



Illness, Infection Control & Exclusion Policy

Little Lemon's Childminding

Policy owner	Kayleigh-Anne Thomas
Setting	Little Lemon's Childminding - A Home From Home
Applies to	Children, household members, assistants and visitors
Effective from	August 2026
Review	Annually and whenever UKHSA, NHS or EYFS guidance changes

Please do not bring a child who is unwell. Prompt, honest communication protects every child, my family and the safe running of Little Lemon's.

Unwell Children Must Not Attend

Little Lemon's Childminding

This is a firm condition of attendance

If your child is ill, showing signs of illness, infectious, or not well enough to take part comfortably in the normal day, they must remain at home. Please do not bring an unwell child to the door and ask for them to be accepted.

Why this rule is necessary

- to protect babies and children in my care from avoidable illness and infection
- to protect their families, including vulnerable relatives and pregnant family members
- to make sure an unwell child receives the rest, comfort and individual care they need
- to prevent illness spreading to me or my household, which could force the whole setting to close
- to help Little Lemon's remain safe, reliable and open for every family

Please be aware

- I may refuse attendance at the door if I believe a child is unwell or cannot be cared for safely alongside the other children.
- Fever-reducing medicine or other medication must not be used to hide symptoms so that a child can attend.
- If a child becomes unwell during the session, a parent/carer or emergency contact must collect them promptly.
- Work commitments or difficulty arranging alternative care do not override the illness and exclusion rules.

When in doubt, keep your child at home

Please contact me before the contracted start time if you are unsure whether your child is well enough to attend. I will consider their symptoms, comfort, ability to join the normal routine, the needs of the other children and current health guidance. The detailed exclusion periods in the following pages still apply.

1. Purpose and approach

This policy explains when a child can attend, when they must remain at home, what happens if they become unwell during the day and how infection is prevented and managed. My decisions will consider the child's comfort, the needs of the other children, safe supervision and current public-health guidance.

Published exclusion periods are minimum public-health periods. A child may still need to remain at home after that period if they are not well enough to take part in an ordinary childminding day without one-to-one nursing care.

2. Vaccination requirement

- Children attending Little Lemon's are expected to be up to date with the routine NHS childhood vaccinations appropriate for their age.
- Parents must tell me if a vaccination is delayed, declined or cannot be given, and keep the child's vaccination information up to date.
- A documented medical reason preventing vaccination will be considered sensitively and individually. Advice or a risk assessment may be needed before a place or continued attendance is confirmed.
- During an outbreak or known exposure, a child who is not fully protected may need to remain away for longer on the advice of UKHSA, the NHS or the local Health Protection Team.

This is Little Lemon's admissions and health-protection requirement. It does not replace medical advice, and vaccination information will be handled confidentially.

3. Is my child well enough to attend?

A child should be comfortable enough to join normal play, meals, outings and rest routines. They must stay at home if they:

- have a raised temperature, have needed fever-reducing medicine to appear well, or have not yet been fever-free for 48 hours without that medicine
- have vomited or had diarrhoea within the previous 48 hours
- have an unexplained or new rash that has not been assessed where medical advice is needed
- have more than mild respiratory symptoms, breathing difficulty, a persistent or distressing cough, or thick nasal discharge together with signs that they are unwell
- have a known or suspected contagious illness requiring exclusion
- are unusually sleepy, distressed, in significant pain, unable to eat or drink normally, or unable to participate comfortably
- need a level of one-to-one care that prevents me from safely supervising the other children.

Mild colds

A mild cold or clear runny nose does not automatically prevent attendance if the child has no temperature, is otherwise well and can manage the normal day. I may refuse attendance if symptoms become heavy, the child needs constant close care or there is a wider infection concern.

4. If a child becomes unwell here

- I will comfort the child, monitor them closely and keep them away from others where practical without leaving them unsupervised.
- I will contact a parent or carer and explain the symptoms. Prompt collection will be required when the child is unwell, infectious or cannot participate safely.
- If a parent cannot be reached, I will contact the named emergency contacts in the agreed order.
- I will call 999 or obtain urgent medical help if the child has breathing difficulty, becomes unresponsive, has a seizure, shows signs of a severe allergic reaction or appears seriously ill.
- Symptoms, care given, collection and significant actions will be recorded and shared with the parent.

A child who is sent home must not return simply because medicine has temporarily reduced their symptoms. The relevant exclusion period and the child's overall wellness must both be satisfied.

5. Core exclusion rules

Condition or symptom	Return to Little Lemon's
Raised temperature / fever	After at least 48 hours fever-free, without medicine used to lower the temperature, and when otherwise well.
Vomiting or diarrhoea	At least 48 hours after the final episode and when eating, drinking and behaving normally.
Respiratory infection, flu, RSV or COVID-19	When symptoms are mild, there is no high temperature and the child is well enough for normal activities.
New or unexplained rash	After appropriate medical advice where needed and when contagious causes or other serious concerns have been addressed.
New medication or vaccination	Little Lemon's requires the child to remain at home for 48 hours after a first dose of new medication or a vaccination so a parent can monitor for a reaction. Ongoing routine doses are considered individually.

