



**Welcome
New starts
and moving
rooms**

Babies

Raindrop room- Rainham
Seahorse room - Loughton
Sweetpea room - Romford

DAILY CONTACT

Daily Communication will be shared via the Tapestry portal. This will include information about your baby's day including sleep times, nappy changes, how much they have eaten and activities they have participated in that day. There is space for you to add comments about their sleep that night or any other information. Always feel free to talk to us daily on drop off and collection too.

WHAT DO I NEED TO BRING ?

A small bag with the following:

- Nappies & Wipes (a packet of wipes and medium packet of nappies is advised)
- Nappy Cream if used
- Two changes of clothes
- Coat, hat, gloves, sun hat (weather dependent)
- Milk bottles (Can be stored at nursery)
- Water beaker (Can be stored at nursery)
- Named milk powder tin (to be left at nursery)
- Expressed breast milk (further information can be provided if you wish to provide breast milk)
- Dummy/ blanket/ soother
- Teething gel powder
- Soft sole slippers

Please write or label your child's name in every item brought to nursery!

WHAT WILL BE PROVIDED ?

- Blankets and sheets which are laundered on site
- Breakfast, snacks, lunch and dinner (Milk and water provided across the day)
- Daily care diary via the Tapestry online portal
- Learning Journey recorded on line via the Tapestry portal

NAPPY CHANGES

There is a designated nappy change area. Children will be changed as and when required to meet their individual needs. If your baby is using any nappy cream please can you provide the nursery with a tube or tub with your child's name clearly visible.

INFECTION CONTROL

Please see the nursery website with a list of the exclusion periods for childhood illnesses.

BOTTLE PREPARATION

The staff will make the bottle up according to the measurements in the child's records by using A Tommee Tpee prep machine. A fresh bottle of formula for your baby at the perfect temperature will be made in less than two minutes flat. The amount of milk drank will be logged in your daily care diary on tapestry.

DAILY ACTIVITIES

Babies will follow the Early Years Foundation Stage curriculum and we will encourage early speech and language skills through songs, rhymes and games. Babies will be encouraged to be independent by supporting them to feed themselves, explore and participate in lots of sensory experiences. We provide lots of opportunities to access our delightful outdoor play areas. See the nursery website for virtual tours and information on our outdoor learning.

MEDICATION

Please note all medication must be prescribed by the doctor with the Child's name, date of birth and be in date. Any medication given by the nursery senior staff must have parental consent by completing a medication form. Regular medication such as asthma inhalers and epipens need to be left at the nursery in our medicine box, so please request a duplicate from your Doctor to retain at home. We do not administer paracetamol unless for ongoing pain management as directed by a Doctor. We will continue a course of antibiotics after the first 48 hours have been administered at home, and if your child is well enough to be in nursery.

SLEEPTIME

We understand all babies have different sleep patterns and we will accommodate routines and sleep patterns where possible. There are cots and sleep-mats/beds available for babies to sleep in/or on (age appropriate) . A staff member will always oversee sleeping babies and check every 5 minutes for an under one and 10 minutes for over 1 years old. Sleep will be recorded and shared with you on the daily care diary on tapestry.

STERILISING AND CLEANING

We understand that at this age all babies explore by using their mouths. We do not want to discourage this exploration but understand the need for high standards of cleanliness at all times. Any toys which children place in their mouths will be sterilised as required. Likewise, we understand babies will be crawling around on the floor so it is paramount the floor areas remain clean and hygienic. We will have strict slipper policy to ensure this is maintained.

6 WEEK REVIEW

After six weeks we will invite you to meet with the nursery manager to discuss how your child has settled and jointly agree a baseline starting point for your child using the Early Years Foundation Stage as a guide.

