At Hopscotch we promote the good health of all children attending including their oral health by:

- Helping children to keep healthy by providing balanced and nutritious snacks, meals, and drinks.
- Minimising infection through our cleaning and hand-washing processes.
- Ensuring children have regular access to the outdoors and having good ventilation inside.
- 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.
- Asking parents to keep children at home if they are unwell and unable to cope with a nursery day. If a child is unwell, it is in their best interest to be in a home environment rather than at nursery.
- Asking staff and visitors not to attend the setting if they are unwell.

Our procedures

To support the health and wellbeing of all children in our care, ensure appropriate action is taken when a child becomes unwell, and minimise the spread of infection, we implement the following procedures:

- If a child becomes unwell during their day at nursery, we will contact their parent(s)/carer(s) as soon as possible. We will keep you informed about how your child is and discuss whether it is necessary for them to be collected and taken home.
- We follow the guidance published by UK Health Security Agency for managing specific infectious diseases[1] and advice from our local health protection unit on exclusion times for specific illnesses, e.g. sickness and diarrhoea, measles, and chicken pox, to protect other children in the nursery.
- Should a child have an infectious disease, such as sickness and diarrhoea, they must not return to nursery until they have been clear for at least 48 hours.
- We will inform parents / carers if there is a contagious infection identified in the nursery, to enable them to spot the early signs of this illness. To reduce the risk of infection we will clean all equipment and resources that the infectious child may have come into contact with.
- Should any serious accidents, injuries or illnesses occur we will inform Ofsted[2] as soon as is reasonably practical, but within 14 days.
- We ask parents and carers to keep their child at home for the first 24 hours upon starting any prescribed medication (unless it is recently prescribed in the last 21 days and the child is well in themselves). This allows time to monitor for any adverse reactions and ensures the medication has begun to take effect, helping to reduce the risk of infection spreading within the setting.
- We reserve the right to refuse admission to any child who is unwell. This decision will be made by the duty manager in consultation with the child's parent/carer, with the child's best interests and the wellbeing of others in mind.

Well Child Attendance and Illness Procedure

- If your child is well enough to attend nursery in line with our exclusion guidance (see below), but becomes upset, uncomfortable, or distressed during the day, we may contact you and request that they are collected. Any such decision will be made with your child's best interests and overall wellbeing as our priority.
- In circumstances where a child requires one-to-one care due to illness, we may ask for them to be collected, as our staffing ratios do not allow us to safely provide this level of individual support.
- Children who are unwell, may be infectious, or are unable to comfortably participate in the normal nursery routine should remain at home for a minimum of 24 hours. This will help us to protect the health, safety, and wellbeing of all children and staff within the setting.
- In certain situations, the Management Team may require a child to remain at home for a longer period than

[1] https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/managing-specific-infectious-diseases-a-to-z

[2] https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities

outlined in the exclusion guidance. This may be necessary during an outbreak of illness, or where there is an increased risk of infection spreading within the nursery, or from taking the advice from UK Health Security Agency (Public Health).

Monitoring Temperature and Signs of Illness

If a child is not their normal self (e.g. looks flushed, no appetite, crying, inactive) or feels hotter than normal we may take their temperature.

A normal temperature in babies and children is about 36.4°C, but this can vary slightly. According to the NHS a high temperature or fever is considered as a temperature of 38°C or above[3].

- If a child's temperature is below 38°C:
    - The child will be given time to rest and will have their temperature taken at regular intervals.
    - We may send you a message via Famly to let you know they are not themselves.
- If a child has a raised temperature and additional symptoms (for example, crying, appearing to be in pain, lethargic, not drinking) and is unable to cope with the nursery day then we will:
    - Contact you to make you aware and discuss the situation.
    - Ask for your permission to administer Calpol, in line with our Medication Policy.
    - Monitor your child. If their symptoms improve, we will contact you or send an update via Famly regarding their suitability to remain at nursery.
    - If your child does not improve, we will contact you and ask that you collect them.
    - When collection is required, a member of staff will agree a suitable timeframe with you. If you are unable to collect your child within this timeframe, we will ask you to arrange for an alternative person to do so.
- If a child has a raised temperature and no other symptoms:
  We will:
    - Contact you to make you aware and discuss the situation.
    - Ask for your permission to administer Calpol (if appropriate) in line with our Medication Policy
    - Monitor them every 10 minutes, including taking their temperature.
    - Update you via Famly.

