

# **Meppershall Preschool**

# Managing children who are sick, infectious, or with allergies Policy

### **Policy statement**

Meppershall Pre School aim to provide care for healthy children through preventing cross infection of viruses and bacterial infections and promote health through identifying allergies and preventing contact with the allergenic trigger.

#### Procedures for children who are sick or infectious

- If children appear unwell during the day for example, if they have a temperature, sickness, diarrhoea or pains, particularly in the head or stomach a member of staff will call the parents and ask them to collect the child, or to send a known carer to collect the child on their behalf.
- If a child has a temperature, they are kept cool, by removing top clothing and sponging their heads with cool water, but kept away from draughts.
- The child's temperature is taken using a digital thermometer, kept in the first aid box.
- If the child's temperature is 38 degrees or above, then staff will call the parent / carer unless the child is known to suffer from convulsions, in which case a care plan will be put in place, and a medication consent form completed. Please see our Child Medication Policy & Procedure.
- In extreme cases of emergency, an ambulance is called and the parent informed.
- Parents are asked to take their child to the doctor before returning them to the setting; [we/I] can refuse admittance to children who have a temperature, sickness and diarrhoea or a contagious infection or disease.
- Where children have been prescribed antibiotics for an infectious illness or complaint, we ask parents to keep them at home for 48 hours before returning to the setting, or until the infection is not present. If your child has been given any medication for the first time, they must stay at home for 48 hours after the first dosage in case of an adverse reaction.



- After sickness and/or diarrhoea, we ask parents to keep children home for 48 hours following the last episode.
- Some activities, such as sand and water play, malleable play and self-serve snacks where there is a risk of cross-contamination may be suspended for the duration of any outbreak.
- We ask that children with conjunctivitis and hand foot and mouth disease are treated according to the child's GP/pharmacist and kept at home for at least 48 hours to prevent further contamination of these contagious conditions within preschool.
- We have a list of excludable diseases and current exclusion times. The full list is obtainable from www.hpa.org.uk/webc/HPAwebFile/HPAweb\_C/1194947358374 and includes common childhood illnesses such as measles.

## Reporting of 'notifiable diseases'

- If a child or adult is diagnosed as suffering from a notifiable disease under the Health Protection (Notification) Regulations 2010, the GP will report this to Public Health England.
- When we become aware, or are formally informed of the notifiable disease, our Leader or Deputy notify Ofsted and contacts Public Health England, and act on any advice given.

#### **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. We:

- Wear single-use vinyl gloves and aprons when changing children's nappies, pants and clothing that are soiled with blood, urine, faeces or vomit.
- Bag soiled clothing for parents to take home for cleaning.
- Clear spills of blood, urine, faeces or vomit using mild disinfectant solution and mops;
   any cloths used are disposed.
- Clean any tables and other furniture, furnishings or toys affected by blood, urine, faeces or vomit using a disinfectant.



#### Nits and head lice

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

### Procedures for children with allergies

- When children start at the setting we ask their parents if their child suffers from any known allergies. This is recorded on the Registration Form.
- If a child has an allergy, we complete a risk assessment form 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.
  - Review measures.
- This risk assessment form is kept in the child's personal file and a copy is displayed where our staff can see it.
- Generally, no whole nuts are used within the setting and parents advised that they must not provide these in lunch boxes.
- In the event of a child attending with a nut allergy all parents will be informed and no nuts or nut products will be allowed on the premises.

#### Insurance requirements for children with allergies and disabilities

If necessary, our insurance will include children with any disability or allergy, but certain



procedures must be strictly adhered to as set out below. For children suffering life threatening conditions, or requiring invasive treatments; written confirmation from our insurance provider must be obtained to extend the insurance.

- At all times we ensure that the administration of medication is compliant with the Safeguarding and Welfare Requirements of the Early Years Foundation Stage.
- Oral medication:
  - Asthma inhalers are now regarded as 'oral medication' by insurers and so documents do not need to be forwarded to [our/my] insurance provider. Oral medications must be prescribed by a GP or have manufacturer's instructions clearly written on them. Please see our Asthma Policy.
- Life-saving medication and invasive treatments:
   These include 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)

## - We 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 our staff to administer medication;
   and
- 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.
  - Copies of all three documents relating to these children must first be sent to the Preschool Learning Alliance Insurance Department for appraisal. Written confirmation that the insurance has been extended will be issued by return.
- Key person for special needs children requiring assistance with tubes to help them with everyday living e.g. breathing apparatus, to take nourishment, colostomy bags etc.:
  - 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.
  - Senior staff must have the relevant medical training/experience, which may include receiving appropriate instructions from parents or guardians.



- Copies of all letters relating to these children must first be sent to the Pre-school Learning Alliance Insurance Department for appraisal. Written confirmation that the insurance has been extended will be issued by return.
- If we are unsure about any aspect, we will contact the Pre-school Learning Alliance Insurance Department on 020 7697 2585 or email <a href="mailto:membership@pre-school.org.uk/insert">membership@pre-school.org.uk/insert</a>

Date approved by Pre-school committee	
Signed by Pre-school leader	
Signed by Pre-school chair	
Signed by Pre-school staff	