Toddlers

Rainbow room - Rainham
Jellyfish/Turtle room - Loughton
Bluebell room - Romford

DAILY CONTACT

Daily communication will be shared via the care diary on the Tapestry portal about your toddler's day including sleep times, nappy changes or potty training and how much they have eaten and activities they have participated in that day. There is space for you to add comments in about their sleep that night or any other information. Always feel free to talk to us daily on drop off and collection too.

*These will be completed until the child is 2yrs old.

WHAT DO I NEED TO BRING DAILY?

A Small bag with the following:

- Two changes of clothes
- Coat, hat, gloves, sun hat (weather dependent)
- Milk bottle (if required)
- Dummy/ blanket/ soother

Please write or label your child's name in every item brought to nursery!

WHAT WILL BE PROVIDED?

- Blankets and sheets which are laundered on site
- Breakfast, snacks, lunch and dinner (Milk and Water across the day)
- Daily communication via our online portal (see above)
- Learning Journey online

NAPPY CHANGES

There is a designated nappy change area. Children will be changed as and when required to meet their individual needs. If you toddler is using any nappy cream please can you provide the nursery with a tube or tub with your child's name clearly visible.

DAILY ACTIVITIES

Toddlers will follow the Early Years Foundation Stage curriculum and will be supported to develop early speech and language skills through songs, rhymes and games. Toddlers will be encouraged to be independent by supporting them to feed themselves and become more mobile through developing physical movement. This will allow them to explore the nursery and everything is has to offer through sand and water play, construction play, small world , early maths and literacy to name a few aspects of the curriculum on offer.

TOILETTING

Young children are encouraged to take an interest in using the toilet; they may just want to sit on it and talk to a friend who is also using the toilet. We will speak positively about using the potty or toilet and not make a fuss of accidents. We will remind children regularly if they need the toilet and take the children at regular intervals such as mealtimes and before they go to the garden area. Please always pack lots of spare clothes when going through the toilet training stage, as accidents are normal and will happen.

MEDICATION

Please note all medication must be prescribed by the doctor with the child's name, DOB and be in date. Any medication given by the nursery senior staff must have parental consent by completing a medication form. Regular medication such as asthma inhalers and epipens need to be left at the nursery in our medicine box, so please request a duplicate from the doctors. We do not administer paracetamol unless for ongoing pain management as directed by a GP. We will continue a course of antibiotics after the first 48 hours have been administered at home, and if your child is well enough to be in nursery.

INFECTION CONTROL

Please see the nursery website with a list of the exclusion periods for childhood illnesses.

SLEEPTIME

We understand all toddlers have different sleep patterns and we will accommodate routines and sleep patterns where possible. We will have a calm, quiet session after lunch when most children will sleep if needed. There are sleep mats available for every child. A staff member will always oversee sleeping children and record sleep times and checks every 10 minutes.

STERILISING AND CLEANING

We understand that at this age all toddlers explore by using their mouths. We do not want to discourage this exploration but understand the need for high standards of cleanliness at all times. Any mouthed toy will be placed cleaned as required.



Pre-school

Sunshine room - Rainham

Dolphin room - Loughton

Sunflowers room- Romford

DAILY CONTACT

By the time children reach the preschool room they are able to express themselves verbally and tell you about their day. We therefore feel the best use of the pre-school staff time is to be with the children and scaffold their learning and development, therefore Daily Communication Sheets will not be provided within these rooms. Your child's progress can be viewed on tapestry.

WHAT DO I NEED TO BRING?

A small bag with following:

- A change of clothes
- Coat, hat, gloves, sun hat (weather dependent)

Please write or label your child's name in every item brought to nursery!

WHAT WILL BE PROVIDED?

- Breakfast, snacks, lunch and dinner (Milk and Water across the day)
- Learning Journey online

DAILY ACTIVITIES

Pre-schoolers will follow the Early Years Foundation Stage curriculum and build speech and language skills through circle time activities and songs and rhymes. They will be encouraged to be independent by understanding their toileting needs and dietary requirements. They will explore the preschool and everything it has to offer through sand and water play, block play, small world and construction; and developing maths and literacy skills. We will follow Phase 1 Letters and Sounds programme

TOILETTING

By the time your child enters our preschool rooms most will be toilet trained. We will remind children regularly if they need the toilet and take the children at regular intervals such as mealtimes and before they go to the garden area. Children will be accompanied to the toilets in pairs and ensure they wash their hands and maintain high levels of personal hygiene. Children will be encouraged to clean their bottoms independently of an adult to support them in preparation for school.

MEDICATION

Please note all medication must be prescribed by the doctor with the child's name, DOB and be in date. Any medication given by the nursery senior staff must have parental consent by completing a medication form. Regular medication such as asthma inhalers and epipens need to be left at the nursery in our medicine box, so please request a duplicate from the doctors. We do not administer paracetamol unless for ongoing pain management as directed by a GP. We will continue a course of antibiotics once 48 hours have been administered already, and if your child is well enough to be in nursery.

INFECTION CONTROL

Please see the nursery website with a list of the exclusion periods for childhood illnesses.



Health & Welfare

DAILY FOOD TIMES

Breakfast (8-8.45am) - A range of cereals

Mid-Morning Snack (10am) - Selection of seasonal fruit

Lunch (11.45 -12pm) - Hot lunch including dessert

Mid Afternoon Snack (2.30pm) - rice cakes/breadsticks/toast/oat biscuits

Tea (4pm) - Cold or hot meal including a dessert

Milk and Water served throughout the day

MENUS

Take a look at the nursery website for our seasonal menu

ALLERGIES & DIETARY

When your child joins we will gather information on your child's dietary and allergy needs. a comprehensive care plan will be completed to enable the nursery manager to provide a menu for your child which caters for their individual needs. We cannot cater to a parents preference but will provide nutritious and balanced meals to support any allergy requirements or dietary needs linked to health or religion.

FIVE STAR FOOD RATING

Each New Beginnings Nursery holds a 5 star food hygiene rating, this is the highest rating you can receive from the environmental health team. We are understandably proud of this, especially as we have held this award consistently for a number of years. The rating is based on unannounced inspections from an environmental health officer who reviews our systems of processes as well as the actual practice of our chefs and staff on the day.

Awards for health

At New Beginnings we are always looking at ways in which we can promote and support children's healthy eating and well being. We have been taking part in a variety of awards and accreditation which support and encourage this across all of our nursery settings. We gained our accreditation in the 'Soil Associations Food For Life Early Years Award' in March 2018. We have now completed our 'Healthy Early Years London Award' and received our first steps, bronze, silver and gold accolades. We are committed to ensuring all our children get the best possible start in life.

Weaning programme

Our aim is to follow each child's unique feeding routine. There are dedicated milk kitchens in our 0-2 rooms (at Loughton and Romford and within the main kitchen area at the Rainham branch) where we store and prepare bottles for formula and breast milk feeds. Mothers still breastfeeding are more than welcome to bring in expressed milk for their child to have at nursery. Children under 12 months will be offered foods at their stage of weaning which is always discussed between the manager and parent at settling in Zoom session. We create individual weaning plans to support each child's stage of development.



Our morning routine

Parents/carers and nursery staff create an individual care plan for each child taking into account the children's needs and requirements. This care plan is then built into our daily routines to ensure children are given appropriate individual attention throughout the day.



8am

Welcome Time

A time for staff to greet parents and welcome children.

8am to 8.45am

Breakfast and child led play

9am to 11.30am

Group Time / Register

This can include flash cards, the opportunity chance to talk about the weather, listen to stories and participate in learning new songs. This time encourages group speaking and listening activities, helping the children develop their social skills.

