



| INFECTIOUS DISEASES POLICY | | | | |
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| Infection | Symptoms | Incubation | Infectious | Nursery Exclusion Policy |
| Head lice | The head louse is a tiny insect that infests the hair on the human head. The adult louse lays its eggs (nits) at the root of the hair, to which they become firmly attached. This distinguishes them from dandruff, which can easily be flaked off. The eggs hatch after 2 weeks and the lice bite the scalp to get blood. The child's head will be itchy where the lice bite. | 2 weeks for eggs to hatch | Children will become infested by contact with someone who is already infested with lice. Lice cannot jump, so infection is spread by heads being close together, hats, combs, brushes etc. | Children should be treated accordingly immediately & nursery staff should be informed so that all parents can be reminded to check their children's hair. Children do not need to be excluded unless they return to Nursery 3 times still with head lice. The nursery will then exclude the child until the head lice have completely gone. |
| Conjunctivitis | Inflammation of the eye caused by a viral or bacterial infection. The eyes become weepy and red, can be painful, itchy and irritated by bright light. Discharge of pus causes eyelashes to stick together. | | Children spread the infection by touching or rubbing their eyes then not washing their hands, then touching another child. | Medical attention should be sought but medication will not always be given. Children do not need to be excluded, however it is strongly advised, when more than one case is evident in the setting to reduce the spread of infection. The nursery manager will use discretion to assess the risk of spread of infection and may exclude all affected children and adults until they are clear of the infection. |



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| Sickness and/or diarrhoea | Sickness and/or diarrhoea can be brought on by a number of different things, onset can be sudden and it can last anywhere from 24 hours onwards. | | Infection can spread if the child doesn't wash their hands after going to the toilet. | Children should be kept away from nursery for at least 48 hours and at least 24 hours after they are clear of symptoms. In severe cases, the manager may decide, at their discretion, to exclude children for 48 hours after they are clear of all symptoms for the protection and wellbeing of all children and staff. |
| | Adults: Adult sickness/diarrhoea can be caused by other things and not necessarily an infectious illness e.g. IBS, IBD, food etc. Adults will not automatically be excluded for 48 hours if they are well enough to be at work and they can attribute their symptoms to a non-infectious illness. | | Adults: Staff should always practice high standards of personal hygiene to prevent spread of infection. | Adults: Staff do not need to adhere to the 48-hour exclusion period if they and the manager deem them well enough to work e.g. if an adult experiences an episode of IBS or eats something that made them sick but they are feeling better, they do not need to be excluded for 48 hours. Manager's discretion will be exercised. Cooks WILL be excluded for 48 hours following any episode of Sickness/Diarrhoea. |
| Chickenpox | The spots develop every day for 3 to 4 days and quickly create tiny blisters that leave a scab. | Between 5 and 21 days. | Chickenpox is a very common infectious childhood disease. The child remains infectious until the blisters have scabbed over. | Children should be kept at home until all exposed blisters are scabbed over and the child is well in themselves. |



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| <p>Shingles</p> | <p>Shingles may cause some early (prodromal) symptoms that last for one to four days before the rash first appears. These early symptoms can include a high temperature (fever) of 38C (100.4F) or over, myalgia (muscle pain), burning, tingling, numbness or itchiness of the skin in the affected area and a feeling of being generally unwell.</p> | <p>Between 5 and 7 days for scabs to heal.</p> | <p>Until last scab has healed but can cause chickenpox in those who are not immune.</p> | <p>Exclude only if rash is weeping and cannot be covered. Can cause chickenpox in those who are not immune.</p> |
| <p>Measles</p> | <p>The first indication of measles is usually symptoms similar to those of a common cold, with a fever that becomes increasingly higher and small, white spots form inside the mouth, on the lining of the cheeks (Koplik's spots). Eyes may also be red and sore. The initial symptoms are followed about three days later by small brownish-red spots from behind the ears: these spots merge together to form a rash over the face and torso.</p> | <p>Between 8 and 14 days.</p> | <p>Measles is an infectious childhood disease, caused by a virus, which has become less common since routine vaccination was introduced. It is very contagious and remains so until the rash has faded.</p> | <p>Children should be kept away from nursery until at least 5 days after the rash has appeared and when the child is well.</p> |