  If your child's symptoms should become worse and they are unable to cope at nursery, we will contact you asking for you to collect them.

Medical Care

If a child requires medical attention that does not need an ambulance, parents/carers will be contacted promptly and asked to seek appropriate medical care for their child.

If a child requires hospital treatment, the following procedure will be followed to ensure their safety and wellbeing:

The nursery will:

- Inform a member of the management team immediately.
- Call 999 for an ambulance if the child's condition is serious. (Staff must not attempt to transport an unwell child in their own vehicle.)
- Follow all instructions provided by the emergency call handler.
- While awaiting the ambulance, a member of staff will contact the child's parent(s) or carer and arrange to meet them at the hospital.
- Ensure a suitable member of staff accompanies the child to the hospital, taking with them all relevant documentation (e.g. registration forms, medication records), any required medication, and the child's comforter where appropriate.

[3] https://www.nhs.uk/symptoms/fever-in-children/

- Redeploy staff as necessary to ensure appropriate ratios are maintained for the remaining children; this may include temporarily grouping children together.
- Remain calm and provide reassurance to all children. Those who witness the incident may require additional comfort and support.

Meningitis procedure

If a parent informs the nursery that their child has meningitis, the nursery manager will contact the Local Area Infection Control (IC) Nurse. The IC Nurse will give guidance and support in each individual case. If parents do not inform the nursery, we may be contacted directly by the IC Nurse and the appropriate support given. We will follow all guidance given and notify any of the appropriate authorities including Ofsted where necessary.

Broken Limbs

- Children with broken limbs who have a plaster cast may be able to attend nursery, subject to agreement by the management team and following the completion of a risk assessment in partnership with parents/carers.
- Children who have a temporary or soft cast, or whose injury requires immobilisation without a permanent cast, will not be able to attend nursery until the injury has either healed sufficiently or a permanent cast has been applied.
- Where appropriate, parents/carers will be required to provide a suitable protective covering (e.g. a waterproof sleeve) to protect the cast during activities involving water, sand, mud, or similar materials, to prevent damage and reduce the risk of irritation or infection.
- If medical guidance has been given, including the administration of pain relief, this will be considered on an individual basis.

Other Injuries (Sprains, Strains, Burns)

Children with sprains, strains, or burns may be able to attend nursery following discussion with the management team. However, in some situations, attendance may not be appropriate if the injury impacts the child's safety or ability to participate comfortably in daily activities.

The nursery reserves the right to request additional medical advice where necessary to ensure the child's wellbeing and safety. A risk assessment may be put into place for them before they return to nursery.

Head Lice

If a parent/carer identifies that their child has head lice, we kindly request that they inform the nursery as soon as possible. This enables us to discreetly notify other parents/carers so they can check and treat their child's hair if necessary.

Nursery staff are not permitted to carry out physical checks of children's hair. However, if head lice are observed, parents/carers will be informed and asked to ensure appropriate treatment is carried out before the child returns to the nursery.

In most cases, children will not be excluded from nursery. However, parents/carers may be asked to collect their child if the infestation is severe, causing discomfort or distress, or if there is a significant risk of transmission to other children and staff.

The nursery is committed to supporting families and can offer guidance and advice where head lice may be difficult to manage.[4]

Teething

Teething is a normal stage of development and can affect children differently. Some children may experience little or no discomfort, while others may show signs such as sore or reddened gums, flushed cheeks, increased dribbling, chewing, or gnawing on objects, ear rubbing, mild irritability, or a slightly raised temperature below 38°C. Teething may continue until around 30 months of age.

[4] https://www.nhs.uk/conditions/head-lice-and-nits/

For health and safety reasons, amber teething necklaces, bracelets, and anklets are not permitted within the nursery. These items present a potential choking, strangulation, and injury risk should beads become detached or cords become caught around a child's neck, wrist, or ankle. Children wearing amber teething jewellery will be asked to remove these items before entering the nursery[5].
While teething can cause discomfort, there is no medical evidence to suggest that teething causes diarrhoea. Therefore, symptoms such as diarrhoea will not be regarded as normal teething symptoms and may require further monitoring or exclusion in line with our illness procedures.
If staff feel that a child is experiencing discomfort due to teething, parents/carers will be contacted to obtain permission before administering Calpol or other non-prescribed medication, in line with our Medication Policy. Non-prescribed medication may only be administered for up to three consecutive days. If medication is required beyond this period, written guidance or permission from a doctor will be required.
Further information regarding teething symptoms can be found on the NHS website – Baby Teething Symptoms[6].

