



# Infectious Diseases Policy

## Core Values

Readiness

Resilience

Respect

## School Values

Independence

Ambition

Compassion

Co-operation

Initiative

Enjoyment

Responsibility

Confidence

Celebration

Kindness

Honesty

Individuality

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## **Rationale**

A communicable disease is an infectious disease that is contagious, and which can be transmitted from one source to another by infectious bacteria or viral organisms. Primary responsibility for the prevention and control of infectious diseases lies with individuals, families and public health authorities; however, schools also have an important role to play.

At Kender Primary School, we can support the prevention and control of transmission of infectious diseases by:

- Supporting immunisation programs
- Providing prompt and consistent response to detected or suspected cases of disease.

Kender Primary School is not expected to give expert advice or treat children, which is the role of medical practitioners and health authorities as appropriate.

## **Aim**

To help prevent and control the transmission of communicable diseases in our school and community. Implementation in the event of an infectious disease outbreak, Kender Primary School must:

- Take specific precautions to prevent and control the transmission of infectious diseases;
- Minimise contact with body fluids and substances and have procedures that
  - Protect staff and students and deal with inappropriate student behaviour that could result in exposure to body fluids;
  - Include educating the children about why the behaviour is inappropriate and the potential consequences.

The School Business Manager (SMB) must ensure all first aid kits are appropriately stocked and contains advice on handling spills of body fluids and substances.

## **Precautions**

Specific precautions to assist with infection prevention and control must be followed by all staff in the school at all times. They include hygiene and bodily fluids and substance precautions set out below.

## **Hygiene**

General precautions include:

- Good hygiene practices, particularly washing and drying hands before and after meals, after using the bathroom, after nose blowing, and after contact with contaminated objects.
- The use of protective barriers which can include gloves and masks

- Safe handling of 'sharps'
- Use of non-touch technique, as appropriate.

### **School Cleaners**

Cleaning equipment is maintained to a high standard. The Premises Manager is responsible for monitoring cleaning standards and discussing any issues that may arise with the cleaners.

### **Blood and Other Bodily Fluids**

Interaction between people at schools should minimise contact with body fluids and substances, including:

- blood, whether wet or dry
- secretions
- excretions other than sweat
- other body substances.

Staff members and children should:

- Cover broken skin on their hands or lower arms with waterproof occlusive dressings at all times
- When coughing or sneezing, all staff and children are encouraged to cover their nose and mouth with a disposable tissue and dispose of the tissue after use, and to wash their hands afterwards
- If caught unaware when coughing or sneezing, all staff and children are encouraged to sneeze into the crook of their arms
- Treat blood and other body fluids and substances as being potentially infectious
- Avoid direct contact with blood and other fluids and substances, where possible
- Personal protective equipment (PPE) are worn where there is a risk of contamination with blood or bodily fluids during an activity. Gloves are disposable, non-powdered vinyl or latex. If there is a risk of splashing to the face, goggles should be worn
- Be familiar with recommended hygiene and standard precautions
- Deal with spills:
  - Using single-use gloves, or
  - Until it is possible to get someone wearing gloves to take over, then thoroughly wash their hands and any body parts that were in contact with the spill using warm water and liquid soap.
- Use a resuscitation mask, if available, if mouth-to-mouth resuscitation is required. Note: CPR training should be practiced with the use of a single-use resuscitation mask and manikins should be cleaned, dried and disinfected.

### **Exclusion**

Schools must be aware of, and abide by, exclusion requirements during an outbreak of an infectious disease.

### **Bites**

If a bite does not break the skin, the affected area is cleaned with soap and water.

If a bite breaks the skin, the affected area is cleaned with soap and running water, the incident is recorded in the accident book and medical advice is sought immediately.

### **Preventing the spread of infection**

Parents will not bring their child to school in the following circumstances:

- The child shows signs of being poorly and needing one-to-one care
- The child has untreated conjunctivitis
- The child has a high temperature/fever
- The child has untreated head lice
- The child has been vomiting and/or had diarrhoea within the last 48 hours
- The child has an infection and the minimum recommended exclusion period has not yet passed

### **Vulnerable children**

Children with impaired immune defence mechanisms (known as immune-compromised) are more likely to acquire infections. In addition, the effect of an infection is likely to be more significant for such children. These children may have a disease that compromises their immune system or be undergoing treatment, such as chemotherapy, that has a similar effect.

