

Managing children who are sick or with allergies

Policy Statement

At Harvey Bears and Pre-school we aim to provide care for healthy children by attempting to prevent cross infection viruses and bacterial infections and promote health through being aware of children's allergies and intolerances and preventing contact with the allergenic trigger.

Procedure for children who are sick.

- If a child is taken ill during a session, i.e. If they have a temperature, sickness diarrhea or pains in the head or stomach, parents are called and requested to collect the child or send a known carer to collect the child in their place. (Knowing the password.)
- 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 regularly.
- If a child's temperature does not go down and is worryingly high, then we may give them Calpol, after first obtaining verbal permission, where possible. This is to reduce the risk of febrile convulsions, particularly for babies. Parents sign the medication record when they collect the child.
- In extreme cases of emergency an ambulance is called and the parent informed.
- If it is felt necessary parents are asked to take the child to contact the Doctor and let us know the outcome.
- We can refuse to accept a child who has a temperature, sickness, diarrhoea or anything contagious.
- After sickness or diarrhoea parents must keep children away from the setting for 48 hours from the last episode.
- If it is considered an outbreak, sand, water play and self-service snack will be suspended.
- Where children are prescribed antibiotics we can administer them with written permission from the parent/carers.
- We have a list of excludable diseases and current exclusion times displayed on the back of the cupboard door.

Reporting of notifiable diseases

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

HIV/AIDS/Hepatitis procedure

Like any other viruses, such as Hepatitis A,B,C are spread through body fluids. Hygiene precautions for dealing with children and adults are the same.

We;

- Wear gloves and aprons when changing nappies, pants and clothing that are soiled with blood, urine, faeces or vomit.
- Bag soiled clothing for parents to take home, explaining what they contain.
- Clear spills of urine, blood, faeces or vomit using mild disinfectant solution and mops, any cloths used are disposed of, mops are cleaned in bleach.
- 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 a 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.

Procedures for children with allergies

- When children start at the setting we ask the parents if the child suffers from any known allergies. This is recorded on the Admission Form.
- If a child has an allergy we complete a risk assessment to detail the following:
 1. The allergen the child is allergic, intolerant to.
 2. The nature of the allergic reactions.
 3. What to do in the case of allergic reactions, any medication necessary, and how it is to be used and who is trained to use it.
 4. A copy of procedure for each child is displayed for all to see.
 5. A health care plan is completed
 6. As far as possible no nuts or nut containing products are used within the setting.
 7. Parents are made aware we operate a no nuts setting.

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.

For children suffering life threatening conditions or requiring invasive treatments, written confirmation from our insurance providers must be sought.

- At all times we ensure that the administration of medication is compliant with the Safeguarding and Welfare Requirements of the EYFS.

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 medication must be prescribed from a GP (apart from Calpol). And have manufacturer's instructions clearly written on them.
- We must be supplied with clear written instructions as to how and when to administer medication.
- We adhere to risk assessments procedures for the correct storage and administration of medication.
- We must have written parental consent. This consent must be kept on record.

Life-saving medication and invasive treatments

- These include adrenaline injections, for allergens or invasive treatments such as Diazepam (rectally) 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/carer allowing our staff to administer medication.
- Proof of training in the administration of the medication by the child's GP, a district nurse, children's nurse specialist or a community paediatric nurse.

Copies of these documents must be sent to the insurance company.

We ensure;

- Treatments such as inhalers, piriton and Epipens are immediately accessible in an emergency.
- Key persons for special needs children requiring assistance with tubes to help them with everyday living e.g. breathing apparatus with tubes, feeding tubes or colonoscopy bags must be fully trained.
- Prior written consent must be obtained from the parent/carer for the staff, to change bags, feed through a tube or administer epipen or piriton.

For confirmed cases of a notifiable disease the setting must contact their local Health Protection Team (HPT) as soon as possible for further advice. The manager will inform the management committee, and retain a written record of events.

Acting on the advice of the HPT the setting will either

- Close for a set period and undertake a deep clean.
- Carry on as usual and complete a deep clean.

If a notifiable disease is confirmed, then the manager should be informed as soon as possible. OFSTED should be informed within 14 days. A full deep clean should be carried out at the soonest possible opportunity.

Hand hygiene is monitored closely.

The manager liaises with the HPT as required and keeps a full record of children affected, how long they are away from the setting and the date they return.