

Managing children who are sick, infectious or with allergies

Policy Statement

We aim to provide care for the healthy children through preventing cross examination of viruses and bacterial infections. We promote health through identifying allergies and preventing contact with the allergenic trigger.

Procedures for children who are sick or infectious

- If children appear to be unwell during the day, for example a temperature, sickness, diarrhoea or pains, particularly in the head or stomach. The manager/key person will call the parents and ask them to collect their child or to send a known carer to collect on their behalf.
- If a child has a temperature a first aid trained member of staff will sit with the child. Making sure the room/place is not too hot and that the child keeps sipping their drink so that they stay hydrated. This will continue until the parent/carer arrives. If the temperature continues to rise and the child becomes even more unwell an ambulance will be called.
- Parents asked to take their child to the doctor before returning them to the setting. Tiny Feet can 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 that parents keep the child home for 48 hours before returning to the setting.
- After sickness or diarrhoea we ask parents to keep children home for 48 hours after the last bout of illness.
- Some activities such as sand and water play, self service 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. The full list is obtainable form https://www.nhs.uk/conditions/pregnancy-and-baby/infectious-illnesses-children/

https://www.publichealth.hscni.net/sites/default/files/Guidance_on_infection_control_in% 20schools_poster.pdf

Reporting of Notifiable Diseases

- If a child or adult is diagnosed as suffering from a notifiable disease under the Public Protection (Notification) Regulations 2010, the GP will report this to the Public Health England.
- When we become aware or are formally informed of the notifiable disease our manager informs Ofsted and contacts Public Health England and acts on any advice given.

HIV/AIDS/Hepatitis

HIV virus like other viruses such as Hepatitis A,B and C are spread through bodily fluids. Hygiene precautions for dealing with body fluids are the same for all children and adults.

To help prevent spread of infection we use the following:

- Wear single use 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 bodily fluids using a mild disinfectant solution and mops. Any cloths used are bagged and disposed of.
- Clean any tables and other furniture, furnishings and toys affected by blood, urine, vomit or faeces using a disinfectant.

Nits and Head Lice

- Nits and headlice are not an excludable condition, although in exceptional cases we may ask a parent to keep the child away until the infestation is cleared.
- On identifying cases of head lice we inform all parents and ask them to check and treat their child and family's hair.

Procedures for children with allergies

- When children start at the setting we ask parents if their child suffers from any know allergies. This is recorded on the registration form.
- If a child has an allergy we will complete a risk assessment form to detail the following:
 - The allergen (the substance, material or living creature the child is allergic to such as nuts, eggs bee stings etc)

- The nature of the allergic reaction (anaphylactic shock, rash, skin reddening, swelling, breathing problems)
- What to do in a case of an allergic reaction, any medication used and how it is to be used (eg: Epipen)
- Control measures such as how the child can be prevented form contact with the allergen
- o 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 to be used within the setting
- Parents are made aware so that no nut or nut products are accidently brought in for example for 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 manufacturers instructions clearly written on them.
 - We must be provided with clear written instructions on how to administer such medication
 - We must have the parents or guardian prior written consent. This consent must be kept on file. It is not necessary to forward copy documents to our insurance provider
- Lifesaving medication and invasive treatments. Theses include adrenaline injections (Epipens) for anaphylactic shock reaction or invasive treatments such as rectal administration of Diazepam (for epilepsy)
 - We must have a letter for 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

- Proof of training in the administration of such medication by the child' GP, 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 Tiny Feet's insurers. Written confirmation that the insurance has been extended will be issued by return.
- Key person for special need children requiring assistance with tubes to help them with everyday living eg: breathing apparatus, to take nourishment or stoma bags:
 - Prior written consent must be obtained form 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 letters relating to these children must first be sent to Tiny Feet's Insurance provider. Written confirmation that the insurance has been extended will be issued by return.
 - If we are unsure about any aspect we will contact our insurance provider.

Signed on behalf of Tiny Feet Preschool	date:
Name of Signatory	
Role of Signatory	

Please note the separate Covid-19 Policy where some of the Procedures differ relating to keeping the child home after being poorly.

Policy updated on 05/08/2020