If a vulnerable child is thought to have been exposed to an infectious disease, the child's parents/carers will be informed and encouraged to seek medical advice from their doctor or specialist.

### **Procedures for unwell children/staff**

Staff are required to know the warning signs of children becoming unwell including, but not limited to, the following:

- Not being themselves
- Not having a snack
- Not eating at lunchtimes
- Wanting more attention/sleep than usual
- Displaying physical signs of being unwell, e.g. watery eyes, a flushed face or clammy skin

Where a staff member identifies a child as unwell, the child is taken to the School Office. Their temperature will be taken by a first aider, and the child's parents/carers will be informed of the situation. Staff will:

- Attempt to cool the child down if they are too hot, by opening a window and suggesting that the child removes their top layers of clothing.
- Provide the child with a drink of water.
- Move the child to a quieter area of the classroom or school.
- Ensure there is a staff member available to comfort the pupil.
- Summon emergency medical help if required.

Children and staff displaying any of the signs of becoming unwell will be sent home, and we will recommend that they see a doctor.

If a child is identified with sickness and diarrhoea, the pupil's parents/carers will be contacted immediately and the child will be sent home and may only return after 48 hours have passed without symptoms.

If the school is unable to contact a pupil's parents in any situation, the pupil's alternative emergency contacts will be contacted.

If a staff member is suffering from vomiting and diarrhoea, they will be sent home and may not return until 48 hours have passed without symptoms.

### **Contaminated clothing**

If the clothing of the first-aider or a child becomes contaminated, the clothing is removed as soon as possible and placed in a double plastic bag. The pupil's clothing is sent home with the pupil, and parents are advised of the best way to launder the clothing.

### **Exclusion**

Children suffering from infectious diseases will be excluded from school on medical grounds for the minimum recommended period.

If parents insist on their child returning to school when the child still poses a risk to others, the LA may serve notice on the child's parents to require them to keep the child away from school until the child no longer poses a risk of infection.

If a child is exposed to an infectious disease, but is not confirmed to be infected, this is not normally a valid reason for exclusion; however, the local health protection team (HPT) may be contacted to advise on a case-by-case basis.

### **Medication**

Where a child has been prescribed medication by a doctor, dentist, nurse or pharmacist, the first dose will be given at home, in case the child has an adverse reaction.

The child will only be allowed to return to school 24 hours after the first dose of medication, to allow it time to take effect.

All medicine provided in school will be administered in line with the Administering Medication Policy.

### **Outbreaks of infectious diseases**

An incident is classed as an 'outbreak' where:

- Two or more people experiencing a similar illness are linked in time or place.

- A greater than expected rate of infection is present compared with the usual background rate e.g.:
  - Two or more children in the same classroom are suffering from vomiting and diarrhoea.
  - A greater number of children than usual is diagnosed with scarlet fever.
  - There are two or more cases of measles at the school.

Suspected outbreaks of any of the diseases listed in the “Spotty Book” will always be reported.

As soon as an outbreak is suspected (even if it cannot be confirmed), the headteacher will contact the Lewisham HPT to discuss the situation and agree if any actions are needed.

The headteacher will provide the following information:

- The number of staff and children affected
- The symptoms present
- The date(s) the symptoms first appeared
- The number of classes affected

If the headteacher is unsure whether suspected cases of infectious diseases constitute an outbreak, they will contact the HPT.

The HPT will provide the school with draft letters and factsheets to distribute to parents. The HPT will always treat outbreaks in the strictest confidence; therefore, information provided to parents during an outbreak will never include names and other personal details.

If a parent informs the school that their child carries an infectious disease, the infectious disease controls are checked to see if they are allowed in school, if they are, other children will be observed for similar symptoms by their teachers

If a child is identified as having a notifiable disease, the school will inform the parents.

During an outbreak, enhanced cleaning protocols will be undertaken, following advice provided by the local HPT. The SBM will liaise with the cleaning contractor to ensure these take place.

### **Pregnant staff members**

If a pregnant staff member develops a rash or is in direct contact with someone who has a potentially contagious rash or infectious disease, we will strongly encourage her to speak to her doctor or midwife. This includes but is not limited to: chickenpox, measles, rubella, slapped cheek disease.

