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Little Dukes: Child Sickiness and Infection Control Policy

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Monitoring and review...

This policy will be continuously monitored, refined and audited by the Headteacher who will also review it annually to assess how efficiently duties have been carried out over the year. This review will take place no later than one year from the date shown below, or sooner if needed due to changes in legislation, regulatory requirements or best practice guidelines.

Adopted: September 2025

Reviewed by:

Geoff Marston Dukes Education Group Compliance Director

Nazish Usman, Principal of Hopes and Dreams Montessori Nurseries

Ben Murray, Marketing and Admissions Director - Little Dukes Nurseries

Next review due: September 2026

Please note:

This policy applies to all nursery schools within Little Dukes, including:

- Hove Village Day Nurseries
- Hopes and Dreams Montessori Nurseries

Policy adopted November 2025 - Version 4

Little Dukes Nursery Schools, 58 Buckingham Gate SW1E 6AJ

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- Miss Daisy's Nursery Schools
 - Miss Daisy's Nursery School Hyde Park Ltd
 - The Kindergartens Nursery Schools
 - Reflections Nursery and Forest School
 - Riverside Nursery Schools
 - Bright Beginnings (Twickenham) Ltd
 - Twickenham Park Day Nursery Ltd
 - Broomfield House School Ltd
 - Pippa Pop-ins Nursery Schools

Any reference to 'Little Dukes' applies to all the nurseries named above.

Little Dukes: Child Sickness and Infection Control Policy

Statement of intent:

The health and wellbeing of all the children, team members and parents/carers who attend the nursery is of paramount importance to us. We recognise it is our responsibility to ensure the health and safety of our children, team members and parents/carers by identifying and discussing health issues in an open and positive way. Doing this will allow us to achieve and maintain our high standards.

To maintain a clean and healthy environment we ask that parents/carers refrain from bringing their child/children into nursery if they are sick and/or displaying signs of illness.

Policy aims:

- To ensure sick children are identified.
- To ensure sick children are cared for appropriately.
- To protect children and adults from preventable infection.
- To enable team members and parents/carers to be clear about the requirements and procedures when a child is unwell.

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Key points:

At Little Dukes, we try to minimise the risk of infection to our children and team members by:

- Asking parents to keep children at home if they are unwell. If a child is unwell, it is in their best interest to be in a home environment rather than at nursery with their peers
- Asking team members and other visitors not to attend the nursery if they are unwell
- Retaining the right to refuse admission to a child or adult who is unwell. This decision will be taken by the Headteacher and is non-negotiable
- Minimising infection through our rigorous cleaning and hand washing processes
- Helping children to keep healthy by providing balanced and nutritious snacks, meals and drinks
- Ensuring children have regular access to the outdoors and good ventilation inside
- Sharing information with parents/carers about the importance of the vaccination programme for young children to help protect the wider community from communicable diseases
- Having areas for rest and sleep, where required, and sharing information about the importance of sleep and how many hours young children should be having.

Procedure:

Too sick for Nursey school?

To support the health of all our children and team members, we ask that parents/carers inform us if their child is a little unwell at the start of the day. This way we can monitor them throughout the day for worsening symptoms and be aware that their general disposition may be altered due to illness or fatigue. Additionally, in the case of a confirmed infectious illness, we will take extra steps to sanitise the environment to prevent the spreading of illness to other children, team members, or visitors.

We understand the needs of working parents/carers and will not ask that children return home from the nursery school unnecessarily. It is however at the discretion of the Headteacher when deciding that a child is too sick to attend. That decision is final and will consider the needs of the child, other children and adults within the nursery.

As a basic principle we use our 'Sickness Traffic Light System' to decide whether a child can attend nursery.

Sickness Traffic Light

RED No session today	AMBER Join us if parents can collect within an hour of being contacted
<ul style="list-style-type: none"> • Any illness or infection within an exclusion period as specified by Public Health England • Fever of 37.8 degrees or higher • Wheezing or shortness of breath • Continuous cough • Constant runny nose with yellow/green tint • Diarrhea or vomiting within the last 48 hours • Sore throat or swollen glands • Undiagnosed rash • Persistent itching • Uncovered sores • Cannot join in daily routine • Unable to take part in normal nursery activities inside and outside 	<ul style="list-style-type: none"> • Minimal green/yellow runny nose • Lethargy • Redness or runny eyes
	GREEN OK to come in
	<ul style="list-style-type: none"> • Clear runny nose • Active, playful and rested

The following signs and symptoms are indications that a child is too ill to attend.

