## ILLNESS & INFECTION CONTROL POLICY & PROCEDURE

We are committed to keeping all children safe, promoting good health, and reducing the risk of infection in our setting. This policy outlines when children can attend, what to do if they're unwell, and how we manage illness in line with current and upcoming legislation.

# CAN CHILDREN ATTEND WHEN MILDLY UNWELL?

We understand that children will occasionally have mild symptoms like sniffles or light coughs. While we try to stay flexible, the safety and well-being of all children come first.

- Children with minor coughs or colds may attend if they are well enough to take part in the day.
- Children with a temperature over 37.5°C, signs of illness, or who need one-to-one care must stay home.
- We follow UKHSA guidance on exclusion but may make individual decisions based on age, personal hygiene, or close contact.
- Children may be excluded for conditions like cold sores, conjunctivitis, head lice, croup, or hand, foot and mouth, even if not formally listed.

### MEDICATION AND ILLNESS

Medication must never be used to keep an unwell child in the setting.

- We will only administer
  medication if it has been agreed
  in advance and the child is well
  enough to attend.
- If your child is given Calpol,
   Nurofen or any medication in the 48 hours before attending,
   you must tell us.
- This is not only to monitor symptoms but to prevent accidental overdose if another dose is given later in the day.
- We will not accept a child who has been medicated to mask symptoms of illness.
- Failure to share this information may be seen as a breach of trust and could lead to termination of the childcare contract.

### SICKNESS AND DIARRHOEA

Stomach bugs spread easily and quickly. To protect everyone in our care, we have clear rules for when children can return.

- Children must be free from sickness or diarrhoea for 48 hours before returning.
- Diarrhoea is defined as three or more loose stools in 24 hours or any episode of liquid diarrhoea.

 If multiple cases occur, we may contact UKHSA and follow outbreak management advice.

### HIGH TEMPERATURES AND FEVERS

A high temperature can be an early sign of illness or infection, and we have a clear policy to help stop the spread of bugs in the setting.

- If a child has a temperature of 37.5°C or higher, they will be sent home and must not return for at least 24 hours, even if they seem better.
- Children should be fever-free without medication before returning.
- Giving medication (like paracetamol or Calpol) may lower a fever temporarily but can mask symptoms and lead to the spread of illness.
- If your child is sent home due to a high temperature, this will be treated as an illness-related absence, and the usual 50% fee policy applies.

- They may return once they have been treated and are free from lice.
- We recommend continued checking and combing for several days after treatment to ensure the infestation is fully cleared.
- Regular home checks help reduce the risk of reinfection for everyone.

### HAND, FOOT AND MOUTH

This illness is extremely contagious, even before symptoms appear. While there's no formal exclusion, we take a cautious approach.

- Children should stay home for 5 days from the start of symptoms.
- We may require a longer exclusion period if others are showing signs.
- Extra cleaning and hand hygiene measures will be put in place if we have a case.

### **HEAD LICE**

Head lice are very common in early years settings and can spread quickly through close contact. To help prevent repeated outbreaks, we ask for prompt and thorough treatment.

 Children with live lice will be excluded from the setting.

### CONJUNCTIVITIS

Conjunctivitis is usually mild, but it spreads very easily—especially in young children who struggle with hygiene and self-care. The NHS does not require exclusion, but we take additional precautions in our setting to protect everyone.

- Young children are often unable to avoid rubbing their eyes, washing their hands properly, or using tissues consistently.
- For this reason, we ask that any child with signs of conjunctivitis be kept at home until treatment has begun.
- Once treatment has started and there is no excessive discharge, they may return.
- If symptoms worsen or we see signs in other children, we may review our policy temporarily to reduce spread.
- In some cases, we may ask for medical advice before the child returns.

#### TEETHING

Teething is a natural part of development but can still cause discomfort, mild temperatures, and changes in behaviour. We aim to support teething children as best we can while keeping everyone safe.

- We are happy to care for teething children who are otherwise well and able to join in with the day.
- If your child has a raised temperature, is very unsettled, or seems unwell beyond typical teething signs, they may still need to stay at home.

- If you have given Calpol or any other pain relief before arriving, you must tell us — this is essential so we do not risk giving an unsafe additional dose.
- We will not give teething gels, powders or medicines unless agreed in advance, and only if we are confident your child is otherwise well enough to attend.

### RESPIRATORY ILLNESSES (COVID-19, FLU, RSV)

Respiratory illnesses continue to affect children and adults, even though there are no longer legal isolation rules.

- Children with persistent coughs, high fever, or shortness of breath should stay at home until they are fully well.
- They must be fever-free for 24 hours without medicine before returning.
- In some cases, we may ask for a negative test result or medical advice before your child can return.

#### NOTIFIABLE DISEASES

Some illnesses must legally be reported to Public Health and/or Ofsted.

 We follow the Public Health (Infectious Diseases)
 Regulations 1988.

- Notifiable illnesses will be reported within 14 days, or sooner where possible.
- We will act on advice given by UKHSA and keep parents updated as needed.

