



On arrival at Junior's Day Nursery, it is essential for parents to notify staff about their child's state of health, whether the child is suffering or has recently suffered from any illness, has had a loose motion, an above normal temperature or has been vomiting.

Junior's Day Nursery gives regard to the Health Protection Agency guidance on infection control and seek advice from them if necessary. Any notifiable illness will be reported to the HPA. Any serious illness will be reported to Ofsted.

Children should not be left at nursery if they are unwell. If a child is unwell then they will prefer to be at home with their parent(s) rather than at nursery with their peers. We will follow these procedures to ensure the welfare of all children within the nursery:

- Should a child have or develop a temperature of more than 38.c (a fever,) then the child should be sent home immediately and not return for at least 48hours from when the child last had a fever (temperature of more the 38c).
- If a child becomes ill during the nursery day, their parent(s) will be contacted and asked to pick their child up as soon as possible. During this time the child will be cared for in a quiet, calm area with a familiar member of staff.
- Should a child have an infectious disease, such as an diagnosed infection or sickness and diarrhoea, they should not return to nursery until they have been clear for at least 48 hours.
- It is vital that we follow the advice given to us by our registering authority and exclude specific contagious conditions, e.g. sickness and diarrhoea, conjunctivitis and chicken pox or any other such conditions to protect other children in the nursery. Illnesses of this nature are very contagious, and it is exceedingly unfair to expose other children to the risk of an infection.
- If a contagious infection is identified in the nursery, parents will be informed to enable them to spot the early signs of this illness. All equipment and resources that may have come into contact with a contagious child will be cleaned and sterilised thoroughly to reduce the spread of infection.
- Children that have been prescribed antibiotics should be excluded from the nursery for a minimum of 48 hours allowing for recovery for the child and any reactions to the medication to become known.
- The nursery has the right to refuse admission to a child who is unwell. This decision will be taken by the manager or deputy on duty and is non-negotiable.
- 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 and treat them.
- If you have administered any pain-relieving medications such as Calpol or Ibuprofen for any other reason than a temperature they must remain away from nursery for 24hours.

## **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 and Ofsted. 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.

If a staff member observes a rash and symptoms of suspected meningitis the manager should be informed, and an ambulance called. The Hospitalisation Policy is to be followed.

## PROCEDURE FOR CHILDREN WHO ARE SICK OR INFECTIOUS

- If children appear unwell during the day – for example, if they have a temperature, sickness, diarrhoea or pains, particularly in the head or stomach – the nursery manager will call the parents and ask them to collect the child, or to send a known carer to collect the child on their behalf. Unwell children should not attend nursery.
- If a child has a temperature, they are closely monitored and temperature rechecked and recorded on regular interval until parents are able to collect
- The child's temperature is taken using a forehead/inner ear thermometer, kept within the nursery.
- If the child's temperature does not go down and is worryingly high, then Junior's Day Nursery may give them Calpol or another similar analgesic, after first obtaining verbal consent from the parent where possible. This is to reduce the risk of febrile convulsions, particularly for babies. Parents sign the medication record when they collect their child.
- In extreme cases of emergency, an ambulance is called and the parent informed.
- Parents may be asked to take their child to the doctor before returning them to the setting; Junior's Day Nursery can refuse admittance to children who have a temperature, sickness and diarrhoea or a contagious infection or disease. Junior's Day Nursery reserve the right to request a letter from a GP before allowing a child to return to nursery.
- Some activities, such as sand and water play, and self-serve snacks where there is a risk of cross-contamination may be suspended for the duration of any outbreak.
- All equipment and resources that have come in to contact with an infectious child will be cleaned thoroughly to reduce the spread of infection. Please refer to Infection Control section in the Health and Safety policy for more information.
- If a contagious infection has been identified in the nursery, parents will be notified and informed of early signs of the illness.
- Junior's Day Nursery have a list of excludable diseases and current exclusion times. The list (non-exhaustive) is based on advice from the Health Protection Agency [www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities](http://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities) and includes common childhood illnesses such as measles.

### MINIMUM TIME CHILDREN SHOULD BE AWAY FROM NURSERY DUE TO ILLNESS:

Junior's Day Nursery must be informed if a child has a contagious disease/illness in order to prevent the illness spreading. This information will be treated sensitively and in a confidential manner.

Junior's Day Nursery gives regard to the 'Guidance on infection control in schools and other childcare settings' to prevent the spread of the infection. Please see the separate sheet on Exclusion for Illnesses.

