



Illness and Exclusion Policy

Corby Glen Preschool aims to promote a healthy environment for the children in our care and we need your co-operation to support this.

If parents/carers notice their child becoming ill or infectious they must inform the setting and they must have regard to the exclusion list attached and display on the notice board.

If a child becomes ill or infectious at the setting, every effort will be made to contact the parents/carers. It is essential therefore that the setting has up to date information in order to be able to contact the parents/carers during settings hours. If the parent/carer cannot be contacted, staff will endeavour to contact the other named contacts on the child's record.

If the setting is unable to contact a parent/carer or other named contact, Corby Glen Preschool reserves the right to take the child to a general practitioner or hospital in an emergency. Parents/carers will be required to give signed consent for this procedure on registering their child at the setting.

Notification of exposure to infectious diseases Illness/Infectious Diseases Period of Exclusion

If a child contracts any of the infectious diseases stated on the attached form, other parents will be informed by an emergency newsletter and information on the notice board.

If we have reason to believe that any child is suffering from a notifiable disease identified as such in the Public Health (Infection Diseases) Regulations 1988, we will inform the Health Protection Agency and Ofsted.

We will act on any advice given by the Health Protection Agency and inform Ofsted of any action taken.

The Health Protection Agency's list of notifiable diseases can be found at www.hpa.org.uk and is displayed on our parent's notice board.

Further guidance on infection control in schools and childcare settings can also be found at www.hpa.org.uk

The local Health Protection Unit can be contacted on Tel: 01529 416000

East Midlands HPT – 03442254254 (option 1)

This policy has been adopted by Corby Glen Preschool.

Signed on behalf of the setting by:

..... *Chairperson*

..... *Manager*

Date:

Review Date: