

SAFEGUARDING & WELFARE REQUIREMENT: HEALTH

6.2 Managing Children who are Sick, Infectious, or with Allergies



Policy Statement

At St John's Playtime Pre-school we 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 – have a temperature, sickness, diarrhoea or pains, particularly in the head or stomach – the setting calls the parents and asks them to collect the child, or 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 ear thermometer.
- If your child is sent home with a raised temperature, the child will need to be monitored for 24 hours and no further illness or infection has occurred prior to returning to the setting.
- 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; 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. We request this procedure to ensure that the child experiences no adverse effects and is given time to allow the antibiotics to take effect.
- After diarrhoea and/or sickness, parents are asked to keep children home for 48 hours following the last episode.
- Diarrhoea is defined as 3 or more liquid or semi-liquid stools in a 24 hour period.
- Some activities, such as sand and water play, and self-serve snacks where there is a risk of cross-contamination may be suspended for the duration of any outbreak.
- The setting has a list of excludable diseases and current exclusion times. The full list is obtainable from https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/691091/Exclusion_table.pdf and includes common childhood illnesses such as measles. **A copy can also be found on the main notice board for your reference.**

Reporting of 'notifiable diseases'

- The setting manager notifies the committee and Suffolk County Council if there is an outbreak of an infection (affects more than 3-4 children) and keeps a record of the numbers and duration of each event.
- 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.
- If we become aware, or are formally informed of the notifiable disease, our Manager informs Ofsted and contacts Public Health England and then acts on any advice given.
- If staff suspect that a child who falls ill whilst in their care is suffering from a serious disease that may have been contracted abroad such as Ebola, immediate medical assessment is required. The setting manager or deputy calls NHS111 and informs parents.

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. Our staff:

- 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 and clean.
- Clear spills of blood, urine, faeces or vomit using mild disinfectant solution and mops; any cloths used are disposed of with the clinical waste.
- Clean tables and other furniture, furnishings or toys affected by blood, urine, faeces or vomit using a disinfectant.
- Baby mouthing toys are kept clean and plastic toys cleaned in sterilising solution regularly.

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.

Threadworms (worms)

- If you suspect your child has worms, inform pre-school in the first instance. Your child will need to be treated **before** coming back into setting.

Procedures for children with allergies

- When children start at St John's Playtime Pre-school we ask their parents if their child suffers from any known allergies. This is recorded on their 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 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 where staff can see it.
- A health care plan will also be completed.
- 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 our Lunch Club or a special occasion such as a party.

Insurance requirements for children with allergies and disabilities

- Our insurance will automatically 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 our insurance.
- **At all times we ensure that the administration of medication is fully 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 insurance provider. Oral medications must be prescribed by a GP or have manufacturer's instructions clearly written on them.
 - Our staff must be provided with clear written instructions on how to administer such medication.
 - Our staff adhere to all risk assessment procedures for the correct storage and administration of the medication.
 - We 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 our insurance provider.
- 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 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.
- Written confirmation that we hold this information will first be sent to the Early Years Alliance Insurance team for appraisal. Written confirmation that the insurance has been extended will be issued by return.
- Treatments, such as inhalers or Epipens are immediately accessible in an emergency.
- Key person for special needs children - 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.
 - The Key Person 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.
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Calpol (or other paracetamol-based medicine)

- The use of paracetamol-based medicine may not be agreed in all cases. A setting cannot take bottles of non-prescription medicine from parents to hold on a 'just in case' basis, unless there is an immediate reason for doing so. Settings do not normally keep such medicine on the premises as they are not allowed to 'prescribe'. However, if parents notify the setting that their child is at risk when experiencing a high temperature (for example in the case of a child being prone to febrile convulsions) then Calpol can be administered on the basis that the parent is on their way to collect their child. All other children who are not deemed as at risk from experiencing a high temperature will be kept cool as per procedures and parents will be called to collect immediately.

If we are unsure about any aspect, we will contact the Early Years Alliance Insurance Department on

0207 697 2585 or email insurance@eyalliance.org.uk

This policy was adopted at a meeting held by St John's Playtime Pre-school committee on 17th June 2009.

This policy was reviewed & updated on: April 2023

This policy will be reviewed again on: April 2024

Signed on behalf of the Management committee and provider:

Name of Signatory: Lisa Calver 

Role of Signatory: Committee Chairperson