

## 1.5.2 Infection Control Policy

EYFS: 3.44, 3.45, 3.46

At **Aplomb Day Nursery and Preschool** we promote the good health of all children attending through maintaining high hygiene standards and reducing the chances of infection being spread. We follow the health protection in schools and other childcare facilities guidance<sup>1</sup> which sets out when and how long children need to be excluded from settings, when treatment/medication is required and where to get further advice from.

Viruses and infections can be easily passed from person to person by breathing in air containing the virus which is produced when an infected person talks, coughs or sneezes. It can also spread through hand/face contact after touching a person or surface contaminated with viruses.

We follow the guidance below to prevent a virus or infection from spreading around the nursery. Our staff:

- Encourage all children to use tissues when coughing and sneezing to catch germs
- Ensure all tissues are disposed of in a hygienic way and all children and staff wash their hands once the tissue is disposed of
- Develop children's understanding of the above and the need for good hygiene procedures in helping them to stay healthy
- Wear the appropriate Personal Protective Equipment (PPE) when changing nappies, toileting children and dealing with any other bodily fluids. Staff are requested to dispose of these in the appropriate manner and wash hands immediately
- Clean and sterilise all potties and changing mats before and after each use
- Clean toilets at least daily and check them throughout the day
- Remind children to wash their hands before eating, after visiting the toilet, playing outside or being in contact with any animal and explain the reasons for this
- Clean all toys, equipment and resources on a regular basis by following a comprehensive cleaning rota and using antibacterial cleanser, or through washing in the washing machine
- Wash or clean all equipment used by babies and toddlers as and when needed, including when the children have placed it in their mouth
- Store dummies in individual hygienic dummy boxes labelled with the child's name to prevent cross-contamination with other children
- Store toothbrushes (where applicable) hygienically to prevent cross-contamination
- Keep baby water beakers out of reach to prevent cross-contamination and instead, water will be offered at regular intervals (5 times a day), breakfast, morning snack, lunch, afternoon snack, afternoon tea time.
- Immediately clean and sterilise (where necessary) any dummy or bottle that falls on the floor or is picked up by another child
- Provide labelled individual bedding for children that is not used by any other child and wash this at least once a week

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<sup>1</sup> <https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities>

- Ask parents and visitors to remove all outdoor footwear, or use shoe covers, when entering rooms where children may be crawling or sitting on the floor
- Where applicable wear specific indoor shoes or slippers whilst inside the rooms and make sure that children wear them as well
- All children to remove footwear before entering the nursery rooms
- All children and staff to wash hands in the sink in the conservatory before entering the nursery on arrival. Babies hands will be washed in the sink in room 1 with soapy water upon arrival
- Follow the **sickness and illness policy** when children are ill to prevent the spread of any infection in the nursery. Staff are also requested to stay at home if they are contagious.

In addition:

- The nursery manager retains the right of refusal of all children, parents, staff and visitors who are deemed contagious and may impact on the welfare of the rest of the nursery
- Parents will be made aware of the need for these procedures in order for them to follow these guidelines whilst in the nursery
- Periodically each room in the nursery will be deep cleaned including carpets and soft furnishings to ensure the spread of infection is limited. This will be implemented earlier if the need arises
- In the event of an infection outbreak the nursery will, where appropriate, undertake a deep clean to ensure the spread of infection is contained
- We will follow Government health guidance, as well as seeking legal advice and information from our insurers, on any national outbreak of a virus/ pandemic and keep parents informed of any course of action. Each specific circumstance will differ and to ensure we take the most appropriate action, we will treat each case on an individual basis
- In addition, where contagious outbreaks occur, we will adopt Government guidance for all visitors to minimise the risk of further spreading of the infection
- The nursery will ensure stocks of tissues, hand washing equipment, cleaning materials and sterilising fluid are maintained at all times. These will be increased during the winter months, or when flu and cold germs are circulating.

