



Managing children, who are sick, infectious or with allergies

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

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 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 forehead thermometer strip, kept in the first aid box.
- In extreme cases of emergencies, the child should be taken to the nearest hospital and parent informed.
- Parents are asked to take their child to the doctor before returning them to the setting; the setting can refuse admittance to children who have a high temperature, sickness and diarrhoea or 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.
- A full list of excludable diseases and current exclusion times can be obtained 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 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 the body fluids. Hygiene precautions for dealing with body fluids are the same for all children and adults.
- Single-use vinyl gloves are worn when changing children's nappies, pants and clothing that are soiled with blood, urine or faeces or vomit.
- Protective gloves are used for cleaning/sluicing clothing after changing.
- Soiled clothing is bagged for parents to collect after the session.
- Spills of blood, urine, faeces or vomit are cleared using a mild disinfectant solution, any cloths used are disposed of with the waste.
- Tables and other furniture, furnishings or toys affected by blood, urine, faeces or vomit are cleaned using 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 a 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.

Procedures for children



with allergies

- When parents start setting they are asked if their child suffers from any allergies. This is recorded in the Registration Form.
- If a child has an allergy, a risk assessment form 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 the 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 contacted with the allergen.
 - Review.
- This form is kept in the child's personal file and a copy is displayed where staff can see it.
- Parents train staff in how to administer special medication in the event of an allergic reaction.
- Generally, no nuts or nut products are used within the setting.
- Parents are made aware so that no nut or nut products are accidentally brought in, for example to a party.

Insurance requirement for children with allergies and disabilities

- The insurance will automatically include children with 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 your insurance provider must be obtained to extend the insurance.

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 Setting (Dfes2005).

Oral Medication



- Oral medications by a GP or have instructions clear on how to administer such medication. must be prescribed manufacturer's written instructions administer such
- All risk assessment procedures need to be adhered to for the correct storage and administration of the medication.
- The setting 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 and invasive treatments

Adrenaline injections (Epipens) for anaphylactic shock reactions (caused by allergies to nuts, eggs etc).

- The provider must have:
 - A letter from the 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; and
 - Proof of training in the administration of such medication by 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 Pre-school Learning Alliance Insurance Department for appraisal (if you have another provider, please check their procedures with them). Written confirmation that the insurance has been extended will be issued by return.

Key person for special needs children-children requiring assistance with tubes to help them with everyday living.

- Written consent from the child's parent or guardian to give treatment and/or medication prescribed the child's GP.
- Key person must have the relevant medical training/experience.