

Sickness and Illness Policy

At Liberty Kids we promote the good health of all children attending, including oral health, 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
- Asking staff and other visitors not to attend the setting if they are unwell
- Helping children to keep healthy by providing balanced and nutritious snacks, meals and drinks
- Minimising infection through our rigorous cleaning and hand washing processes (see Infection control policy)
- Ensuring children have regular access to the outdoors and having good ventilation inside
- Sharing information with parents about the importance of the vaccination programme for young children to help protect them and the wider society from communicable diseases
- Sharing information from the Department of Health that all children aged 6 months to 5 years should take daily vitamins
- 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.

Our procedures

In order to take appropriate action of children become ill and to minimise the spread of infection we implement the following procedures:

- If a child becomes ill during the nursery day, we contact their parent(s) and ask them to pick up their child as soon as possible. During this time we care for the child in a quiet, calm area with their key worker (wearing PPE), wherever possible
- We follow the guidance on Infection Prevention and Control in Childcare Settings (Day Care and Childminding Settings) given to us by the Infection Control Team Scotland and the exclusion criteria from the 'Childcare and Childminding Settings' guidance 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 notify the Care Inspectorate as soon as possible and in all cases within 14 days of the incident where we have any child or staff member with a notifiable disease such as food poisoning
- We inform all parents if there is a **contagious infection** identified in the nursery, to enable them to spot the early signs of this illness. We thoroughly clean and sterilise all equipment and resources that may have come into contact with a contagious child to reduce the spread of infection
- We adhere to the guidance set out by Health Protection Scotland in their [Infection Control Guidance](#). Exclusion periods are based on the illness the child has not on the medication they are receiving. We have chosen to exclude all children on antibiotics for the first 48 hours of the course (unless this is part of an ongoing care plan to treat individual medical conditions e.g. asthma and the child is not unwell). 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
- We have the **right to refuse admission to a child who is unwell**. This decision will be taken by the **manager on duty and is non-negotiable**

- If any child has been given Calpol or an equivalent medication due to a raised temperature prior to attending nursery, we reserve the right to refuse admission to ensure the health and safety of all children and staff. This decision will be taken by the manager on duty and is non-negotiable
- We make information posters about head lice readily available, and all parents are requested to check their child's hair regularly. If a parent finds that their child has head lice we would be grateful if they could inform the nursery so that other parents can be alerted to check their child's hair
- If a child is found to have live head lice at nursery, they must be collected, treated promptly, and may only return once free of live lice to prevent spreading to others
- Any child with face and or mouth blisters caused by **hand, foot, and mouth disease** must be excluded from nursery until the blisters have fully healed, they are free from fever, and can eat, drink, and participate comfortably
- Due to the **highly contagious nature of eye infections**, children must be excluded from nursery and may only return once they are fully recovered, and all symptoms have completely resolved
- Children with **impetigo must be excluded** from nursery until all sores have crusted over and healed, or for at least 48 hours after starting antibiotic treatment, to prevent the spread of infection.

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 and the Care Inspectorate. 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 ensure that the appropriate authority is notified.

We will follow the transporting children to hospital procedure in any cases where children may need hospital treatment.

The nursery manager **or selected** staff member must:

- Inform a member of the management team immediately
- Call 999 for an ambulance immediately if the illness is severe. **DO NOT** attempt to transport the unwell child in your own vehicle**
- Follow the instructions from the 999-call handler
- Whilst waiting for the ambulance, a member of staff must contact the parent(s) and arrange to meet them at the hospital
- Redeploy staff if necessary to ensure there is adequate staff deployment to care for the remaining children. This may mean temporarily grouping the children together
- Arrange for the most appropriate member of staff to accompany the child taking with them any relevant information such as registration forms, relevant medication sheets, medication and the child's comforter
- Remain calm at all times. Children who witness an incident may well be affected by it and may need lots of cuddles and reassurance. Staff may also require additional support following the accident.

This policy will be reviewed at least annually in consultation with staff and parents and/or after a significant incident, e.g. serious illness and/or hospital visit required.



Sickness and Illness Policy Links to Frameworks and Standards

Links to the Quality Improvement Framework for Early Learning and Childcare (2025):

This policy supports the following areas and Quality Indicators (QIs) from the Care Inspectorate’s latest QIF version:

- **Children thrive and develop in quality spaces**
Quality Indicator: Children experience high quality spaces (pages 25–30) — The policy ensures a safe, hygienic environment through rigorous infection control, regular cleaning, and healthy practices that reduce the spread of illness and promote wellbeing.

- **Children are supported to achieve**
Quality Indicator: Promoting health and wellbeing (pages 40–45) — By encouraging parental involvement, adherence to exclusion guidelines, supporting children’s rest and nutrition, and providing emergency responses to illness, the policy promotes children’s physical health and emotional security.

- **Leadership**
Quality Indicator: Leadership and management of staff and resources (pages 55–60) — Leadership undertakes responsibility for implementing comprehensive health and sickness procedures, staff training, compliance with statutory notifications, and maintaining effective communication with families and authorities.

Health and Social Care Standards (HSCS)

This policy aligns with the following relevant standards:

- **1.24** – Any treatment or intervention that I experience is safe and effective.
- **2.24** – I am helped to feel safe and secure.
- **2.27** – I experience high quality care and support based on relevant evidence, guidance and best practice.
- **3.14** – I have confidence in people because they are trained, competent, and skilled.
- **4.11** – I experience a service that is well led and managed.

United Nations Convention on the Rights of the Child (UNCRC)

This policy supports and promotes the following rights:

- **Article 3** – The best interests of the child must be a primary consideration in all actions concerning children.
- **Article 6** – Every child has the right to life, survival, and development.
- **Article 24** – Every child has the right to the highest attainable standard of health and to facilities for the treatment of illness and rehabilitation of health.
- **Article 19** – Children have the right to be protected from all forms of violence, abuse, neglect and maltreatment.

This policy was adopted on	Approved by	Date for Review
August 2025	Gail Anderson & Samantha Wilson	August 2026