

### **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.

## **Managing children who are sick, infectious, or with Allergies.**

### **Policy statement**

St Teath Preschool aims 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 – for example, if they have a temperature, sickness, diarrhoea or pains, particularly in the head or stomach – the manager will call the parents and ask them to collect the child, or to send a known carer to collect the child on their behalf. A temperature is considered over 37.5.
- The setting is unable to administer any unprescribed medication including calpol. If your child requires medication to regulate their temperature, they will not be permitted into the setting as this mask's symptoms.
- If your child requires any unprescribed medication/treatment for an illness during the time they are in the setting e.g. eye drops for conjunctivitis several times a day, we would be unable to administer this so they would not be permitted into the setting until the medication/treatment course has been finished.
- If a child develops a temperature whilst at the setting, they are kept cool by removing top clothing and sat in a cool, ventilated area until parents arrive to collect the child. In the event of heatstroke, a damp cloth will be used.
- The child's temperature is taken using a digital thermometer, kept in the first aid box.
- If a child displays a rash of any kind during the time they are in the setting, the manager will call the parents and ask them to collect the child, or to send a known carer to collect the child on their behalf. Parents are required to take their child to see the doctor before returning to the preschool to determine the cause of the rash. Children will not be permitted to attend preschool with an unknown rash.
- 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; we will refuse admittance to children who have a temperature, sickness and diarrhoea or a contagious infection or disease.
- Where children have been prescribed antibiotics for an infectious illness or complaint, we ask parents to keep them at home for 48 hours before returning to the setting and you will be required to fill out a prescribed medication form prior to staff administering the medication.
- After the last bout of diarrhoea or sickness, we ask parents 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.
- We have a list of excludable diseases and current exclusion times. This is not an exhaustive list and other diseases and illness will be considered at the managers discretion.

#### *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 we become aware, or are formally informed of the notifiable disease, the manager informs Ofsted and contacts 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. 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 and mops; any cloths used are disposed of.
- 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 the child away until the infestation has cleared.
- On identifying cases of head lice, we inform all parents and ask them 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 will ask their parents if their child suffers from any known allergies. This is recorded on the Registration Form/ Risk assessment.
- If a child has an allergy, we complete a risk assessment 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 is kept in the child's personal file and a copy is displayed where our staff can see it.
- A health care plan will also be completed.
- If a child has a nut allergy, no nuts or nut products are to be 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 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/care plan 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.
  - Written confirmation that we hold this information will first be sent to our 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 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 Early Years Alliance Insurance team for appraisal (if you have another provider, please check their procedures with them)]. Written confirmation that the insurance has been extended will be issued by return.
- If we are unsure about any aspect, we contact our insurance provider.

Children who are unwell should not attend preschool. This includes children who are suffering from any infectious diseases including the following. This is not an exhaustive list and other diseases and illness will be considered at the managers discretion.

<b>Illness</b>	<b>Exclusion Period</b>
Sickness/Diarroea	Until 48 hours after last bout of either
Conjunctivitis	Until all symptoms have gone and any unprescribed treatment is no longer needed during the day
Chickenpox	7 days from onset of rash and when all spots have healed and scabbed over
Coronavirus	Until recovered and in line with the most recent public health advice
Hand Foot and Mouth	Keep off whilst they are feeling unwell
Impetigo	Seek Medical Attention - stay away from Preschool until 48 hours after commencing prescribed treatment or until scabs have healed over
Measles	7 days from onset of rash
Scabies	Until medical treatment is complete and recovered
Meningitis	Until recovered
Meningococcal septicaemia	Until recovered
Mumps	5 days after onset of swelling
Paratyphoid fever	We would need to contact our local HPT once a case had been confirmed before confirming exclusion time
Plague	Until antibiotics have been administered for 48 hours
Rabies	Dependent on individual case risk assessment
Relapsing Fever	Until recovered
Rubella	5 days from onset of rash
Scarlet Fever	Until antibiotics have been administered for 48 hours
Smallpox	Until recovered
Tetanus	Dependent on individual case risk assessment
Tuberculosis	We would need to contact our local HPT once a case had been confirmed before confirming exclusion time
Tonsillitis	Until recovered
Typhoid Fever	We would need to contact our local HPT once a case had been confirmed before confirming exclusion time

Typhus Fever	Until antibiotics have been administered for 48 hours
Unexplained Rash	Seek Medical Attention before returning to Preschool
Viral haemorrhagic fever	Until recovered
Viral hepatitis	7 days after onset of jaundice or symptoms if no jaundice
Whooping cough	21 days from onset of cough and antibiotics have been administered for 48 hours
Yellow fever	Until recovered

If a child becomes unwell at Preschool, we expect that child to be collected as soon as possible within a 30-minute time frame. If we cannot get hold of the parent/guardian we will contact the emergency contacts provided on the child's registration form.

This policy was adopted by

St Teath Preschool

On

January 2022

Date reviewed

January 2024

Signed on behalf of the provider

Name of signatory

Role of signatory (e.g. chair, director or owner)

Chair Person