commenced. Those who have the infection on an area of the body that can be covered with clothing can return within 24 hours of starting treatment. They should not share clothing or towels and wash their hands thoroughly after using the toilet and before eating.
- Threadworm: can return once treatment has been received.
- Hand, foot and mouth disease: exclusion for 24 hrs at the onset of rash, to monitor.
- Flu (Influenza): exclusion until clinically well
- Chicken Pox: exclusion until spots have crusted over, usually 5 - 7 days
- German measles (Rubella): exclusion for 7 days before rash and 7 days after onset of rash.
- Mumps: exclusion for 5 days after (the most notable symptom is swelling of the glands)
- Whooping Cough: exclusion for 48 hours after starting antibiotic treatments, or 21 days from onset of illness if no antibiotic treatment.
- Meningitis: exclusion until clinically well
- Conjunctivitis: if weepy exclusion for the initial 24 hrs unless an outbreak of cases or clusters occurs. Then exclusion will be guided by the NHS.

All infectious illnesses must be reported to the Manager / Director / Supervisor, who will advise of any exclusion period and make the decision to inform other parents/carers and staff members. In certain circumstances, the Care Inspectorate Officer for the setting may also be informed.