Continuous/Enhanced and Focussed activities

During this period, children have access to 'continuous provision' such as the sand, water, role-play, small world, construction, maths, literacy, creative learning and other active learning experiences. Continuous provision can enable children to explore recent learning, practice new skills, and follow their own interests. Early years practitioners will enhance areas of the provision setting up adult-initiated activities which match our termly topics or the interests of the children. This combination of continuous and enhanced provision gives key people a context within which they can set their adult-led activities which are focussed on each child's individual "next steps" in their development. This enables each child to have plenty of opportunities to practice and improve skills, knowledge and confidence in active, independent learning.

Nappy changing/ potty training and care routines

Snack Time

All children will be given the opportunity to sit down for snack fully supervised by staff. Staff will support feeding/drinking where required.

Outdoor time

This is a time for the children to discover and learn in our garden area (Weather permitting)

11.30 - 12.30pm

Tidy up time and story time prior to lunch.

Lunch Time

The children join their friends and key people for a healthy, fresh, home cooked meal. During lunch they are learning about good table manners and healthy eating.



Our Afternoon routine

Parents/carers and nursery staff create an individual care plan for each child taking into account the children's needs and requirements. This care plan is then built into our daily routines to ensure children are given appropriate individual attention throughout the day.

12.30pm to 2pm

Sleep/ Rest Time

A time for the children to sleep/rest.

Group Time / Welcome Children

This will include taking the register, flash cards, weather board, singing and music.

Continuous/Enhanced and Focussed activities

During this period, children have access to 'continuous provision' such as the sand, water, role-play, small world, construction, maths, literacy, creative learning and other active learning experiences. Continuous provision can enable children to explore recent learning, practice new skills, and follow their own interests. Early years practitioners will enhance areas of the provision setting up adult-initiated activities which match our termly topics or the interests of the children. This combination of continuous and enhanced provision gives key people a context within which they can set their adult-led activities which are focussed on each child's individual "next steps" in their development. This enables each child to have plenty of opportunities to practice and improve skills, knowledge and confidence in active, independent learning.

Nappy changing/ potty training and care routines

2pm to 4pm

Snack Time

All children will be given the opportunity to sit down for snack fully supervised by staff. Staff will support feeding/drinking where required

Outdoor Time

This is a time for the children to discover and learn in our garden area.

Tidy up time /Washing Hands and circle time (singing, stories, puppets)

4pm to 6pm

Tea Time

Children help to prepare the tea table and are encouraged to develop their social and independence skills alongside their peers.

Nappy changing/ potty training and care routines

Outdoor Time

This is a time for the children to discover and learn in our garden area (Weather permitting)

Enhanced activities from the afternoon session.

Home Time

This is a time for the children to choose toys/activities that they enjoy playing with. As parents arrive to collect their children we give them feedback on their child's activities during the



Infection control

Guidance on infection control in schools and other childcare settings



March 2017

Prevent the spread of infections by ensuring routine immunisation, high standards of personal hygiene and practice, particularly handwashing, and maintaining a clean environment. Please contact the Public Health Agency Health Protection Duty Room (Duty Room) on 0300 555 0119 or

visit www.publichealth.hscni.net or www.gov.uk/government/organisations/public-health-england if you would like any further advice or information, including the latest guidance. Children with rashes should be considered infectious and assessed by their doctor.

