



Illness or Infection Policy and Procedure

"Providers 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."

Statutory Framework for the EYFS 2017 (3.44)

To meet the requirements of the Early Years Foundation Stage and the Childcare Register I must:

- ✓ Notifying Ofsted of any food poisoning affecting two or more children or any serious illness of any child whilst in my care; and details of the action taken.
- ✓ Notification must be made as soon as is reasonably practicable, but in any event within 14 days of the incident occurring.
- ✓ Following the guidance on infection control in schools and childcare settings - parents/carers can obtain a copy of the guidance by visiting:
www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities

In particular:

1. I cannot accept your child into my setting should they have experienced diarrhoea and/or vomiting within the last 48 hours.
2. I will adhere to the recommended period your child is to be kept away from my setting to avoid the spread of infection.
 - ✓ Informing Public Health England (PHE) Health Protection Team (South East) on **0344 225 3861** if I suspect an outbreak of an infectious disease.
 - ✓ Following the guidelines 'Avoiding infection on farm visits', please see the link below: <https://www.gov.uk/government/publications/farm-visits-avoiding-infection>
 - ✓ Implementing good hygiene practice to avoid the spread of infection following the guidance below:
 1. **Hand washing** is one of the most important ways of controlling the spread of infections, especially those that cause diarrhoea and vomiting, and respiratory disease. The recommended method is the use of liquid soap, warm water and paper

towels. We always wash hands after using the toilet, before eating or handling food, and after handling animals. Cuts and abrasions are covered with waterproof dressings.

2. **Coughing and sneezing** easily spread infections. Children and adults are encouraged to cover their mouth and nose with a tissue, wash hands after using or disposing of tissues.

3. **Personal protective equipment (PPE)**. Disposable gloves and disposable plastic aprons will be worn where there is a risk of splashing or contamination with blood/body fluids (for example, nappy changing). Spillages of blood, faeces, saliva, vomit, nasal and eye discharges will be cleaned up immediately using a product that combines both a detergent and a disinfectant, ensuring it is effective against bacteria and viruses and suitable for use on the affected surface. Personal protective equipment will be worn to avoid infection.

4. **Cleaning** of the environment, including toys and equipment is done on a regular basis.

5. **Laundry** - soiled linen will be washed separately at the hottest wash the fabric will tolerate. I will ensure I wear personal protective equipment when handling soiled linen. Children's soiled clothing will be bagged to be taken home.

6. **Sleeping** - Ensure children have access to their own bedding, bed/cot. Avoid putting young children to sleep on the sofa. Please refer to safe sleep risk factors.

7. **Animals** - Animals may carry infections, so take steps to wash hands after handling animals. I ensure animals' living quarters are kept clean and away from food areas. Waste is disposed of regularly, and litter boxes are not accessible to children. The children will not play with animals unsupervised. **(Refer to Pet Risk Assessment)**

8. **Immunisations** - immunisation status will be recorded at entry into the setting, and parents/carers asked to keep me informed of further vaccinations the child may have. Parents/carers will be encouraged to have their child immunised and any immunisation missed or further catch up doses organised through the child's GP.

9. **Meningitis** - I will make myself aware of Meningitis signs and symptoms, which are available from <http://www.meningitis.org/symptoms>

In the event of a child becoming ill I will take the following steps:

1. Ensure parents/carers have provided prior written permission to *seek* emergency medical assistance, treatment or advice should their child fall ill whilst in my care. Please note I cannot give permission for medical treatment to go ahead. I therefore need to ensure that I have parents/carers up-to-

date contact details at all times. In a 'life or death' situation, medical staff will give any necessary treatment if I am unable to contact parents/carers.