If a doctor or health professional gives a longer exclusion period, or the Health Protection Team provides case-specific instructions, that advice takes priority.

6. Infectious-disease quick guide

The following reflects the UKHSA exclusion table updated in July 2026. It is a quick reference, not a diagnostic tool.

Infection	Minimum exclusion / return
Chickenpox	Stay away until 5 days after the rash first appears. All remaining blisters should be dry enough to manage safely.
Measles	Stay away until 4 days after the rash started. I must seek public-health advice.
Mumps	Stay away until 5 days after swelling began.
Rubella	Stay away until 5 days after the rash started.
Whooping cough	Stay away until antibiotics have been taken for 2 days, or for 21 days from symptom onset if no antibiotics are taken.
Scarlet fever / Group A strep	Stay away until 24 hours after starting antibiotics.
Impetigo	Stay away until all blisters have formed scabs or 2 days after starting antibiotics.
Ringworm	Return after treatment has started, provided affected areas can be managed hygienically.
Scabies	For children aged 5 and under, return 24 hours after the first treatment.

Measles, diphtheria, meningitis, mpox, tuberculosis and certain serious gastrointestinal infections require professional or Health Protection Team advice before return.

7. Conditions that do not usually require formal exclusion

Condition	Little Lemon's approach
Hand, foot and mouth	No automatic public-health exclusion. The child must still be well, comfortable and able to manage saliva and sores hygienically.
Slapped cheek	No exclusion once the rash appears. Parents must inform me because exposure can be important for pregnant people and some vulnerable contacts.
Conjunctivitis	No automatic public-health exclusion. Attendance may be refused if discharge is heavy, hygiene cannot be managed or the child is unwell. Medical advice may be requested.
Head lice	No exclusion, but parents must begin appropriate treatment promptly and check household contacts.
Threadworms	No exclusion, but parents should seek pharmacy advice, treat as directed and reinforce careful hand hygiene for the household.
Ear infection	No automatic exclusion. The child may attend when comfortable, fever-free and well enough; medical advice should be followed.
Tonsillitis	Return when well and fever-free. If confirmed as Group A strep or scarlet fever, remain away until 24 hours after antibiotics begin.

Even where UKHSA states that exclusion is not required, Little Lemon's may ask a child to remain at home if they are too unwell for the day or their symptoms cannot be managed without compromising safe care for others.

8. Parent responsibilities

- Tell me before the contracted start time when the child will be absent and explain the symptoms or diagnosis.
- Report an infectious illness, new rash, hospital attendance, prescribed antibiotics, significant injury or contact with a serious infection promptly.
- Give accurate information about symptoms, medicine already given and the time of the last dose.
- Keep emergency contacts available and arrange prompt collection when requested.
- Follow the stated exclusion period and do not use medicine to mask symptoms for attendance.

9. Preventing infection

- Handwashing on arrival, before food, after toileting or nappy changes, after outdoor or messy play and after contact with bodily fluids.
- Regular cleaning of toys, equipment, high-touch surfaces, food areas and sleep spaces using suitable products.
- Safe nappy changing, disposal of waste, use of gloves and aprons where appropriate, and careful cleaning of bodily-fluid spills.
- Good ventilation, outdoor play, respiratory hygiene and age-appropriate teaching about coughs, sneezes and tissues.
- Separate towels, bedding, cups and personal items, with laundering at an appropriate temperature.
- Enhanced cleaning and temporary restrictions on shared resources during illness or an outbreak.

10. Outbreaks and notifications

Two or more linked cases, an unusual rise in absence or a serious notifiable infection may require advice from the local Health Protection Team. I will follow UKHSA, NHS, local-authority and Ofsted requirements, including any direction about exclusion, cleaning, notification or temporary closure.

Parents will be informed of relevant exposure without identifying another child. Confidential medical information will only be shared where necessary to protect health, meet a legal duty or obtain professional advice.

11. Illness in my household or affecting me

- If one of my own children or another household member is unwell, they will remain separate from minded children and outside childcare areas as far as reasonably possible.
- I will consider the infection, ability to maintain separation and cleaning, and any advice from a health professional or the Health Protection Team.
- If I am unwell or cannot provide safe care, Little Lemon's will close. Parents will be contacted as soon as possible and no private fee will be charged for care I cannot provide.
- A significant infectious illness in the household may require enhanced cleaning or temporary closure even if I am personally well.

12. Fees during absence

Contracted private fees remain payable when a child is absent through illness, exclusion or a parent decision while Little Lemon's is open. No private fee is charged when I close because I am ill or unable to provide care. Funded absences and closures are recorded and managed under Hertfordshire funding rules.

13. Records and review

I may record symptoms, temperatures, accidents, medicine, care provided, collection times, exclusion advice and relevant communications. Records are kept securely in line with the Confidentiality and Data Protection Policy. This policy will be reviewed annually and sooner when official guidance changes.