Rashes and skin infections	Recommended period to be kept away from school, nursery or childminders	Comments
Atelier's foot	None	Atelier's foot is not a serious condition. Treatment is recommended.
Chickpox*	Until all vesicles have crusted over	See Vulnerable children and female staff - pregnancy
Cold sores (Herpes simplex)	None	Avoid kissing and contact with the sores. Cold sores are generally mild and self-limiting.
Current vesicles (shingles)	Four days from onset of rash (see 'Chicken pox')	Preventable by vaccination (ZOVIR + 2 doses). See female staff - pregnancy
Hand, foot and mouth	None	Contact the Duty Room if a large number of children are affected. Exclusion may be considered in some circumstances.
Impetigo	Until lesions are crusted and healed, or 48 hours after commencing antibiotic treatment	Antibiotic treatment speeds healing and reduces the infectious period.
Measles*	Four days from onset of rash	Preventable by vaccination (MMR + 2). See Vulnerable children and female staff - pregnancy. A self-limiting condition.
Molluscum contagiosum	None	A self-limiting condition.
Rubella*	Exclusion not usually required	Treatment is required.
Scabies (infestation)	None	None.
Scabies	CHILD can return after first treatment	Household and close contacts require treatment.
Scarlet fever*	CHILD can return 24 hours after commencing appropriate antibiotic treatment	Antibiotic treatment recommended for the affected child. If more than one child has scarlet fever contact the Duty Room for further advice.
Shed skin (ZOVIR, disease or parvovirus B19)	None once rash has developed	See Vulnerable children and female staff - pregnancy
Shingles	Exclude only if rash is weeping and cannot be covered	Can cause chickpox in those who are not immune to it. See 'not had chickpox' - it is spread by very close contact and cough. If further information is required, contact the Duty Room. See Vulnerable children and female staff - pregnancy
Warts and verrucae	None	Verrucae should be covered in swimming pools, gymnasiums and changing rooms.

Diarrhoea and vomiting illness	Recommended period to be kept away from school, nursery or childminders	Comments
Diarrhoea and/or vomiting	48 hours from last episode of diarrhoea or vomiting	
E. coli O157 (EHEC)	Should be excluded for 48 hours from the last episode of diarrhoea	Further exclusion is required for young children under 16 and those who have difficulty adhering to hygiene practices.
Typhoid* (and paratyphoid) (enteric fever)	Further exclusion may be required for some children until they are no longer excreting	Children in these categories should be excluded until they are no longer excreting. This guidance may also apply to some contacts of cases who may require microbiological clearance.
Shigella* (dysentery)	None	Please consult the Duty Room for further advice.
Cryptosporidium*	Exclude for 48 hours from the last episode of diarrhoea	Exclusion from swimming is advised for two weeks after the diarrhoea has ceased.

Respiratory infections	Recommended period to be kept away from school, nursery or childminders	Comments
Flu (influenza)	Until recovered	See Vulnerable children.
Tuberculosis*	Always consult the Duty Room	Requires prolonged close contact for spread.
Whooping cough* (pertussis)	48 hours from commencing antibiotic treatment, or 21 days from onset of illness if no antibiotic treatment	Preventable by vaccination. After treatment, additional coughing may continue for many weeks. The Duty Room will organise any contact tracing necessary.

Other infections	Recommended period to be kept away from school, nursery or childminders	Comments
Conjunctivitis	None	If an outbreak/outlet occurs, consult the Duty Room.
Hygiene* *	Exclusion is essential. Always consult with the Duty Room.	Family contacts must be excluded until deemed to return by the Duty Room. Preventable by vaccination. The Duty Room will organise any contact tracing necessary.
Chlamydia fever	None	
Head lice	None	Treatment is recommended only in cases where lice has been seen.
Herpes* *	Exclude until seven days after onset of (painful or severe) days after symptom onset if seen (see 'chicken pox')	The duty room will advise on any vaccination or other control measures that are needed for close contacts of a single case of herpes A and for suspected outbreaks.
Herpes* B, C, HHV-8/2/5	None	Herpes B and C and HHV-8 are bloodborne viruses that are not infectious through casual contact. For cleaning of body fluid spills, see Good Hygiene Practice.
Herpes* (genital)	Until recovered	Some forms of herpetic disease are preventable by vaccination (see immunisation schedule). There is no reason to exclude during or after close contacts of a case, by use of an outbreak, it may be necessary to provide antibiotics with or without serological vaccination to close contacts. The Duty Room will advise on any action needed.
Herpes* (due to other factors)	Until recovered	Herpetic and genital herpes are preventable by vaccination. There is no reason to exclude during or after close contacts of a case. The Duty Room will give advice on any action needed.
Herpes* (viral)	None	Milder illness. There is no reason to exclude during or after close contacts of a case. Contact tracing is not required.
HSA	None	Good hygiene, in particular handwashing and environmental cleaning, are important to minimise any danger of spread. If further information is required, contact the Duty Room.
Mumps*	Exclude child for five days after onset of swelling	Preventable by vaccination (MMR + 2 doses).
Throat/ear/nose	None	Treatment is recommended for the child and household contacts.
Typhoid	None	There are many causes, but most cases are due to viruses and do not need an antibiotic.

