

**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.

### **5.3 Managing children who are sick, infectious, or with allergies**

(Including reporting notifiable diseases and Coronavirus)

#### **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, pains, persistent cough or rash - the manager calls the parents and asks them to collect the child, or send their emergency contact to collect the child on their behalf.
- If a child has a temperature, they are kept cool, by removing top clothing with, but kept away from draughts and taken in to isolation in line with government guidance.
- The child's temperature is taken using a thermometer kept in the first aid box.
- In extreme cases of emergency, an ambulance is called and the parent informed.
- The setting can refuse admittance to children who have a temperature, sickness and diarrhoea or a contagious infection or disease or showing any signs/symptoms of Covid-19.
- Where children have been prescribed new medication for an infectious illness or complaint, parents are asked to keep them at home for 48 hours and to make sure they are well enough to cope with the nursery session before returning them back to the setting.
- After a bout of sickness &/or diarrhoea, parents are asked to keep children home for 48 hours following the last episode.
- 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 [www.hpa.org.uk/webc/HPAwebFile/HPAweb\\_C/1194947358374](http://www.hpa.org.uk/webc/HPAwebFile/HPAweb_C/1194947358374) and includes common childhood illnesses such as measles.

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#### *Reporting of notifiable diseases'*

- 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.
- When the setting becomes aware, or is formally informed of the notifiable disease, the manager informs Ofsted and contacts Public Health England and acts on any advice given.

#### *Coronavirus Covid-19 procedure:*

- If a child or any member of the family develop any Covid-19 symptoms, they should adhere to the government guidelines [www.gov.uk/coronavirus](http://www.gov.uk/coronavirus) and contact the nursery alerting them to the situation.
- If a child (or staff member) display any of the Covid-19 symptoms whilst at the nursery, they will be sent home immediately and should follow the government's guidelines and advised to take a test.
- The family in question will self-isolate, following the governments guidelines until the test results are back. If the result is positive, follow the most up to date government advice.
- Ofsted will be notified of any confirmed case (either staff or child) and will also be notified if the setting has to close as a result.
- We will not share the names of the people tested positive unless essential to protect others.

#### *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. We:

- 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 for cleaning.
- Clear spills of blood, urine, faeces or vomit using mild disinfectant solution; any cloths used are disposed of with the clinical waste.
- Clean any tables and other furniture, furnishings or toys affected by blood, urine, faeces or vomit using a disinfectant.

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### *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.

### *Procedures for children with allergies*

- When children start at the setting we ask their parents if their child suffers from any known allergies. This is recorded in the Registration Pack.
- If a child has an allergy, we complete a risk assessment form 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 measures.
- This risk assessment form is kept in the child's personal file and a copy is displayed where our staff can see it.
- 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 example to a party.

### *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 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 the insurance.
- At all times we ensure that the administration of medication is compliant with the Safeguarding and

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#### 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.
  - We must be provided with clear written instructions on how to administer such medication.
  - We 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 our 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 documents 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.
- Key person for special needs 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.
- If we are unsure about any aspect, we contact the Early Years Alliance Insurance Department.

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This policy was originally adopted at a Chevening School Nursery Committee meeting in 2013 and is reviewed/amended at least annually or as required.

Signed on behalf of the provider

Name of signatory ADELE UDALE

Role of signatory SECRETARY TO THE COMMITTEE

Date: NOVEMBER 2021