<b>Prescribed antibiotics</b>	The child must remain at home for the first <b>48 hours</b> after first dose of antibiotics has been given. The child can return once they are well again.
<b>Temperature</b>	Children should not return until they are well, and <b>48 hours</b> after their last temperature. A temperature is considered to be anything over 38°.
<b>Vomiting and Diarrhoea</b>	Child must be kept away from nursery for <b>48 hours</b> after the last bout of vomiting or diarrhoea.
<b>Pain relieving medication- Calpol (paracetamol), Ibuprofen</b>	The child must remain away from nursery for at least <b>24 hours</b> following any pain relieving medication.

<b>Teething</b>	Staff are happy administer teething gels or powders. If your child requires pain relieving medication please refer to the guidance above.
<b>Tonsillitis</b>	Minimum <b>48 hours</b> after antibiotics.
<b>Covid 19</b>	Please refer to current guidelines.
<b>Chickenpox</b>	The child must remain away from nursery for at least 5 day and until <b>all</b> spots have scabbed over.
<b>Gastro-enteritis, food poisoning, salmonellosis and dysentery</b>	Until authorised by a doctor.
<b>Measles</b>	Five to seven days from onset of rash.
<b>Mumps</b>	Until all swelling has gone, approximately 5 days.
<b>Pertussis</b> (whooping cough)	5 days from starting antibiotic treatment. 21 days from onset of paroxysmal cough if no antibiotic treatment given.
<b>Rubella</b> (German measles)	Four days from appearance of rash.
<b>Thread worm</b>	Until treated.
<b>Impetigo</b>	Until skin has completely healed.
<b>Head lice</b>	Please treat before attending nursery.
<b>Ring worm</b>	Until treated.
<b>Hand, Foot and Mouth</b>	If the child is unwell and in discomfort please do not bring into nursery.
<b>Scarlet Fever</b>	At least <b>48 hours</b> after starting antibiotics.

#### REPORTING OF 'NOTIFIABLE DISEASES'

- Junior's Day Nursery must be informed if a child has a contagious disease/illness in order to prevent the illness spreading however such information will be treated sensitively and in a confidential manner.
- If a child or adult is diagnosed as suffering from a notifiable disease under the Health Protection (Notification) Regulations 2010, the GP will report this to Public Health England.
- When Junior's Day Nursery become aware, or are formally informed of the notifiable disease, the nursery manager informs Ofsted and contacts Public Health England, and act[s] on any advice given.

#### HIV/AIDS/HEPATITIS PROCEDURE

HIV virus, like other viruses such as Hepatitis A, B and C, are spread through body fluids. Hygiene precautions for dealing with body fluids are the same for all children and adults. At Junior's we:

- Wear single-use vinyl gloves and aprons when changing children's nappies, pants and clothing that are soiled with blood, urine, faeces or vomit.
- Bag soiled clothing for parents to take home for cleaning.
- Clear spills of blood, urine, faeces or vomit using mild disinfectant solution and mops; any cloths used are disposed of with the clinical waste.
- Clean any tables and other furniture, furnishings or toys affected by blood, urine, faeces or vomit using a disinfectant.

## **NITS AND HEAD LICE**

- Nits and head lice are not an excludable condition but we do ask parents to ensure treatment has been given before the child returns to nursery. In exceptional cases Junior's Day Nursery may ask a parent to keep the child away until the infestation has cleared.
- On identifying cases of head lice, Junior's Day Nursery inform all parents and ask them to treat their child and all the family if they are found to have head lice.
- If parents identifies a case of head lice, we ask parents to inform the nursery so that other parents can be alerted to check and treat their child's hair.

## **PROCEDURES FOR CHILDREN WITH ALLERGIES**

At Junior's Day Nursery we are aware that children can have allergies which may cause severe allergic reactions. We will follow this policy to ensure allergic reactions are minimised or where possible prevented and staff are fully trained and aware of how to support a child who may be having an allergic reaction.