### **Staff handling food**

Food handling staff suffering from transmittable diseases will be excluded from all food handling activity until advised by the local Environmental Health Officer that they are clear to return to work. Both food handling staff and midday assistants are not permitted to attend work if they are suffering from diarrhoea and/or vomiting. They are not permitted to return to work until 48 hours have passed since diarrhoea and/or vomiting occurred.

In some cases, a medical certificate provided by a registered medical practitioner must be received prior to readmission to classes can be allowed.

### **Contact with pets and animals**

Animals in schools are strictly controlled:

- The school only considers the following animals as school pets: chickens, hamsters, guinea pigs and rabbits.
- Animals in school are only permitted in the following areas: classrooms / dedicated outdoor areas.
- All animals receive recommended treatments and immunisations,
- Bedding is changed on a **weekly** basis.
- Feeding areas are kept clean and pet food is stored away from human food.
- The headteacher ensures that a knowledgeable person is responsible for each animal.

Visits to farms are strictly controlled by the policies and protocols contained in their individual risk assessment.

Visits to zoos are strictly controlled and refer to their own risk assessment.

Parents &/or carers have a responsibility to inform the Head Teacher as soon as practicable if a child is infected with any infectious or communicable disease or has been in contact with an infected person

## **Appendix 1**

**“The Spotty Book Notes on infectious diseases in Schools and Nurseries”  
which outlines the minimum periods of exclusion from Primary Schools for  
infectious diseases cases and contacts.**



## **Appendix 2**

### **Infection Control During the Coronavirus Pandemic**

**This appendix has been created in line with guidance from the Department for Education (DfE) and Public Health England (PHE).**

#### **Statement of intent**

We understand that we face a time of great uncertainty and, as a school, we are doing all we can to provide clarity and safety for the school community. This appendix includes provisions which the school will have due regard for during the coronavirus pandemic. The information in this section is under constant review and is updated to reflect changes to government guidance as it is released.

#### **Legal framework**

This policy has due regard to all relevant legislation and statutory guidance including, but not limited to, the following:

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/1048357/220119\\_Schools\\_guidance\\_January.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1048357/220119_Schools_guidance_January.pdf)

<https://www.gov.uk/government/publications/covid-19-decontamination-in-non-healthcare-settings>

#### **Social distancing measures**

The school will adhere to the current government's social distancing guidelines as much as is possible.

#### **Additional hygiene and cleaning measures**

All children will be:

- Told to frequently wash their hands with soap and water for 20 seconds or sanitise.
- Encouraged not to touch their faces.
- Told to use a tissue or their elbow to catch coughs or sneezes and use bins for tissue waste.
- Children who have difficulty washing their hands will be supported by a member of staff.

Staff will ensure thorough handwashing before and after supporting children who need help with nappy changing, going to the toilet or eating.

All children will bring their own water bottle to school with them, and an outlet will be available for them to refill.

#### **Ventilation**

To reduce the risk of transmission, all staff should increase the air flow and ventilation by opening windows and doors (not fire doors) and planning outside lessons where possible.

### **Preventing the further spread of infection**

If anyone becomes unwell with the symptoms of coronavirus, they will be sent home and advised to follow PHE's 'COVID-19: guidance for households with possible coronavirus infection'.

The school promotes active engagement with **NHS Test and Trace**.

### **Lateral Flow Testing**

Every member of staff is asked to take a lateral flow test twice a week, on Tuesday and on Friday, logging the results with the NHS and on the School's Management Information System (Arbor).

### **Child Displaying Symptoms**

If a child displays symptoms, their parent is contacted immediately and they are sent home. The child cannot come back into school until they have no symptoms and have tested negative.

### **Communication with parents**

The school will inform parents about the measures being taken and request they provide support with implementation, eg by encouraging measures to continue at home.

### **Children with Special Educational Needs and Disabilities (SEND)**

The school will work with the LA and parents to decide how best to continue supporting children with Educational Healthcare (EHC) plans whilst ensuring they stay healthy and safe.

Some children with SEND or complex needs may be unable to follow social distancing guidelines. In these circumstances, staff will increase their level of self-protection by minimising close contact (where appropriate), wearing PPE, cleaning frequently touched surfaces, and carrying out more frequent handwashing.

### **Monitoring and review**

The headteacher is responsible for continually monitoring UK Health Security Agency (UKHSA) / Government and DfE updates and updating this appendix in line with any changes to government guidance.

Any changes to this appendix will be communicated to all staff, parents and relevant stakeholders.