- Diarrhoea: Child must be kept at home. A child should be diarrhoea-free for at least 48 hours before returning to nursery. If a child has two occurrences of diarrhoea during their day, parents/carers will be notified and asked to collect their child.
- Fever: in line with NHS guidelines, we recognise a high temperature as 38 degrees and above. If a child has this temperature, they must be kept at home. If a fever occurs during their day at nursery, parents/carers will be notified and asked to collect their child if the fever has not decreased in line with our medication policy. A child can return to the nursery once they are fever-free and not dependent on medication to regulate their temperature.
- Vomiting: Child must be kept at home. A child should be free of symptoms for at least 48 hours before returning to nursery. If a child vomits at nursery, parents/carers will be asked to collect their child. If a child vomits due to excitement, anxiety or other behavioural reasons, these are exceptions.

- Contagious illnesses: If a child has a contagious illness such as an unexplained rash, conjunctivitis, etc.. we will follow the NHS recommendations concerning attendance and periods of exclusion from nursery. Please see Appendix 1. If the nursery has three confirmations of a contagious illness, this information will be communicated to our families, and we will report in line with regulatory procedures.
- Cold/Flu: Parents/carers should use their best judgement whether their child is well enough to participate in therapy. If parents/carers do choose to bring their child to nursery, they should let the nursery know that their child has cold or flu symptoms. If symptoms worsen or a child is unable to perform at their typical level due to apparent illness, parents/carers may be called to pick up their child early.
- Antibiotics - We ask parents/carers to keep children on antibiotics at home for the first 24 hours following the first dose This is because it is important that children are not subjected to the rigours of the nursery day, which requires socialising with other children and being part of a group setting, when they have first become ill and require a course of antibiotics.

Hygiene and infection control procedure:

As young children's immunity may not have fully developed, they are often highly susceptible to infectious diseases. In a nursery school, where children are in close and frequent contact with each other, infectious diseases can spread rapidly. This is why when a child first starts in a new nursery, they may initially pick up illnesses more frequently.

Fortunately, there are a number of ways to reduce the risk of infections in children. Routine immunisations can protect children against many severe and sometimes fatal infections. Providing children with a healthy diet helps to ensure that their bodies are better equipped to combat infections and minimises the risks of other health problems, such as dental decay. We also implement clear and consistent procedures to ensure that the risk of infection is minimised by:

- Reducing or eliminating sources of infection through hygiene practices
- Preventing transfer of contamination from these sources
- Educating staff on good hygiene practices and ensuring they follow relevant policies around mealtimes, intimate care and health and safety.
- Checking premises are clean and safe before children arrive each day.
- Establishing a daily cleaning routine for the premises – nappy changing facilities, play areas, toilets, kitchens.

- Ensuring that all team members involved in the preparation and serving of food receive appropriate training that includes storing, preparing, cooking and serving food safely and hygienically
- Ensuring that regulated food hygiene standard requirements in the maintenance of food preparation areas and preparation of food are followed.
- Implementing a robust and regular system for cleaning toys, resources and activity equipment
- Implementing additional cleaning following on from a confirmed case of a contagious disease
- Providing suitable hand washing and drying equipment and ensuring that children wash their hands frequently throughout the day (particularly if they appear dirty), before eating, after blowing their noses, if they have been playing with materials that are susceptible to cross infection of germs e.g. sand, playing outdoors or after contact with animals.
- Champion and educate team members, parents and children on the importance of immunisation as a tool against infections whilst recognising the individual's right to choose.
- Raising children's awareness of good hygiene practices by teaching them about the importance of:
 - hand washing
 - cleaning teeth
 - nose wiping and disposal of tissues.
 - the spread of infection through coughing and sneezing
 - using the toilet correctly.

For further details on nursery hygiene practices see Appendix 2

Legislative Framework:

This policy has due regard to statutory legislation including but not limited to the following:

- Health and Safety at Work Act 1974
- Public Health (Control of Disease) Act 1984.
- The Management of Health and Safety at Work Regulations 1999

Appendix 1

Disease/Illness Exclusion Period

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Antibiotics – 24 hrs from first dose.

Chicken pox – Children need to be absent from the nursery for a minimum of 5 days from the onset of the rash. If the spots are scabbed over and dried up the child may return to nursery.

