



St. Thomas a Becket Nursery School
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Registered Charity No. 1097448

Sick Children (and Staff) inc notifiable diseases

Responsibility: Nursery Manager
Review Cycle: Every three years

Date of adoption / last review:	Signed / Role	Date of next review:
May 2019	C Harrison, Nursery Lead	May 2022
May 2022	C Harrison, Nursery Lead	May 2025

St Thomas a Becket Nursery
Sick Children (and Staff) – including Notifiable Diseases Policy

Policy Statement

In the interests of all who attend the Nursery, children and staff who are unwell should be kept at home.

Young children who display symptoms such as stomach-ache, head ache or being generally 'out of sorts' can deteriorate rapidly, so a child who appears only mildly unwell (but wants to come to the Nursery) should wherever possible remain at home to reduce the risk of infection to other children and adults.

We reserve the right to refuse admittance to any child we consider not well enough to attend the Nursery.

Staff who may pose a risk of infection to others should not come to work at the nursery, as per the Public Health England Guidance. For further information, please refer to the *Absence from Work Guidance* for staff

The EYFS states:

Health -

3.45. The provider must promote the good health, including the oral 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 ⁵⁴.

54 Guidance on health protection in schools and other childcare facilities which sets out when and for how long children need to be excluded from settings, when treatment/medication is required and where to get further advice can be found at <https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities>

Sick child procedure

Parents should notify the Nursery on the morning of their child's nursery session if their child will not be attending nursery due to illness.

Parents should notify the Nursery if their child has an infectious illness such as Chicken Pox, Measles, etc. Exclusion periods for these illnesses will be in accordance with Public Health guidelines. Children should also be excluded for certain skin infections and we are required by law to report notifiable diseases to the relevant authorities. Details of exclusion periods and notifiable diseases are attached and a copy is displayed within the nursery setting.

Children and Staff who have diarrhoea or have been vomiting should not return to the nursery until **48 hours** after the last attack.

Whilst their child is attending the nursery, parents must ensure that they, or another carer, can be contacted in case of emergency. Parents must notify the nursery of any change in the

child's registration details relating to contact numbers and medical history. The Nursery will hold details of the child's General Practitioner and Health Visitor.

If a child becomes ill during the session, we will follow these procedures:

Any member of staff who suspects a child is unwell or contagious will report their concerns to a senior member of staff.

Where possible, the child will be taken to a quiet area (away from the main group) and made comfortable. A member of staff will be appointed to care for the child and a first aider notified.

The child's medical records will be checked and, where appropriate, acted upon.

Staff will attempt to contact the child's parents. If a parent cannot be reached, the child's emergency contacts will be called. A message should be left on the parent's answerphone to advise them of the action taken.

If neither a parent nor emergency contact can be reached, the child will be cared for by the appointed member of staff until the end of the session.

The child will be regularly checked for any deterioration in their condition.

If nursery become seriously concerned about the child, medical advice will be sought and, if necessary, the child will be transported to hospital.

A copy of the child's records must be taken to the hospital to enable medical staff to deal with any recorded conditions and to enable Nursery staff to keep in contact with the child's parents.

A record will be kept of the child's symptoms and our actions, including regular checks on the child and the time each action was taken.

Administration of Prescribed Drugs - Please refer to the nursery *Administration of Medicine Policy* for full detail

Medicine (including inhalers and creams) may only be administered with written permission from a parent/carer. Only prescribed medication can be administered under these conditions. The parent/carer must complete the medication form in the red medical file. The member of staff administering the medication must complete and sign the relevant sheet in the same file. Some medication may need to be kept in the refrigerator.

Notifiable Diseases

The link below provides us with public health exclusions type and indicate us with guidance, including the time period an individual should not attend a setting to reduce the risk of transmission during the infectious stage. ***Denotes a notifiable disease.** Registered medical practitioners in England and Wales have a statutory duty to notify their local authority or UKHSA health protection team of suspected cases of certain infectious diseases.