# IF YOUR CHILD IS UNWELL AT HOME

It's essential that we know about any illness or medication given before your child attends. This helps us protect other children, ourselves, and our families from avoidable risk.

- You must tell us if your child has been unwell or taken any medicine, including paracetamol or antihistamines, in the 48 hours before attending.
- Medication can mask symptoms like fever, pain, or discomfort and may give a false sense that a child is well enough to attend.
- Withholding this information, whether intentionally or accidentally, can put others at risk — particularly vulnerable children and adults.
- If we find out that relevant information has not been shared, we reserve the right to terminate your childcare contract immediately, as it breaches the trust and safety agreement we have in place.

 Being open and honest helps us all keep the setting safe and running smoothly.

# IF A CHILD BECOMES ILL DURING THE DAY

If your child becomes unwell while with us, we'll act quickly to keep them comfortable and minimise risk to others.

- We will call you to collect your child as soon as possible.
- If you can't collect within one hour, please arrange for another trusted adult to do so.
- Your child will rest in a quiet area with support while waiting.
- Full fees still apply during illnessrelated absences.

#### IF THE CHILDMINDER IS ILL

We do everything we can to stay open and minimise disruption, even if one of us is unwell. We only close the setting completely if neither of us is well enough to safely care for the children.

- If one of us is ill, the other will continue working as long as we can maintain the correct ratios and it is safe to do so.
- We may contact parents to see if any children can stay at home for the day, especially if we are

- slightly over ratio due to absences, illness or extra cover.
- We will always keep parents updated as early as possible and try to avoid any last-minute cancellations.
- The setting will only close fully if both of us are too unwell to work safely.

### IF A HOUSEHOLD MEMBER IS ILL

Infection can still spread through household members even if they're not part of childcare.

- If someone in our home is unwell with an infectious condition, we'll assess the risk and decide whether we can stay open.
- If we remain open, we will inform you so you can decide whether to attend.
- If we close, the standard illness fee policy will apply.

### HYGIENE AND PPE

Good hygiene is a key part of our daily routine and helps limit the spread of illness.

 We wear gloves and aprons when changing nappies, dealing with

- sickness or cleaning bodily fluids.
- Hands are washed before and after meals, toileting, and all care routines.
- Children are encouraged to wash their hands properly and use tissues to catch coughs and sneezes.
- Toys, surfaces and shared equipment are cleaned regularly and more often during outbreaks.

## FEES DURING ILLNESS OR CLOSURE

Our fee structure supports fairness for both families and our small business.

- If your child is ill and does not attend, 50% of fees are still charged.
- If we are closed due to childminder illness, we charge
   50% of fees.
- If we are legally required to close due to a public health incident (e.g. COVID-19), fees cannot be enforced, but we may request a voluntary contribution to retain your space.

# WHAT IF YOU CAN'T FIND CHILDCARE?

If we are closed or your child is unwell, you may be able to take time off work to care for them.

- You may be eligible for dependants leave, parental leave, or compassionate leave.
- Your employer might pay you, but they aren't required to check your contract or HR policy.
- More details can be found on gov.uk.

### **UPDATES FOR SEPTEMBER 2025** EYFS CHANGES

The Early Years Foundation Stage (EYFS) framework is changing in September 2025. These updates will be reflected across all of our health and safeguarding policies.

### SAFEGUARDING AND HEALTH CHANGES

New expectations have been set to improve safety, accountability, and child well-being in early years.

- All staff, trainees, and assistants must hold paediatric first aid (PFA) to count in ratio.
- Allergy awareness and meal safety are now mandatory, including supervision by trained staff during eating.
- Childminders must have clear whistleblowing and safer

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recruitment procedures with documented references.

- Emergency contact details must be up to date and more robust attendance follow-up is required.
- Toileting privacy must balance safeguarding with respect and dignity for the child.

### NUTRITION AND MEALS

New DfE guidelines promote balanced meals and allergy-safe practice.

- All meals and snacks must meet updated nutrition standards.
- We will revise menus and notify parents of any changes.
- Allergy action plans must be in place and followed at all times.
- Meals will be supervised by staff with up-to-date training in allergy prevention and first aid.
- Please see our Healthy Eating and Nutrition Policy

### FUNDING AND ATTENDANCE

More children will soon qualify for funded care, which may affect attendance expectations and record keeping.

- From September 2025, working parents of children from 9 months old can receive up to 30 funded hours per week.
- Parents must apply via HMRC and reconfirm eligibility every 3 months.
- Funding does not cover meals, outings, or consumables—these remain optional extras.
- We'll update contracts and booking forms to reflect these changes.

## INFECTION CONTROL BEST PRACTICE

Government guidance on hygiene and outbreaks has also been strengthened.

- We follow UKHSA's updated health protection advice for early years settings.
- This includes enhanced cleaning, PPE where appropriate, and safe disposal of bodily fluids.
- We will notify Public Health if we suspect an outbreak and follow their protocols.

UPDATED: JUNE 2025 REVIEW DUE: JUNE 2026