Conjunctivitis - conjunctivitis, suspected cases will be reported immediately to parents/carers who will be requested to take their child from the nursery to be seen by the doctor or pharmacist for advice on what treatment is required. Once the child has been treated and the conjunctivitis appears controlled, providing the child is happy they may return to nursery, again this will be at the discretion of the Headteacher and in discussion with the parent/carer to ensure the spread of the infection is reduced to a minimum.

Coughs, Colds and Sore Throats - Any child complaining of a sore throat, or having uncontrollable fits of coughing, or a severe runny nose, cannot be accepted into nursery.

German Measles (Rubella) - From the onset of the rash we advise a MINIMUM of 4 days away from nursery, particularly as Rubella can be harmful to expectant mothers.

Hand, Foot and Mouth - Any child should not return until treatment has been given to reduce any fever, however it is not a requirement for the spots or blisters to have totally cleared.

Head Lice - Easily transmitted from head-to-head. Parents/carers should use a course of treatment recommended by the pharmacist and inform the nursery, so other parents/carers can be informed. When cases are identified we ask parents/carers for treatment to be used immediately to reduce the risk of spreading. As soon as a child has been treated, they may return to the nursery.

Hepatitis - The nursery is unable to accept an infectious child until declared fit by a doctor.

Impetigo (and other infectious skin disorders e.g. cold sores) - Highly infectious – a child should not return to nursery until 48 hours after you start using hydrogen peroxide cream or antibiotics prescribed by a GP or pharmacist, or if not getting treatment, when the patches dry and crust over.

Measles - From the onset of the rash we recommend at least 7 days away from nursery.

Meningitis - The nursery is unable to accept an infectious child until declared fit by a doctor.

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Mumps - A child must not return to nursery until swelling has gone and temperature is back to normal. Parents/carers should allow for 7 days away from nursery.

Plantar warts - No exclusion. Should be treated and covered.

Poliomyelitis - until declared free from infection by the appropriate public health official.

Ringworm - of body seldom necessary to exclude, provided treatment is being given.
Ringworm of scalp, until cured.

Scabies - Red, itchy rash in between the fingers. Requires immediate treatment and the child can return after the treatment has-been applied.

Scarlet Fever - A child cannot be accepted until fully recovered and a course of treatment completed. (The bacteria can cause throat and ear infections; pinpoint rash and the skin becomes dry and flaky).

Slapped Cheek Disease - Because this is harmful to expectant mothers, a child cannot return to nursery until fully recovered.

Strep A: Symptoms to lookout for when Strep A in children becomes invasive group A streptococcal infection (GAS) are, high temperature for days, sore throat, severe muscle pains and joint aches, a rash prominently developing on the tummy which is like sandpaper. Children should stay at home until they start the course of antibiotics and can return after 24 hours.

Temperature - If sent home ill, child must be off at least for 24 hours.

Threadworms - No need for exclusion but prompt treatment necessary for the whole family. Parents/carers should inform the nursery.

Tonsillitis - Tonsil's well, become red and inflamed and may show white spots. A child cannot be accepted until fully recovered and a course of treatment completed.

Tuberculosis - A child may not come back to nursery until fully recovered. Parents/carers should liaise with the local Health Authority.

Typhoid Fever - until declared free from infection by the appropriate public health official.

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Whooping Cough - A child may not return to nursery until fully recovered and a course of treatment completed – usually 21 days from onset.

Request for parents/carers:

Should you or any other member of your immediate family have any of the above illnesses, please remember that your child, while not necessarily showing any symptoms, may be incubating the illness and therefore infecting other nursery users and team members.

We will report to OFSTED and PHE following these guidelines:

- Chickenpox 2 confirmed cases or more in one space - OFSTED
- Strep A one case or more to - OFSTED and PHE
- Polio case one report to - OFSTED and PHE
- Typhoid one case - OFSTED
- Measles, mumps and Rubella outbreak 2 or more - OFSTED
- Tuberculosis one case to - OFSTED.

Appendix 2:

Infection control routines:

Handwashing

Handwashing is essential to ensure that contamination and infection carried on hands through activities such as toileting, nappy changing, and general play is eliminated.

Team members should ensure that:

- All children are taught how to wash their hands properly and educated as to the importance of why we wash our hands
- They are a good role model
- Children wash their hands frequently throughout the day, particularly if they appear dirty, before eating, after blowing their noses, if they have been playing with materials that are susceptible to cross infection of germs e.g. sand, playing outdoors or after contact with animals.
- They supervise children's handwashing on a regular basis to ensure that they are observing good practice.



