



Infection Control Policy

Purpose of Policy

This policy is designed to ensure that a safe, healthy environment is maintained at Snuggle Bunnies Childcare Nursery. The setting recognises that infections can spread quickly between children in childcare environment therefore, we will make every effort to ensure that infections are controlled, and good health and hygiene practices are maintained.

Who is Responsible?

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

The childminder has a responsibility to inform parents and carers when their child enters the setting with a contagious illness, the childminder 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/carer must speak to the childminder before a decision is made and whether the child should remain at the setting 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, this will assist Snuggle Bunnies Childcare to prevent the spread of any infectious illness.

How the Policy will be implemented

Snuggle Bunnies Childcare aims to prevent the spread of infectious illnesses and infections by adhering to the following procedures:

- Re-enforcing that children with infectious illnesses and infections stay at home for the recommended period. Please contact Public Health Agency

Public Health duty Room on 0300 555 0119 or visit the link below if you need more advice or information including the latest guidance

https://www.publichealth.hscni.net/sites/default/files/Guidance_on_infection_control_in%20schools_poster.pdf

- Re-enforcing all members of staff with infectious illnesses and infections for the recommended period (please see the Public Health Agency Infectious Exclusion Guidelines for further information on this. See the link above).
- Identifying signs of illness in children and staff whilst they are in the setting.
- Informing parents/carers that their child is sick and arrange for the child 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, handwashing 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 different types of infections that would be reported to parents and members of staff such as Rashes & Skin infections Diarrhoea & Vomiting, Respiratory and other infections:

- Vomiting/Diarrhoea
- Head Lice
- German Measles
- Chicken Pox
- Mumps
- Meningitis
- Whooping Cough
- Coronavirus

Highlight the importance to parents that if their children have not been immunised then both, child and parent/carer will be in a high risk if an infectious illness presents itself in the setting. Parents have the right to choose whether they will send their child to the setting. This is particularly relevant in cases of:

- German Measles (Rubella)
- Mumps
- Whooping Cough
- Coronavirus

Monitoring of children and members of staff where there are signs of any of the illness listed above will need to leave the premises until the recommended time period is finished.

All cases of infectious illnesses are recorded on 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 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 illness that could be contagious or could affect the settings ability to care for the child and the other children in attendance. Similarly, any member of staff who attends work showing signs of any illness that could affect their ability to carry out their duties will be sent home and a replacement member of staff called in to cover the child to adult ratio.

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 prescribed medication is administered as a form of treatment, such prescribed medication will be administered in accordance with the administration of medication policy and will only be administered with the direct permission of the child's parent/carer. All administration of prescribed medication will be recorded in the medicine administration form with parental consent.

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 make other arrangements 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, illness form and 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 setting 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 or placing other children at risk will

not be allowed in the setting until such time as the 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 not be allowed until such time as the 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 not be allowed in the setting until such time as a diagnosis needs to be made, treatment received and they are feeling better.
- Gastric upset: exclusion for 48 hours after 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/Throat infections: exclusion until 24 hours after fever has gone down.
- Shingles: exclusion until wounds are crusted.
- Impetigo: exclusion for at least 48 hours after treatment has been received and spots are no longer weeping fluid.
- Head lice: exclusion until treatment has been given
- Ring worm: exclusion not usually required however, 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 hands thoroughly after using the toilet and before eating.
- Threadworm: no exclusion period however, child can return once treatment has been received.

- Hand, foot, and mouth disease: exclusion until treatment has been received and last lesion has disappeared.
- Influenza: exclusion until recovered.
- German measles (Rubella): exclusion for 7 days after onset of rash.
- Mumps: exclusion until 9 days after the first appearance of symptoms (most notable symptom is swelling of the glands).
- Whooping Cough: exclusion for 5 days if antibiotic course has been completed, if antibiotics have not been given exclusion will be 14 days.
- Meningitis: exclusion until recovered.
- Coronavirus: exclusion for 10 days of isolation from others.
- Athlete's foot: No exclusion period.
- Warts & Verrucae's: No exclusion period.
- Slapped cheek: No exclusion period.
- Cold Sore: No exclusion period.
- Roseola: No exclusion period.
- Contagiosum: No exclusion period.
- Scarlet Fever: Return 24 hours after antibiotic treatment
- Scabies: Return after first treatment
- Thyroid & Shigella: Further exclusion maybe required for some children until they are no longer excreting

- E. coli: Should be excluded for 48 hours from the last episode of diarrhoea.
- Cryptosporidiosis: Excluded for 48 hours from last episode.

All infectious illnesses must be reported to the childminder (manager) who will advise of any exclusion period and make the decision to inform other parents and staff members. In certain circumstances, the Paediatric First Aider for the setting may also be informed.

Please visit the link below if you need more advice or information with the latest guidance

https://www.publichealth.hscni.net/sites/default/files/Guidance_on_infection_control_in%20schools_poster.pdf

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30.04.2020	C. Morgan
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