

Safeguarding and Welfare Requirement: Health

The provider must promote the good health of children attending the setting. They must have a procedure, discussed with parents and/or carers, for responding to children who are ill or infectious, take necessary steps to prevent the spread of infection, and take appropriate action if children are ill.

Health

6.2 Managing children who are sick, infectious or with allergies

(Including reporting notifiable diseases)

Policy Statement

We aim to 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 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 in the first aid box.
- If the child's temperature does not go down and is worryingly high, then we may give them Calpol or another similar analgesic, after first obtaining verbal consent from the parent where possible. This is to reduce the risk of febrile convulsions, particularly for babies. Parents sign the medication record when they collect their child.
- Where children have been prescribed antibiotics, parents are asked to keep them at home for 48 hours before returning to the setting.
- After diarrhoea or vomiting, parents are asked to keep children home for 48 hours.
- The setting has a list of all excludable diseases and current exclusion times. The full list is obtainable from www.hpa.org.uk/webc/HPAwebFile/HPAweb_C/1194947358374 and includes common childhood illnesses such as measles.
- The pre-school can refuse admittance to children who have a temperature, sickness and diarrhoea or a contagious infection or disease.

Hospital Treatment

- In extreme cases of emergency an ambulance will be called, and the parents informed.
- The Manager will follow the critical incidents procedures as well as notifying the committee Chair.
- In the event of a child needing hospital treatment a staff member (preferably their child's key person) will accompany them.
- The staff member will remain at the hospital until the parents arrive and longer if needed to support the child or parents. The Manager and committee Chair will support the children and staff remaining in Pre-school and the staff member at the hospital ensuring transport home is provided.
- A hospital discharge letter or doctor's letter will be required before returning them to preschool.

Reporting of 'notifiable diseases'

- If a child or adult is diagnosed suffering from a notifiable disease under Health Protection (Notification) Regulations 2010, the GP will report this to Public Health England.
- Parents are required to inform the Pre-school as soon as possible.
- When the setting becomes aware, or is formally informed of the notifiable disease, the manager informs Ofsted and notifies Public Health England and acts on any advice given.

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/sluicing clothing after changing.
- Soiled clothing is bagged appropriately 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, confidentiality is maintained at all times and 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 their children at the setting they are asked if their child suffers from any known allergies. This is recorded on the registration form. Following local Health Authority advice, we also ask all parents for permission to administer Piriton in the event of their child having a possible allergic reaction in the setting.

- If a child has a known allergy, a health care plan 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 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.
- Parents or health care professionals 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 and parents are made aware so that no nut or nut products are accidentally brought in, for example to a party.

Insurance requirements for children with allergies and disabilities

The 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 the
insurance provider must be obtained to ensure cover.

At all times the administration of medication must be 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 a manufacturer's instructions clearly written on them.
- The Pre-school 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 Pre-school 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.

Lifesaving 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 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; 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 before the child starts at the setting.
- Lifesaving medication must be brought into the setting every time the child attends. Two Epipens will be needed in case of one failing.
- At no time will a child be given another child's medication, this includes lifesaving medication. It is the parent's responsibility to ensure that their child has any medication that may be needed with them.

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 quardians.
- 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 before the child can start.

If we are unsure about any aspect, we will contact the Pre-school Learning Alliance Insurance Department on 020 7697 2585 or email membership@pre-school.org.uk.

Further guidance

- Good Practice in Early Years Infection Control (2009)
- Medication Administration Record (2013)

This policy was adopted at a meeting of Crestwood Pre-school Committee	
Held on	Date to be reviewed
Signed on behalf of the management committee	
Name of signatory	
Role of signatory	