

Safeguarding and Welfare Requirement: Health.

The provider must promote the good health of the children attending the setting. They must have a procedure, discussed with parents and/or carers for responding to children who are ill or infectious, take necessary steps to prevent the spread of infection and take appropriate action if children are ill.

Managing Children with Allergies, or who are Sick or Infectious

(Including reporting notifiable diseases)

Policy statement

We provide care for healthy children and promote health through identifying allergies and preventing contact with the allergenic substance and through preventing cross infection of viruses and bacterial infections.

EYFS Key Themes and Commitments

A Unique Child	Positive Relationships	Enabling Environments	Learning and Development
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Characteristics of Effective Learning

Playing and Exploring Engagement	Active Learning Motivation	Creating and Thinking Critically - Thinking
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Procedures for children with allergies

- When parents start their children at the setting they are asked if their child suffers from any known allergies. This is recorded on the registration form.
- If a child has an allergy, a Healthcare Plan is completed to detail the following: - The allergen (i.e. the substance, material or living creature the child is allergic to such as nuts, eggs, bee stings, cats etc). - The nature of the allergic reactions e.g. anaphylactic shock reaction, including rash, reddening of skin, swelling, breathing problems etc. - What to do in case of allergic reactions, any medication used and how it is to be used (e.g. Epipen). - Control measures – such as how the child can be prevented from contact with the allergen. Parents must keep us updated of any changes to their child’s health or allergy so their Healthcare Plan can be reviewed and updated. ☑ The Healthcare Plan is kept in the child’s personal file and details of allergy, trigger, medication is recorded on a displayed allergy list and also on an Emergency Response Card which also includes emergency contact details.
- We are a Nut Free Nursery (See our Nut Free Policy). We forward our Nut Policy to our yearly intake so parents are aware that we do not allow nuts or nut products within our setting for snack, lunch boxes or party cake or seasonal treats and we outline the symptoms of anaphylaxis.

- Insurance requirements for children with allergies and disabilities The insurance cover will automatically include children with any disability or allergy but certain procedures must be strictly adhered to as set out below.
- At all times the administration of medication must be compliant with the Safeguarding and Welfare Requirements of the Early Years Foundation Stage and follow procedures based on advice given in Managing Medicines in Schools and Early Years Settings (DfES 2005)
- Oral medication Asthma inhalers are now regarded as "oral medication" by insurers and so documents do not need to be forwarded to our insurance provider.
- Oral medications must be prescribed by a GP or have manufacturer's instructions clearly written on them.
- The setting must be provided with clear written instructions on how to administer such medication.
- All risk assessment procedures need to be adhered to for the correct storage and administration of the medication.
- The group must have the parents or guardians prior written consent. This consent must be kept on file. It is not necessary to forward copy documents to your insurance provider.

Life saving medication & invasive treatments e.g.

- Adrenaline injections (Epipens) for anaphylactic shock reactions (caused by allergies to nuts, eggs etc) or invasive treatments such as rectal administration of Diazepam (for epilepsy).

The setting must have:

- a letter from the child's GP/consultant stating the child's condition and what medication if any is to be administered;
- written consent from the parent or guardian allowing staff to administer medication;
- proof of training in the administration of such medication by the child's GP, a district nurse, children's' nurse specialist or a community paediatric nurse.
- Key person for special needs children – children requiring help with tubes to help them with everyday living e.g. breathing apparatus, to take nourishment, colostomy bags etc.
- Key person to have the relevant medical training/experience, which may include those who have received appropriate instructions from parents or guardians, or who have qualifications.
- Prior written consent must be obtained from the child's parent or guardian to give treatment and/or medication prescribed by the child's GP.

If you are unsure about any aspect, contact the Insurance Company – details shown on Notice Board

Procedures for children who are sick or infectious

- If children appear unwell during the day – have a temperature, sickness, diarrhoea or pains, particularly in the head or stomach – the manager calls the parents and asks them to collect the child, or send a known carer to collect on their behalf.
- If a child has a temperature, they are kept cool by removing top clothing, sponging their heads with cool water, but kept away from draughts.
- Temperature is taken using a forehead 'fever scan' or digital thermometer kept near to the first aid box.

- In extreme cases of emergency the child should be taken to the nearest hospital and the parent informed.
- Parents are asked to take their child to the doctor before returning them to Nursery. The setting can refuse admittance to children who have a temperature, sickness and diarrhoea or a contagious infection or disease.
- Where children have been prescribed antibiotics, parents are asked to keep them at home for 48 hours before returning to the setting.
- After diarrhoea, parents are asked to keep children home for 48 hours or until a formed stool is passed.
- The setting has a list of excludable diseases and current exclusion times. The full list is obtainable from [www.hpa.org.uk/webc/HPAweb File/HPAweb_C/1194947358374](http://www.hpa.org.uk/webc/HPAweb%20File/HPAweb_C/1194947358374) and includes common childhood illnesses such as measles. Reporting of 'notifiable diseases'
- If a child or adult is diagnosed suffering from a notifiable disease under the Health Protection (Notifications) Regulations 2010, the GP will report this to the Health Protection Agency.
- When the setting becomes aware, or is formally informed of the notifiable disease, the Manager informs Ofsted and acts on any advice given by the Health Protection Agency.

HIV/AIDS/Hepatitis procedure

- HIV virus, like other viruses such as Hepatitis (A, B and C), are spread through body fluids. Hygiene precautions for dealing with body fluids are the same for all children and adults.
- Single use vinyl gloves and aprons are worn when changing children's nappies, pants and clothing that are soiled with blood, urine, faeces or vomit.
- Protective rubber gloves are used for cleaning/slucing clothing after changing. ☐ Soiled clothing is rinsed and bagged for parents to collect.
- Spills of blood, urine, faeces or vomit are cleared using mild disinfectant solution and mops. Cloths used are disposed of with the clinical waste.
- Tables and other furniture, furnishings or toys affected by blood, urine, faeces or vomit are cleaned using a disinfectant.

Nits and head lice

- Nits and head lice are not an excludable condition, although in exceptional cases a parent may be asked to keep the child away until the infestation has cleared.
- On identifying cases of head lice, all parents are informed and asked to treat their child and all the family if they are found to have head lice.

Further guidance - Managing Medicines in Schools and Early Years Settings (DfES 2005) ☐
www.education.gov.uk/publications

Useful Pre-school Learning Alliance publication - Good Practice in Early Years Infection Control (2009)



Signed on behalf of Hook Village Nursery
 Chairperson

Updated October 2021