<https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/chapter-3-public-health-management-of-specific-infectious-diseases>

For a full list of illnesses / diseases covered by this government guidance, please see the list below. For ease, the more common diseases and exclusion times are shown below:

***Denotes a notifiable disease**

Infection	Exclusion period	Comments
Chickenpox	At least 5 days from onset of rash and until all blisters have crusted over	Pregnant staff contacts should consult with their GP or midwife
Conjunctivitis	None	If an outbreak or cluster occurs, consult your local health protection team (HPT)
Respiratory infections including coronavirus (COVID-19)	Children and young people should not attend if they have a high temperature and are unwell Children and young people who have a positive test result for COVID-19 should not attend the setting for 3 days after the day of the test	Children with mild symptoms such as runny nose, and headache who are otherwise well can continue to attend their setting.
Diarrhoea and vomiting	Staff and students can return 48 hours after diarrhoea and vomiting have stopped	If a particular cause of the diarrhoea and vomiting is identified there may be additional exclusion advice for example E. coli STEC and hep A For more information see chapter 3
Flu (influenza) or influenza like illness	Until recovered	Report outbreaks to your local HPT For more information see chapter 3
Head lice	None	
Measles	4 days from onset of rash and well enough	Preventable by vaccination with 2 doses of MMR Promote MMR for all pupils and staff. Pregnant staff contacts should seek prompt advice from their GP or midwife
Meningococcal meningitis* or septicaemia*	Until recovered	Meningitis ACWY and B are preventable by vaccination. Your local HPT will advise on any action needed
Meningitis* due to other bacteria	Until recovered	Hib and pneumococcal meningitis are preventable by vaccination. Your UKHSA HPT will advise on any action needed
Meningitis viral	None	Milder illness than bacterial meningitis. Siblings and other close contacts of a case need not be excluded
Mumps*	5 days after onset of swelling	Preventable by vaccination with 2 doses of MMR. Promote MMR for all pupils and staff
Rubella* (German measles)	5 days from onset of rash	Preventable by vaccination with 2 doses of MMR. Promote MMR for all pupils and staff. Pregnant staff contacts should seek prompt advice from their GP or midwife

Scarlet fever*	Exclude until 24 hours after starting antibiotic treatment	A person is infectious for 2 to 3 weeks if antibiotics are not administered. In the event of 2 or more suspected cases, please contact your UKHSA HPT
Tonsillitis	None	There are many causes, but most cases are due to viruses and do not need or respond to an antibiotic treatment
Whooping cough (pertussis)*	2 days from starting antibiotic treatment, or 21 days from onset of symptoms if no antibiotics	Preventable by vaccination. After treatment, non-infectious coughing may continue for many weeks. Your local HPT will organise any contact tracing

Full list at website provides information for:

Athlete's Foot (Tinea Pedis)
 Chickenpox (Varicella) and shingles
 Cold sores
 Conjunctivitis
 Cryptosporidiosis
 Diarrhoea and vomiting (gastroenteritis)
 E. coli STEC (Shiga Toxin-producing E.Coli)
 Food poisoning
 Giardia
 Glandular fever
 Hand, foot and mouth disease
 Head lice
 Hepatitis A
 Hepatitis B
 Hepatitis C
 Impetigo
 Influenza
 Measles
 Meningitis
 Meningococcal meningitis and septicaemia
 Methicillin Resistant Staphylococcus Aureus (MRSA)
 Mumps
 Panton-Valentine Leukocidin Staphylococcus aureus (PVL-SA)
 Respiratory infections, including coronavirus (COVID-19)
 Ringworm
 Rotavirus
 Rubella (German measles)
 Scabies
 Scarlet Fever
 Slapped cheek syndrome (parvovirus B19)
 Threadworm
 Tuberculosis (TB)
 Typhoid and Paratyphoid fever
 Whooping cough (pertussis)