

### **Notification of infectious diseases**

- The centre will contact the Health Protection Agency about any outbreaks of infectious diseases, i.e. any unusual increase of illness or group of associated illnesses which may require action and any case of meningitis, and will ask for advice regarding who should be alerted.
- Ofsted would be notified of any food poisoning affecting two or more children looked after on the premises. Centre would also notify Environmental Health for information and any advice needed.

### **Exclusion of pupils with infectious diseases**

- The final decision about exclusion and/or re-admission to centre rests with the Centre Manager.
- If a parent returns a child before the suggested time scale shown for any of the diseases, listed in Appendix 1, Centre Managers have the authority to refuse admission and they would be supported in this action by the Health Protection Agency.
- There may be circumstances when, following discussions between a Centre Manager, the Health Protection Agency and the general practitioner, a child is able to return to centre before the exclusion period expires.
- Should a general practitioner contact a Centre Manager to ask why a particular child had not been allowed to return to centre when he/she had said that this was in order, the general practitioner should be advised to contact the Health Protection Agency if the reason for refusing to re-admit was because the exclusion period for the infectious disease in question had not expired.

### **Communicating risk to other parents and pupils**

- Please see the section below (to be found in appendix to medicines policy) regarding head lice. For other infectious diseases, centre should seek advice from the Health Protection Agency and individual pupils rights of confidentiality recognised at all times.

### **Children returning from long term illness or injury**

- Centre Manager should seek advice from the appropriate Centre Health Service professional if they are concerned about the care and management of a child who has returned to centre following a long term illness or injury.

### **Confidentiality**

- Centre Managers should encourage parents to share information about their child's health particularly where there is concern that this may affect the child's performance at centre.
- In cases where additional information may be needed from Health Service professionals, consent should be sought from the parents.



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The following diseases are statutorily notifiable under the Public Health (Control of Diseases) Act 1984 and Control of Infection Regulations 1988.

*The centre is not responsible for notifying, it is the responsibility of the Doctor concerned.*

So this list is for your information only:

* Acute encephalitis	* Paratyphoid
* Acute meningitis	* Plague
* Acute poliomyelitis	* Rabies
* Anthrax	* Relapsing Fever
* Cholera	* Rubella
* Diphtheria	* Scarlet Fever
* Dysentery	* Smallpox
* Food poisoning (or suspected)	* Tetanus
* Legionnaires	* Tuberculosis
* Leprosy	* Typhoid Fever
* Leptospirosis	* Typhus Fever
* Malaria	*Viral Haemorrhagic Fever
* Measles	*Viral hepatitis (A/B/C) *
* Meningococcal septicaemia	* Whooping Cough
* Mumps	* Yellow Fever
* Ophthalmia neonatorum	

### **Hygiene/Infection Control**

- All staff should be familiar with the normal precautions for avoiding infections and must follow basic hygiene procedures.
- Staff should have access to protective disposable gloves and aprons, and take care when dealing with spillages of blood or other body fluids and disposing of dressings or equipment.
- When spillages occur – i.e. blood, faeces, saliva, vomit, nasal, eye discharges – they should be cleaned using a product combines both a detergent and a disinfection. This should be used according the manufacturer's instructions, but make sure that product is effective against bacteria, and virus's and is suitable for use on the affected surface. **Never** use mops for cleaning up blood and body fluid spillages; instead, use disposable paper towels.