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| <p>Rubella</p> | <p>The rash usually starts behind the ears before spreading to the forehead and the rest of the body. It looks more like a large patch of redness than a series of spots. The rash lasts about 2 to 3 days and is rarely accompanied by serious symptoms, just a mild fever and enlarged glands at the back of the neck. The main danger with rubella is not to the child but to any pregnant women who may contract the disease from the child.</p> | <p>14 to 21 days.</p> | <p>Rubella, or German Measles, is a mild, infectious disease that is caused by a virus. It is contagious and children should be kept in isolation for five days after the rash appears.</p> | <p>Children should be kept away from nursery for at least five days after the rash appears.</p> |
| <p>Mumps</p> | <p>The child will seem generally unwell for a day or 2 before the major symptoms appear. The salivary glands in front of and beneath the ears and chin swell up and there may be fever. The swelling can appear first on one side of the face, then the other, or on both sides at once and cause pain when swallowing. They will complain of a dry mouth because the salivary glands have stopped producing saliva. Possible swollen painful testes in boys, lower abdominal pain in girls.</p> | <p>14 to 21 days.</p> | <p>Mumps is an infectious disease, less common since routine immunisation was introduced and mostly affecting children over 2 years.</p> | <p>Children should be kept away from nursery for at least 5 days after the swelling has gone down.</p> |



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| <p>Scabies</p> | <p>Scabies is an irritating, itchy rash caused by a tiny mite. The burrowing and egg-laying of these mites produce a rash that nearly always affects the hands and fingers, particularly the clefts between the fingers. It may also affect the ankles, feet, toes, elbows and the area around the genitals. Possible symptoms that you may notice are fine, short lines that end in a black spot the size of a pinhead and scabs on the itch areas.</p> | | <p>Scabies is not serious, but is contagious and could run through a family or nursery if not treated promptly. When the eggs hatch, they are easily passed to another person by direct contact. They can also be picked up from bedding or linen that is infected with the mites.</p> | <p>Children should be kept away from nursery until they have been treated with the appropriate lotion.</p> |
| <p>Fifth Disease (Slapped Cheek)</p> | <p>The symptoms of slapped cheek syndrome can vary from a minor illness, possibly with a headache, mild fever and sore throat, to erythema infectiosum, which usually produces a rash on the cheeks.</p> | <p>4-20 days</p> | <p>Slapped cheek is infectious but mostly before the onset of any symptoms. Once the rash has appeared the child is no longer contagious. There is a slight risk to pregnant women (although most women are immune to the virus) and medical advice should be sought.</p> | <p>Children do not need to be excluded but must be well before returning to nursery. Parents must inform nursery immediately if their child has been diagnosed with or come into contact with Slapped Cheek (this could be through a sibling). This allows any employee in the early stages of pregnancy to seek medical care.</p> |



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| Threadworm | Threadworms are small intestinal worms that infect the intestines of humans and is most common in children. Symptoms include itching around the anus and difficulty in sleeping. | | As long as strict hygiene procedures are adhered to then the risk of spreading threadworms is relatively low. | Children do not need to be excluded from nursery. Nursery must maintain high standards of hygiene. |
| Impetigo | Impetigo is a highly contagious bacterial infection of the skin and is very common in childhood between the ages of two and four years. Sores develop that will then rupture leaving a yellow-brown crust. | | Highly contagious before treatment. Once treated with antibacterial treatment the bacterial infection is no longer contagious. | Children should not attend nursery until they have received 48 hours of treatment or until the sores have dried and healed. |
| Hand Foot and Mouth | Hand, foot and mouth disease is a common illness caused by a virus. Symptoms include, fever, loss of appetite, sore throat, small, flat or raised blisters in the mouth and eventually on the hands and feet. | Virus can remain in the body for up to 4 weeks after recovery | Highly contagious and very common in children under the age of ten years. | Children should not return to nursery until they are well. |

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. 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. We will follow all guidance given and notify any of the appropriate authorities including Ofsted if necessary.