Toilet hygiene

Team members should enable children to understand the importance of good toilet hygiene in the elimination of cross-infection. The toilets will be cleaned each evening by the domestic support staff and by team members throughout the day and soap and paper towels replenished when required.

Team members should:

- Check toilets in the morning before children arrive and regularly throughout the day to ensure that they are clean. If toilets have become soiled, team members should use the appropriate protective clothing (plastic apron and gloves) before cleaning. A separate mop and cloth should be used for the toilet area. The mop should be rinsed thoroughly, and the cloth should be washed at a temperature of 60 degrees or more.
- Ensure that there is an adequate supply of soap and paper towels.
- Ensure the temperature at the taps is at the correct temperature to meet hygiene requirements and record this on the daily checklist.
- Ensure that children are supported in implementing good toilet hygiene procedures including using the toilet, flushing and hand washing and that team members are aware of which children require support within their room.
- Discuss with children the importance of good hygiene in the toilet area and ask them to report to team members if the toilets need to be cleaned. This will encourage children to consider toilet hygiene on an ongoing basis.

Nappy-changing team members should:

- Ensure changing facilities are kept in good order and to a high level of cleanliness with all the appropriate equipment to hand
- Ensure that they have access to all the equipment they need (including running water) to change a child's nappy before beginning this process
- Wash hands thoroughly before and after each nappy change (including after disposal of nappy)
- Wear a disposable apron and gloves (double gloves if soiled)
- Use a waterproof changing mat
- Clean any surface that is soiled during changing with a detergent solution followed by a disinfectant and then dry the surface
- Dispose of nappies safely by putting them in an individual nappy sack before placing them in a nappy bin that is also lined with a plastic liner.

Toys and resource hygiene

Toys and play equipment are a source of fun and learning for children but toys that are inappropriate for the child's age and stage of development or resources in poor repair can lead to injury. Further to this, toys that are frequently shared between children can become a source of infection. Every nursery will have a resource cleaning schedule that ensures that all toys and equipment are maintained to minimise the spread of infections. Team members should also:

- Ensure that any resources purchased are age and stage appropriate and carry the safety mark (CE, BS or BSI)
- Ensure that resources purchased are able to be cleaned.
- Check toys regularly for broken bits and rough edges. Discard any toys that are unsafe.
- Clean toys according to the resource cleaning rota and whenever they appear dirty or soiled.
- Clean hard, plastic toys by washing them with detergent and drying thoroughly.
- Disinfect hard plastic toys that cannot be washed.
- Clean dirty soft toys in a washing machine
- Store toys in a clean container or cupboard
- Rake and check sandpits before use outdoors and change the sand regularly as well as ensure a cover is placed over the sandpit at night.
- Carry out appropriate risk assessments on activities and the environment in which they take place.
- Clean and disinfect toys during an outbreak of illness.
- Immediately clean and disinfect toys that are contaminated with bodily fluids (e.g. blood, saliva, mucus)
- Destroy contaminated soft toys.
- Wash their hands after handling contaminated toys.
- Ensure that children wash their hands after playing outdoors, in the sand or water or in the ball pool.
- Replace soft modelling materials and dough regularly.
- Discourage children from putting toys into their mouths.

Pets/Animals hygiene practices

Animals and/or pets within the nursery can add a great dimension to children's learning, as can trips out to visit animals in a variety of settings but animals can pose a risk of infection.

Team members should:

- Ensure that animals in the nursery have been declared healthy by a vet and have received all of the appropriate vaccinations.
- Ensure any defaecation or urine is cleaned up as soon as possible.
- Ensure that pets in the nursery who become ill are treated immediately by a vet.
- Ensure that the pet is fed, watered and housed appropriately and safe from harm, exercised regularly, groomed and examined for signs of injury or illness on a regular basis.
- Ensure that children wash their hands after touching animals and/or their equipment.
- Discuss with children the conditions necessary to keep their pet safe and healthy and to keep themselves safe and healthy when handling the pet.
- Clean pet living quarters daily
- Keep animal feeding utensils clean and ensure that they are cleaned separately from all other utensils.
- Keep pet food separate from all other food.
- Discourage children from “kissing” pets/animals or allowing the animals to lick them.
- Have a member of staff nominated to be responsible for the animal.
- Ensure that hygiene and hand washing procedures are implemented on trips out of the nursery to animal enclosures.
- Ensure any wild animal, bird or domestic pet stools/ defecations are cleared from any outdoor surfaces before allowing children to play in those areas and sign this off on the daily checklist.