



## Exclusion Criteria for Daycare and Childminding Settings

### Recommended time to be kept away from daycare and childminding

#### Main points

- Any child or staff member who is unwell should not attend, regardless of whether they have a confirmed infection.
- Children or staff with diarrhoea and/or vomiting should be excluded until they have had no symptoms for 48 hours after an episode of diarrhoea and/or vomiting.
- Coughs and runny noses alone need not be a reason for exclusion but if the child is unwell they should not attend.
- Skin rashes should be professionally diagnosed and a child should only be excluded following appropriate advice.
- Certain individuals exposed to an infection, for example an immunocompromised child who is taking long term steroid treatment or has cancer, may require specific advice from their GP.
- Children should only be excluded when there is good reason. If in doubt contact a member of the Health Protection Team (HPT).
- If an outbreak of infection is suspected the local Health Protection Team should be contacted.

#### Further information can be found in:

Infection Prevention and Control in Childcare Settings (Day Care and childminding settings) <http://www.hps.scot.nhs.uk/haic/ic/guidelinedetail.aspx?id=47103>

Information on current immunisation schedule for children can be found at <http://www.immunisationscotland.org.uk/index.aspx>

#### If you have any questions please contact

NHS Lanarkshire (NHS L)  
Health Protection Team (HPT)

Department of Public Health  
NHSL Headquarters  
Kirklands  
Fallside Road  
Bothwell  
G71 8BB

Telephone:

**01698 858232**

*If you would like to provide any feedback on this form please email:-*  
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# Exclusion Criteria for Daycare and Childminding Settings

**Recommended time to be kept away from daycare and  
childminding**

NHS Lanarkshire  
Health Protection Team  
(NHS L HPT)  
**01698 858232**

Infection/Virus	Exclusion period	Comments
<b>DIARRHOEA AND VOMITING ILLNESS</b>		
General Advice	Exclude until 48 hours after the diarrhoea and/or vomiting has stopped. Depending on the specific infection, exclusion may apply to: <ul style="list-style-type: none"> <li>• young children;</li> <li>• those who may find hygiene practices difficult to adhere to;</li> <li>• those who prepare or handle food for others.</li> </ul> NHS L 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.
Diarrhoea and/or vomiting	48 hours from last episode of diarrhoea or vomiting.	
Cryptosporidiosis	Exclude for 48 hours from the last episode of diarrhoea.	Exclusion from swimming is advisable for two weeks after the diarrhoea has settled.
<i>E. coli</i> O157 VTEC Typhoid and paratyphoid (enteric fever) <i>Shigella</i> (dysentery)	Should be excluded for 48 hours from the last episode of diarrhoea. Further exclusion may be required for some children until they are no longer excreting.	Further exclusion is required for children aged five years or younger and those who have difficulty in adhering to hygiene practices.
Infection/Virus	Exclusion period	Comments
<b>RESPIRATORY INFECTIONS</b>		
Flu (influenza)	Until recovered.	Severe infection may occur in those who are vulnerable to infection.
Tuberculosis (TB)	Until deemed no longer infectious; consult with NHS L HPT.	Requires prolonged close contact for spread.
Whooping cough (Pertussis)	Five days from starting antibiotic treatment or 21 days from onset of illness if no antibiotic treatment.	Preventable by vaccination. After treatment non-infectious coughing may continue for many weeks. NHS L HPT will organise any contact tracing if required.
Infection/Virus	Exclusion period	Comments
<b>RASHES/SKIN</b>		
Athlete's foot	None.	Not serious infection; child should be treated.
Chickenpox (Varicella Zoster)	Until all vesicles have crusted over (usually five days).	Pregnant staff should seek advice from their GP if they have no previous history of having the illness.
Cold sores (herpes simplex)	None.	Avoid kissing and contact with the sore.
German measles (rubella)	Six days from onset of rash.	Preventable by immunisation (MMR x 2 doses). Pregnant staff should seek advice from their GP.
Hand, foot and mouth (coxsackie)	None.	If a large number of children affected contact NHS L HPT as exclusion may be required.
Impetigo (Streptococcal Group A skin infection)	Until lesions are crusted or healed or 48 hours after starting antibiotics.	Antibiotics reduce the infectious period.
Measles	Four days from onset of rash. Always consult with NHS L HPT.	Preventable by immunisation (MMR x 2 doses). Pregnant staff should seek advice from their GP. Severe infection may occur in vulnerable children. NHS L HPT will organise contact tracing.
Molluscum contagiosum	None.	Self-limiting condition.
Ringworm	Not usually required unless extensive.	Treatment is required.
Roseola (infantum)	None.	
Scabies	Until first treatment has been completed.	Two treatments are required including treatment for close contacts.
Scarlet fever	Child can return 24 hours after starting antibiotic treatment.	Antibiotic treatment is recommended for the affected child.
Slapped Cheek/fifth disease Parvovirus B19	None (once rash has developed).	Pregnant staff should seek advice from their GP. Severe infection may occur in vulnerable children.
Shingles (Varicella zoster)	Exclude only if rash is weeping and cannot be covered.	Can cause chickenpox in those who are not immune, i.e. have not had chickenpox. It is spread by very close contact and touch. Pregnant staff should seek advice from their GP.
Warts and Verrucae	None.	Verrucae should be covered in swimming pools, gymnasiums and changing rooms.
Infection/Virus	Exclusion period	Comments
<b>OTHER INFECTIONS</b>		
Conjunctivitis	None.	
Diphtheria	Exclusion is essential.	Preventable by vaccination. NHS L HPT will organise all contact tracing. Exclusion is essential. Family contacts must be excluded until cleared to return by the HPT.
Glandular Fever	None.	
Head lice	None.	Treatment is recommended only in cases where live lice have been seen.
Hepatitis A or E	Exclude until seven days after onset of jaundice (or seven days after symptom onset if no jaundice).	
Hepatitis B, C or HIV/AIDS	None.	Hepatitis B and C and HIV are blood-borne viruses that are not infectious through casual contact.
Meningococcal meningitis/septicaemia	Until recovered. NHS L HPT will advise.	Meningitis B, C and ACWY is preventable by vaccination. There is no reason to exclude siblings and other close contacts of a case. NHS L HPT will provide advice for staff and parents as required and organise all contact tracing. In case of an outbreak, it may be necessary to provide antibiotics with or without meningococcal vaccine to close school contacts.
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.
Meningitis viral	Until recovered.	Milder illness. There is no reason to exclude siblings and other close contacts of a case. Contact tracing is not required.
MRSA	None.	Good hand hygiene and environmental cleaning. If further information is required contact NHS L HPT.
Mumps	Exclude child for five days after onset of swelling.	Preventable by vaccination (MMR X 2 doses).
Threadworms	None.	Treatment is required for the child and all household contacts.
Tonsillitis	None.	There are many causes, but most cases are due to viruses and do not need an antibiotic.