- When children start, Junior's Day Nursery ask their parents if their child suffers from any known allergies. This is recorded on the Registration Form. Parents will then be asked to fill out an Allergy risk assessment with staff. All staff are then made aware of children with allergies starting nursery and children are added to the allergy list which is displayed in the kitchen and classrooms.
- We encourage parents to notify the nursery immediately when they become aware that their child has developed an allergy or intolerance.
- If a child has an allergy, Junior's Day Nursery complete a risk assessment form to detail the following:
  1. The allergen (i.e. the substance, material or living creature the child is allergic to such as nuts, eggs, bee stings, cats etc).
  2. The nature of the allergic reactions (e.g. anaphylactic shock reaction, including rash, reddening of skin, swelling, breathing problems etc).
  3. What to do in case of allergic reactions, any medication used and how it is to be used (e.g. EpiPen).
  4. Control measures - such as how the child can be prevented from contact with the allergen.
  5. Review measures.
- This risk assessment form is kept in the child's personal file and a copy is displayed where staff can see it.
- A health care plan will also be completed.
- Staff who are first aid trained are aware of the signs and symptoms of a possible allergic reaction in case of an unknown or first reaction in a child. These may include a rash or hives, nausea, stomach pain, diarrhoea, itchy skin, runny eyes, shortness of breath, chest pain, swelling of the mouth or tongue, swelling to the airways to the lungs, wheezing and anaphylaxis.
- The manager, nursery cook and parents will work together to ensure a child with specific food allergies does not receive food at nursery that may harm them. This may include designing an appropriate menu or substituting specific meals on the current nursery menu.
- Parent should be aware that all food is prepared in the same kitchen. All food prepared for a child with a specific food allergy will be prepared in an area where there is minimum chance of cross contamination and served on equipment that has not been in contact with this specific food type, e.g. nuts. If this cannot be guaranteed the parent must supply the food.
- Place mats with allergy info are used at all mealtimes to support staff in ensuring children with food allergies are only given safe foods.
- Generally, no nuts or nut products are used within the setting. Parents are made aware so that no nut or nut products are accidentally brought in, for example to a party.
- If a child has an allergic reaction e.g. to food, a bee sting, plant etc. a first aid trained member of staff will act quickly and administer the appropriate treatment. Parents must be informed immediately and it must be recorded in the incident book. All incidents will be recorded, shared and signed by parents at the earliest opportunity.

- If this reaction requires specialist treatment, e.g. an epipen, then at least two members of staff working directly with the child and the manager will receive specific medical training to be able to administer the treatment on an individual basis.
- Parent's permission is requested prior to the child starting nursery should the need arise to administer liquid antihistamine in an emergency.
- If a child is unwell as a result of an allergic reaction, they need to be cared for at home returning to nursery when they are well enough.
- If a child suffers a severe allergic reaction a member of staff will summon an ambulance immediately and the Hospitalisation procedure will be followed.

### **HOSPITALISATION**

In an emergency, if a child is taken to hospital the following procedure will apply:

- Parent/emergency contacts informed immediately. In the event a parent/carer is unable to arrive in time/has not been contactable, a senior member of staff will accompany the child in the ambulance and stay with the child until the parent/carer is present.
- The senior member of staff will take with them the child's file including any medical/health/allergy information on record.
- In the event the parent/carer is unable to immediately reach the hospital, the member of staff will be in contact with the parent and a discussion will take place on what treatment they will/will not allow.

### **INSURANCE REQUIREMENTS FOR CHILDREN WITH ALLERGIES AND DISABILITIES**

- If necessary, our insurance will include children with any disability or allergy, but certain procedures must be strictly adhered to as set out below. For children suffering life threatening conditions, or requiring invasive treatments; written confirmation from our insurance provider may be obtained to extend the insurance.
- At all times Junior's Day Nursery ensure that the administration of medication is compliant with the Safeguarding and Welfare Requirements of the Early Years Foundation Stage.
- Oral medication:  
Asthma inhalers are now regarded as 'oral medication' by insurers and so documents do not need to be forwarded to our insurance provider. Oral medications must be prescribed by a GP or have manufacturer's instructions clearly written on them.

Junior's Day Nursery must be provided with clear written instructions on how to administer such medication. Junior's Day Nursery adhere to all risk assessment procedures for the correct storage and administration of the medication.

Junior's Day Nursery must have the parents or guardians prior written consent. This consent must be kept on file. It is not necessary to forward documents to our insurance provider.

- Life-saving medication and invasive treatments:  
These include adrenaline injections (Epipens) for anaphylactic shock reactions (caused by allergies to nuts, eggs etc) or invasive treatments such as rectal administration of Diazepam (for epilepsy).

#### **Junior's Day Nursery must have:**

a letter/care plan from the child's GP/consultant stating the child's condition and what medication if any is to be administered;

written consent from the parent or guardian allowing staff to administer medication; and proof of training in the administration of such medication by the child's GP, a district nurse, children's nurse specialist or a community paediatric nurse.

Written confirmation that Junior's Day Nursery hold this information will first be sent to our insurance providers. Written confirmation that the insurance has been extended be issued by return.

- Treatments, such as inhalers or Epipens are immediately accessible in an emergency.
- Key person for special needs children requiring assistance with tubes to help them with everyday living e.g. breathing apparatus, to take nourishment, colostomy bags etc.:

Prior written consent must be obtained from the child's parent or guardian to give treatment and/or medication prescribed by the child's GP.

The key person must have the relevant medical training/experience, which may include receiving appropriate instructions from parents or guardians.

- If staff unsure about any aspect, Junior's Day Nursery contact the insurance provider for advice.

THIS POLICY WAS UPDATED ON:	SIGNED ON BEHALF OF THE NURSERY
28/02/2022	Management team