



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
1.2 Inclusive practice 1.4 Health and well-being	2.2 Parents as partners 2.4 Key person	3.2 Supporting every child	

Procedures for children with allergies

- When parents start their children at the Nursery they are asked if their child suffers from any known allergies. This is recorded on the Registration/Parent Contract.
- If a child has an allergy or medical condition, a health care plan is completed to risk assess 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.
- This form is kept in the child's personal file and a copy is displayed in the kitchen where staff can access it.
- Training must be provided for staff where the administration of medicine requires medical or technical knowledge. The Nursery Manager will work with parents to action this.
- Generally, no nuts or nut products or eggs are used within the Nursery and parents are asked not to provide these in their child's packed lunches. Where parents bring in food for parties the Nursery requires a list of ingredients to ensure that children with allergies are protected.

Insurance requirements for children with allergies and disabilities

- The Nursery insurance policy automatically includes 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 is required to extend our insurance cover.

At all times the administration of medication must be compliant with the 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 Nursery 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 Nursery must have the parents or guardians prior written consent. This forms part of the medication record. This consent must be kept in the Nursery. It is not necessary to forward copy documents to the insurance provider.

Life saving medication & invasive treatments

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 Nursery 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; 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 letters relating to these children must first be sent to the Pre-school Learning Alliance Insurance Department for appraisal. Confirmation will then be issued in writing confirming that the insurance has been extended.

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.

- Prior written consent from the child's parent or guardian to give treatment and/or medication prescribed by the child's GP.
- 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.
- 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 you are unsure about any aspect, contact the Pre-school Learning Alliance Insurance Department on 020 7697 2585 or email membership@pre-school.org.uk.

Measures to prevent and control the spread of infection and disease

Staff and visitors are asked to use alcohol hand gel to minimise the spread of infection by killing germs, bacteria and viruses. We also try and educate parents by passing on advice from the health protection agency about various outbreaks of infectious diseases or viruses e.g. swine flu. Our cleaning operatives are aware of health and hygiene and follow a daily cleaning schedule to ensure that we maintain high standards of cleanliness within the Nursery.

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 Nursery 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 ‘fever scan’ 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.
- The Nursery 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 24 hours before returning to the Nursery. In the case of highly infectious diseases this is extended to 48 hours. For more information download the Guidance on infection and control (Health Protection Agency 2010) www.hpa.org.uk.
- After diarrhoea, parents are asked to keep children home for 48 hours or until a formed stool is passed.
- The Nursery has a list of excludable diseases and current exclusion times. The publication Guidance on infection control in schools and other childcare settings is available from www.hpa.org.uk and includes common childhood illnesses such as measles or chicken poxs.

Reporting of ‘notifiable diseases’

- If a child or adult is diagnosed suffering from a notifiable disease under the Public Health (Infectious Diseases) Regulations 1988, the GP will report this to the Health Protection Agency.
- When the Nursery becomes aware, or is formally informed of the notifiable disease, the Nursery 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 either bagged for parents to collect or laundered in the nursery.
- 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.
- Children do not share tooth brushes which are also soaked weekly in sterilising solution.

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 by letter 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)
- Guidance on infection and control (Health Protection Agency 2010) www.hpa.org.uk

Useful Pre-school Learning Alliance publications

- Good Practice in Early Years Infection Control (2009)

This policy was adopted on:

11 August 2011

Date to be reviewed by:

31 August 2012

Signed on behalf of the Management Committee:

Signatory Name:

Lisa Kennedy