

Rainbow Early Years

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

Our Aim

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.

Procedures for children with allergies

- When parents start their children at the setting they are asked if their child suffers from any known allergies. This is recorded on the registration form, and Index box as well as a list displayed in our kitchen area if food related.
- Generally, no nuts or nut products are used within the setting.
- Information regarding allergies to e.g. sun cream will be kept on file and all staff are made aware.
- Sensitive hand soap is provided in dispensers and sensitive wet wipes are used.

Insurance requirements for children with allergies and disabilities

- The insurance cover 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 will 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 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 setting must be provided with clear written instructions on how to administer such medication, an administer medication form must be filled in and signed by parent/carer.
- All risk assessment procedures need to be adhered to for the correct storage and administration of the medication. Risk assessments will be carried out and kept on file for children requiring medication. This is completed by an allocated staff member.
- The group 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.
- Inhalers are labelled with children's name and stored safely in the office.
- If a child requires oral medication prescribed by a Doctor this is kept in the appropriate place e.g. fridge and a medical form will be signed and information shared with the child's keyperson by the parents/carers.
- If children require medication due to e.g. allergies, medication such as Piriton will be kept safely in our locked medical box in the meeting room. Again, the parents/carers will need to give specific advice and fill in a medical form and the keyperson made aware for this to be administered in the parents absence.

Life saving medication & invasive treatments

For Example - 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 setting 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;
- Staff must attend training and have 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 of the above letters relating to these children must first be sent to the pre-school's Insurance Company for appraisal. Confirmation needs to be issued in writing confirming that the insurance has been extended.

Children requiring help with tubes to help them with everyday living e.g breathing apparatus, to take nourishment, colostomy bags etc will be carried out by the child's key person or 1:1 support assistant.

- 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.
- 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.
- Copies of all letters relating to these children must first be sent to the pre-school's Insurance Company for approval. Confirmation needs to be issued in writing confirming that the insurance has been extended.

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 - a member of staff will call the parent/carer and asks them to collect the child, or send a known carer to collect on their behalf.
- If a child begins displaying a symptoms of coronavirus: a continuous cough or a high temperature, they will be sent home to isolate as per the guidelines.
- A child awaiting collection should be moved, if possible and appropriate, to a room where they can be isolated behind a closed door. If it is not possible to isolate them move them to an area which is at least 2 metres away from other people. A window should be opened for ventilation.

If they need to go to the toilet while waiting to be collected, the toilet area should be cleaned and disinfected using standard cleaning products before being used by anyone else.

- If a member of staff has helped someone who displayed symptoms they do not need to go home unless they develop symptoms themselves. They should wash their hands thoroughly with soap for 20 seconds after any contact with someone who is unwell
- In extreme cases of emergency the child should be taken to the nearest hospital and the parent informed as soon as possible.
- Parents are asked to take their child to the doctor before returning them to pre-school. 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.
- After cases of sickness and diarrhoea, parents are asked to keep children home for 48 hours from the last episode of sickness or diarrhoea (or until a formed stool is passed).
- The setting has a list of excludable diseases and current exclusion times. The full list is obtainable from www.hpa.org.uk and includes common childhood illnesses such as measles.
- Parents/carers can phone the setting for advice if they are concerned about being unwell.

Reporting of 'notifiable diseases'

- If a child or adult is diagnosed suffering from a notifiable disease under the Health Protection (Notifications) 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 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 / clothing that are soiled with blood, urine, faeces or vomit.
- Protective vinyl gloves are used for cleaning/sluicing clothing after changing.
- Soiled clothing is rinsed and bagged for parents to collect.
- 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.

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, parents are sensitively informed and asked to treat their child and all the family if they are found to have head lice.

Date of last review: Feb 2017 & August 2017 by Manager.

Reviewed 14-8-18 J Clarke.

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Reviewed 4-8-20 J Clarke.

Next review date: Annually.