Immunisations

We understand that children may sometimes develop a mild temperature or discomfort following immunisations. In these cases, it will be at the management team's discretion to decide whether the child is well enough to remain at nursery with the administration of paracetamol e.g. Calpol. The decision will take the following into account:

- The child's overall appearance and well-being
- The level of the child's temperature
- Whether the child is displaying any additional symptoms
- Any other illnesses currently present within the nursery setting

This approach helps us to ensure the safety and well-being of all children in our care.

Conjunctivitis

Children will not be excluded from nursery with mild conjunctivitis. However, if a child appears unwell or if the condition deteriorates, then we may contact you to take them home or seek medical assistance.
We may administer over-the-counter medication for conjunctivitis for a maximum of three consecutive days, provided that:

- The medication is appropriate, suitable, and correct for the child's age, in accordance with the manufacturer's instructions.
- Parental consent has been obtained, in line with our Medication Policy.
- We will not administer any medication that is not age-appropriate (for example, medication labelled for children aged 2 years and over must not be given to a child under 2 years). In such cases, parents will be advised to seek appropriate medical guidance or obtain a suitable alternative treatment.

We reserve the right to research any over-the-counter medication to ensure it is a recognised and appropriate treatment. If there are legitimate concerns regarding a proposed medication, we may refuse to administer it; in such cases, parents will be invited to attend a meeting to discuss this decision.

Exclusion Guidance

We would like to make parents aware of our Exclusion Guidance, which follows advice from the Health Protection in Children and Young People's Settings, Including Education[7]. The health, wellbeing, and safety of all children in our care is important to us, and we kindly ask families to follow the guidance below.

[5] https://www.rospa.com/home-safety/product-safety/amber-beads
[6] https://www.nhs.uk/baby/babys-development/teething/baby-teething-symptoms/

[7] https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/chapter-9-managing-specific-infectious-diseases

We understand that balancing work and family commitments can sometimes be challenging. However, keeping children at home when they are unwell helps us to reduce the spread of infection and protect the wellbeing of all children and staff within the nursery.

Disease / Illness	Minimal Exclusion Period
Prescribed medication	**24 hours** from first dose of medication. *Prescribed creams will be dependent on severity of condition*
Chickenpox	**5 days** from appearance of the rash and, if present, until spots are all dry
Conjunctivitis	No exclusion (if condition worsens seek medical advice)
Hand, Foot, and Mouth	No exclusion unless child appears unwell and is accompanied by other symptoms such as high temperature.
Impetigo	Until lesions are crusted and healed, or **48 hours** after commencing antibiotic. treatment
Measles	**4 days** from appearance of the rash
Mumps	Until the swelling has subsided and in no case **less than 7 days** from onset of illness
Pediculosis *(lice)*	Until appropriate treatment has been given
Pertussis *(whooping cough)*	**48 hours** from commencing antibiotic treatment **or 21 days** from onset of illness. (if no antibiotic treatment)
Raised Temperature	**24 hours** clear of high temperature
Ringworm of body	Seldom necessary to exclude provided treatment is being given
Ringworm of scalp	Until cured
Scabies	Can return after first treatment
Slap cheek	No exclusion
Teething	No exclusion - we can give non prescribed medication for 3 days in a row but after that parent will need to gain permission from their doctor.
Vomiting and Diarrhoea	**48 hours** from last episode of illness

The managers refer to the "UK Health Security Agency and Office for Health Improvement and Disparities" when a child has an illness/disease that is not included on the above list before deciding on whether the child should/should not attend the setting.

The full list of specific infectious diseases guidelines can be seen in the Health Protection in Children and Young People's Settings, Including Education[8]

This policy is to be read in conjunction with:
HS01 Accident and Injury Management Policy
MA05 Medication Policy

[8] https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/chapter-9-managing-specific-infectious-diseases