### Health Protection for schools, nurseries and other childcare facilities

Please find below the exclusion table published on the government website:

Exclusion table Infection	Exclusion Period	Comments
Athlete's Foot	None	Children should not be barefoot at school (for example in changing areas) and should not share towels, socks or shoes with others.
Chicken Pox	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

Cold Sores (Herpes Simplex)	None	Avoid kissing and contact with the sores
Conjunctivitis	None	If an outbreak/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 should not attend the setting for 3 days after the day of the test	Children with mild symptoms such as runny noses, and headache who are otherwise well can attend school
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
Diphtheria *	Exclusion is essential. Always consult with your UKHSA HPT	Preventable by vaccination. Family contacts must be excluded until cleared to return by your local HPT
Flu (Influenza) or influenza like illness	Until recovered	Report outbreaks to your local HPT
Glandular Fever	None	
Hand, Foot and Mouth	None	Contact your local HPT if a large number of children are affected. Exclusion may be considered in some circumstances
Head Lice	None	Treatment recommended only when live lice seen
Hepatitis A	Exclude until 7 days after onset of jaundice (or 7 days after symptom onset if no jaundice)	In an outbreak of Hepatitis A, your local HPT will advise on control measures
Hepatitis B, C, HIV	None	Hepatitis B and C and HIV are blood borne viruses that are not infectious through casual contact. Contact your HPT for more advice
Impetigo	Until lesions are crusted / healed or 48 hours after starting antibiotic treatment	Antibiotic treatment speeds healing and reduces the infectious period
Measles	4 days from onset of rash and well enough	Preventable by vaccination (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* / 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
MRSA	None	Good hygiene, in particular handwashing and environmental cleaning, are important to minimise spread. Contact your local HPT for more information
Mumps*	5 days after onset of swelling	Preventable by vaccination with 2 doses of MMR. Promote MMR for all pupils and staff
Ringworm	Not usually required	Treatment is needed
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 of appropriate antibiotic treatment completed	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
Scabies	Can return after first treatment	Household and close contacts require treatment at the same time
Slapped Cheek / Fifth Disease / Parvo Virus b19	None (once rash has developed)	Pregnant contacts of case should consult with their GP or midwife
Threadworms	None	Treatment recommended for child and household
Tonsillitis	None	There are many causes, but most cases are due to viruses and do not need an antibiotic treatment
Tuberculosis* (TB)	Until at least 2 weeks after the start of effective antibiotic treatment (if pulmonary TB Exclusion not required for non-pulmonary or latent TB infection Always consult your local HPT before disseminating information to staff, parents and carers	Only pulmonary (lung) TB is infectious to others, needs close, prolonged contact to spread Your local HPT will organise any contact tracing
Warts and Verrucae	None	Verrucae should be covered in swimming pools, gyms and changing rooms

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
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\*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.

All laboratories in England performing a primary diagnostic role must notify UKHSA when they confirm a notifiable organism.

[Exclusion table - GOV.UK \(www.gov.uk\)](http://www.gov.uk)

### Coronavirus

See coronavirus policy (page -).

### Vaccines and Teething

Parents and carers should monitor side effects from a vaccination or teething, and if they are concerned about their child's health they should seek advice from their GP or NHS 111.

### Vaccine

Vaccines may cause a mild fever in children. This is a common and expected reaction, and isolation is not required unless coronavirus (COVID-19) is suspected.

### Teething

Whilst teething can cause some known side effects such as flushed cheeks and sore gums, NHS guidelines state that fever is not a symptom of teething.

If coronavirus (COVID-19) is suspected, settings should follow the isolation advice. For more detail, please refer to the **Coronavirus Policy**.

This policy was adopted on	Signed on behalf of the nursery	Date for review
May 2021	Mercedes Bar-Joseph ( <i>Deputy Manager</i> ) Elena Prodromou ( <i>Manager</i> )	June 2022