* **Resolves a notifiable disease.** It is a statutory requirement that doctors report a notifiable disease to the Director of Public Health in the Duty Room.
Outbreak: If a notifiable disease or outbreak of a notifiable disease, they should inform the Duty Room.

Good hygiene practice
 Handwashing is one of the most important ways of controlling the spread of infections, especially those that cause diarrhoea and vomiting, and respiratory disease. The recommended method is the use of liquid soap, warm water and paper towels. Always wash hands after using the toilet before eating or handling food, and after handling animals. Cover all parts of the hands with soap and water.
 Coughing and sneezing safely spread infections. Children and adults should be encouraged to cover their mouth and nose with a tissue. Wash hands after using or disposing of tissues. Sipping should be discouraged.
 Personal protective equipment (PPE): Disposable non-sterile gloves or latex-free CE-marked gloves and disposable plastic aprons must be worn where there is a risk of splashing or contamination with blood/body fluids (for example, nappy or pad changing). Goggles should also be available for use if there is a risk of splashing to the face. Correct PPE should be used after handling cleaning chemicals.
 Cleaning and disinfection: Cleaning and disinfection should be frequent, thorough and follow national guidance. For example, use colour-coded equipment. Follow Control of Infection (COP) regulations and current departmental cleaning equipment. Monitor cleaning contracts and ensure cleaners are appropriately trained with access to PPE.
 Cleaning of blood and body fluid spillages: All spillages of blood, faeces, urine, vomit, nasal and oral discharges should be cleaned up immediately always wear PPE when spillages occur. Clean using a product that contains both a detergent and a disinfectant. Use a paper manufacturer's instructions and ensure it is safe for the surface and suitable for use on the affected surface. Never use mops for cleaning of blood and body fluid spillages - use disposable paper towels and discard clinical waste as described below. A spillage kit should be available for blood spills.
 Laundry should be dealt with in a separate dedicated facility. Soiled linen should be washed separately at the hottest wash the fabric will tolerate, over 100 when handling soiled linen. Children's soiled clothing should be bagged to go home, never mixed by hand.
 Clinical waste: Always segregate domestic and clinical waste in accordance with local policy. Used respiratory filters, gloves, aprons and soiled dressings should be stored in correct clinical waste bags in full accordance. All clinical waste must be removed by a registered waste contractor. All clinical waste bags should be less than two-thirds full and stored in a dedicated, secure area while awaiting collection.
 Sharps, re needles, should be discarded straight into a sharps bin conforming to BS 7320 and BS 5739 standards. Sharps bins must be kept in the floor, preferably well-ventilated and out of reach of children.
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Animals
 Animals may carry infections, so wash hands after handling animals. Health and Safety Executive for Northern Ireland (HSNI) guidelines for protecting the health and safety of children should be followed.
 Animals in school (government or visiting): House animals living quarters on high clean and away from food area. Waste should be disposed of regularly and these areas not accessible to children. Children should not play with animals unsupervised. Hand hygiene should be encouraged after contact with animals and the area where visiting animals have been kept should be thoroughly cleaned after use. Veterinary advice should be sought on animal welfare and animal health issues and the suitability of the animal as a pet. Reptiles are not suitable as pets in schools and nurseries, as all species carry zoonoses.
 Waste to farms: For more information see <http://www.fisheries.gov.uk/publications/writing-or-creating-a-health-annual-contact-visitor-attractions>

