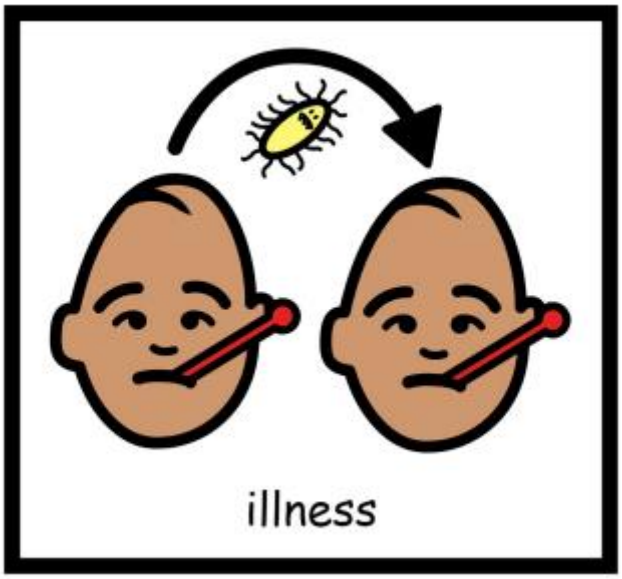
Inspiring Learning Through Play

HALBEATH NURSERY

Family information
Exclusion for illness



Infection/Virus	Exclusion Period	Comments
General Advice	Exclude until 48 hours after the diarrhoea and/or vomiting has stopped Depending on the specific infection, exclusion may apply to: Young children Those who may have hygiene practices difficult to adhere to those who prepare or handle food for others Your local HPT will advise	Diarrhoea is the passage of 3 or more loose or liquid stools per day or more frequently than is normal for the individual If blood is found in the diarrhoea, then the patient should get advice from their GP
Norovirus	48 hours from the last episode of diarrhoea and vomiting	Discussion should always take place between the HPT and Nursery
Campylobacter	48 hours from the last episode of diarrhoea and vomiting	
Salmonella	48 hours from the last episode of diarrhoea and vomiting	
Cryptosporidiosis	48 hours from the last episode of diarrhoea and vomiting	Exclusion from swimming is advisable for two weeks after the diarrhoea has settled
E. coli 0157	Your local HPT will advise	
Shigella (Bacillary Dysentery)	Your local HPT will advise	
Enteric Fever (Typhoid/Paratyphoid)	Your local HPT will advise	
Measles	4 days from onset of rash – always consult with HPT	Preventable by immunisation (MMR x 2 doses). Pregnant staff should seek advice from their GP. Severe infection may occur in vulnerable children. Your local HPT will organise contact tracing
Molluscum Contagiosum	None	A self-limiting condition

Infection/Virus	Exclusion Period	Comments
Ringworm	Exclusion not usually required	Treatment is required
Roseola (Infantum)	None	None
Scabies	Child can return after treatment	Two treatments 1 week apart for cases - contacts should have same treatment – include the entire household and any other very close contacts. If further information is required contact your local HPT
Scarlet Fever	24 hours after commencing antibiotics	Antibiotic treatment recommended for the affected child
Slapped Cheek Syndrome	None	Pregnant staff should seek advice from their GP – severe infection may occur in vulnerable children
Shingle (Varicella Zoster)	Exclude only if rash is weeping and cannot be covered eg with clothing	Can cause chickenpox in those who have not had chickenpox – pregnant staff should seek advice from their GP
Warts and Verrucae	None	Verrucae should be covered in swimming pools
Conjunctivitis	None	If an outbreak occurs, contact local HPT
Diphtheria	Exclusion will apply – always consult with your local HPT	Preventable by vaccination – your local will organise all contact tracing
Glandular Fever	If unwell	

Infection/Virus	Exclusion Period	Comments
Headlice	None	Treatment is recommended only in cases where live lice have definitely been seen. Close contacts should be checked and treated if live lice are found. Regular detection (combing) should be carried out by parents
Hepatitis A or E	Exclude until 7 days after onset of jaundice (or 7 days after symptom onset if no jaundice)	Your HPT will advise
Hepatitis B and C	None	Blood borne viruses that are not infectious through casual contact
Meningococcal Meningitis septicaemia	Until recovered – HPT will advise	Meningitis C is preventable by vaccination – there is no reason to exclude siblings and other close contacts of a case. Your local HPT will provide advice for staff and parents as required and organise all contact tracing
Meningitis due to other bacteria	Until recovered	Hib and pneumococcal meningitis are preventable by vaccination – there is no reason to exclude siblings or other close contacts of a case. Your local HPT will give advice on any action needed
Meningitis Viral	Until recovered	Milder illness - there is no reason to exclude siblings or other close contacts of a case
Mumps	5 days from onset of swollen glands	Preventable by vaccination (MMR x 2 doses)
Threadworms	None	Treatment is required for the child and all household contacts