2. Parents/carers to advise me if their child is feeling unwell or has been unwell within the last forty-eight hours, before the child is dropped off.
3. Informing parents/carers of any children who might have come into contact with an infectious disease whilst in my care, whilst maintaining confidentiality as much as possible.
4. Contact the parent/carer immediately should a child in my care falls ill or a health-related incident occurs so I can discuss with them and if necessary, arrange for the child to be collected.
5. Contact the person/s identified in the emergency contact(s) list to discuss the illness and/or arrange for them to collect the child should the parent/carer not be available.
6. Ensure the child is made as comfortable as possible while waiting for them to be collected by parent/carer.
7. Seek emergency medical assistance, treatment or advice without first making contact with the child's parent/carer in exceptional circumstances.
8. Ensure children with head lice will not be excluded, but reassurance will be required from parents/carers that treatment is taking place. Other parents/carers will be informed that there are head lice in the setting, ensuring confidentiality is maintained. Information on head lice can be found at: <http://www.nhs.uk/Conditions/Head-lice/Pages/Introduction.aspx>

Please note: It is a statutory requirement that doctors report a notifiable disease to the proper officer of the local authority (usually a consultant in communicable disease control). In addition, I will contact Ofsted and report.

Examples of Notifiable Diseases

- + Diphtheria
- + German measles (rubella)
- + Hepatitis A
- + Measles
- + Meningococcal
- + meningitis /septicaemia
- + Meningitis due to other bacteria
- + Meningitis viral
- + Mumps

- ✚ Scarlet fever
- ✚ Smallpox
- ✚ Tuberculosis
- ✚ Whooping cough

Signature:

AMENDMENT (12/06/2020)

COVID 19

Sick Children - COVID-19

If a child becomes unwell with a new, continuous cough or a high temperature they must be collected and parents will be advised to follow the [COVID-19: guidance for households with possible coronavirus infection guidance](#).

If a child is awaiting collection, they will be moved to a ventilated room where they can be isolated behind a closed door, with appropriate adult supervision. If it is not possible to isolate them, I will move everyone to an area outside and place the child at least 2 metres away from other people.

I will wear appropriate PPE when caring for the child while they await collection if a distance of 2 metres cannot be maintained (such as for a very young child or a child with complex needs).

If a member of staff has helped someone who was unwell with a new, continuous cough or a high temperature, they do not need to go home unless they develop symptoms themselves (and in which case, a test is available) or the child subsequently tests positive. They will wash their hands thoroughly for at least 20 seconds after any contact with someone who is unwell and the affected area will be cleaned with normal household disinfectant.

Should I or any family member develop symptoms of coronavirus I will get tested, self-isolate for seven days and fellow household members will self-isolate for 14 days. In this circumstance, you will not be charged for any period that I have to close my setting and I will help you find alternative childcare if required.

All staff and children who attend my setting will be able to access a test if they display symptoms of coronavirus, and are encouraged to get tested in this scenario.

Where a child tests negative, they can return to my setting and their household members can end their self-isolation in accordance with government guidance.

Where a child, or staff member tests positive for COVID-19, the other children within my setting will be sent home and advised to self-isolate for 14 days. The other household members of these families do not need to self-isolate unless their child subsequently develops symptoms.

In light of COVID-19 I will I will take the following measures to help prevent germs spreading:

- Carry tissues with me and use them to catch coughs or sneezes. I will bin the tissue, and wash my hands, or use an alcohol-based sanitiser gel.
- Wash my hands frequently for at least 20 seconds with soap and water, Use an alcohol-based sanitiser gel if soap and water are not available.
- Display posters that show good hygiene and hand washing practice.
- Avoid touching my eyes, nose and mouth with unwashed hands.
- Avoid close contact with people who are unwell.

I also use [e-bug resources](#) to provide a range of fun lesson plans on hand washing and respiratory hygiene.

I ensure all adults and children in my setting are aware of good hand-washing procedures and I will support them to wash their hands in line with Government guidance.

I ensure there is a supply of tissues available for children, and help children to learn how to catch their sneezes and coughs.

Personal protective equipment will be used in the following situations (intimate care needs e.g nappy changing, toilet training, any form of bodily fluids such as cuts and grazes) or if a child becomes unwell with symptoms of coronavirus while in the setting in accordance with relevant Government guidance).

Signature