Vulnerable children
 Some medical conditions make children vulnerable to infections that would rarely be serious in most children. These include those being treated for leukemia or other cancer, or high doses of steroids, and with conditions that seriously reduce immunity. Schools and nurseries and childminders will normally have been made aware of such children. These children are particularly vulnerable to chickpox, measles and parvovirus B19 and, if exposed to these viruses, their health may be affected. They should be informed promptly and further medical advice sought. It may be advisable for these children to have additional immunisations, for example pneumococcal and influenza. This guidance is designed to give general advice to schools and children's settings. Some vulnerable children may need further protection to be taken, which should be discussed with the parent or carer in conjunction with their medical team and school health.

Female staff* - pregnancy
 If pregnant women develop rash or it is in direct contact with someone with a potentially infectious rash, this should be investigated by a doctor who can contact the doctor for further advice. Do not attempt to pregnant women from such infections unless they are advised to do so. Schools and nurseries and childminders will normally have been made aware of such children. These children are particularly vulnerable to chickpox, measles and parvovirus B19 and, if exposed to these viruses, their health may be affected. They should be informed promptly and further medical advice sought. It may be advisable for these children to have additional immunisations, for example pneumococcal and influenza. This guidance is designed to give general advice to schools and children's settings. Some vulnerable children may need further protection to be taken, which should be discussed with the parent or carer in conjunction with their medical team and school health.
 * Pregnant women (before): If a pregnant woman comes into contact with someone who has a potentially infectious rash, this should be investigated by a doctor who can contact the doctor for further advice. Do not attempt to pregnant women from such infections unless they are advised to do so. Schools and nurseries and childminders will normally have been made aware of such children. These children are particularly vulnerable to chickpox, measles and parvovirus B19 and, if exposed to these viruses, their health may be affected. They should be informed promptly and further medical advice sought. It may be advisable for these children to have additional immunisations, for example pneumococcal and influenza. This guidance is designed to give general advice to schools and children's settings. Some vulnerable children may need further protection to be taken, which should be discussed with the parent or carer in conjunction with their medical team and school health.
 * Pregnant women (after): If a pregnant woman comes into contact with someone who has a potentially infectious rash, this should be investigated by a doctor who can contact the doctor for further advice. Do not attempt to pregnant women from such infections unless they are advised to do so. Schools and nurseries and childminders will normally have been made aware of such children. These children are particularly vulnerable to chickpox, measles and parvovirus B19 and, if exposed to these viruses, their health may be affected. They should be informed promptly and further medical advice sought. It may be advisable for these children to have additional immunisations, for example pneumococcal and influenza. This guidance is designed to give general advice to schools and children's settings. Some vulnerable children may need further protection to be taken, which should be discussed with the parent or carer in conjunction with their medical team and school health.
 * All female staff born after 1970 working with young children are advised to ensure they have had two doses of MMR vaccine.

Immunisations
 Immunisation status should always be checked at school entry and at the time of any vaccination. Parents should be encouraged to have their child immunised and any immunisation missed or further catch-up doses organised through the child's GP.
 For the most up-to-date immunisation advice and current schedule visit www.publichealth.hscni.net or the school health service can advise on the latest national immunisation schedule.

When to immunise	Diseases vaccine prevents against	How to give
1 month old	Diphtheria, tetanus, pertussis (whooping cough), polio and Hib	One injection
2 years and 6 months old	Preventable infection Rubella Measles, mumps and rubella Meningococcal B infection	One injection Orally One injection
3 months old	Diphtheria, tetanus, pertussis, polio and Hib	One injection
4 months old	Rubella	Orally
5 months old	Diphtheria, tetanus, pertussis, polio and Hib	One injection
6 months and 6 months old	Preventable infection Meningococcal B infection Measles, mumps and rubella	One injection One injection One injection
10 to 18 years old	Hib and meningococcal C infection Meningococcal B infection	One injection One injection
10 to 18 years old	Influenza	Seasonal spray or injection
1 year and 6 months and 6 months old	Diphtheria, tetanus, pertussis and polio	One injection
10 to 18 years old	Measles, mumps and rubella	One injection
10 to 18 years old	Genital warts caused by human papillomavirus (types 16 and 18) and genital warts caused by types 6 and 11	Two injections, over six months
10 to 18 years old	Tetanus, diphtheria and polio	One injection
10 to 18 years old	Meningococcal infection ACWY	One injection

This is the immunisation schedule as of July 2016. Children who present with certain risk factors may require additional immunisations. Always consult the most updated version of the 'Green Book' for the latest immunisation schedule on www.gov.uk/government/uploads/system/uploads/attachment_data/file/60666/green-book.
 From October 2017 children will receive hepatitis B vaccine at 1, 3, and 4 months of age in combination with the diphtheria, tetanus, pertussis, polio and Hib vaccine.
 Staff immunisations: All staff should undergo a full occupational health check prior to employment, this includes ensuring they are up to date with immunisations, including two doses of MMR.
 Original material was produced by the Health Protection Agency and this version adapted by the Public Health Agency.
 10, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100.
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 www.publichealth.hscni.net
 Information produced with the assistance of the Royal College of Paediatrics and Child Health and Public Health England.

CHILDHOOD ILLNESSES

When children start to mix with others at a young age and within a childcare environment it is very common for them to pick up common childhood illnesses. For the first few weeks/months it may feel like your child is constantly ill, however there are many reasons as to why children may be more susceptible to becoming unwell.

For more information on our infection control and exclusion periods please refer to our health and safety section on the website or speak to your nursery manager who will be more than happy to help you.

KNOWING A WELL CHILD FOR NURSERY

If your child is not feeling well then you should consider keeping them at home until they are fully recovered before returning to nursery. Please read below our definition of a child who is well enough to attend nursery:

- A child who is happy and able to take part in nursery life
- A child who does not have a temperature and hasn't had a temperature within the last 24 hours
- A child who is not dependent on paracetamol
- A child who is not reliant on 1-1 care

COVID 19

In line with Government guidance, nurseries would have introduced a range of different measures to protect their children and staff from COVID-19. This includes additional cleaning, the use of 'bubbles' with the same children and staff, a limitation on the number of people on site and regularly updating and monitoring of our Covid-19 risk assessment. More information can be found on the dedicated Covid 19 page on the nursery website

CLEANING

The nursery has invested heavily in cleaning technologies to reduce the risk of infectious diseases spreading within the nursery environment. Further information can be found on our website.



Daily Contact

Please direct all questions regarding your child's daily needs or development, along with any concerns nor compliments, to either your child's key person or your Nursery Manager initially.

Any queries relating to session changes or general enquiries can be directed to Andrea or Paula at our Office within the Loughton branch on 0208 508 5665 or email: contact@newbeginningsdaynursery.co.uk

Tapestry queries - Ellie, Quality manager (Maternity leave June 2023)
Paula & Lisa V (covering maternity leave)
quality@newbeginningsdaynursery.co.uk

Menu queries - Ellie, Quality manager (Maternity leave June 2023)
Paula & Lisa V (covering maternity leave)
quality@newbeginningsdaynursery.co.uk

Funding and Fees enquiries to Natasha-Client Service Manager
info@newbeginningsdaynursery.co.uk

Rainham branch - Lisa, Nursery Manager
Email: rainham@newbeginningsdaynursery.co.uk

Loughton - Laura, Nursery Manager (Maternity leave June 2023)
Paula (covering maternity leave)
Email: loughton@newbeginningsdaynursery.co.uk

Romford- Bonnie, Nursery Manager
Email: romford@newbeginningsdaynursery.co.uk

Should you wish to speak to a senior manager please contact either Lisa , Paula or Joanna on info@newbeginningsdaynursery.co.uk

