



MANAGING CHILDREN WHO ARE SICK, INFECTIOUS, OR WITH ALLERGIES

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 for example, if they have a temperature, sickness, diarrhoea or pains, particularly in the head or stomach the Manager/Deputy Manager will call the parents and ask them to collect the child as soon as possible, or to send a known carer to collect the child on their behalf.
- In this event the child would be seen by the Manager/ Deputy Manager or another qualified first aider.
- If a child has a temperature, they are kept cool, by removing top clothing and sponging their heads with cool water, but kept away from draughts.
- The child's temperature is taken using an under the arm thermometer or head scan
- If the child's temperature does not go down and is worryingly high, then we may administer Calpol after first obtaining verbal consent from the parent. This is to reduce the risk of febrile convulsions, particularly for babies. The child's registration consent form will first be checked and parents will sign the *child medication consent & administration form* when they collect their child.
- In extreme cases of emergency, an ambulance is called and the parent informed.
- In most cases, when a child is sent home from nursery, we feel that it would be beneficial if they saw a doctor before returning them to the setting; we reserve the right to refuse admittance to children who have either a; high temperature, sickness and diarrhoea or a contagious infection or disease.
- After diarrhoea or vomiting, 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.
- A list of excludable diseases and current exclusion times is available on our parent's notice board and from the Nursery Manager as required.

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 the Health Protection Agency. A full list is displayed on the parent's notice board as part of the excludable diseases and current exclusion times.



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- Parents must notify us if their child has a contagious disease. We may then have to pass this information on to the local Health Protection Duty Room after referring to the 'Guidance on infection Control in schools and other childcare settings'
- When we become aware, or are formally informed of the notifiable disease, the owners will inform Ofsted and the local Health Protection Agency, and act 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. Please also see **Body Fluid Spillage Policy**. 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.
- Use protective rubber gloves for cleaning clothing after changing.
- Soiled clothing is either bagged for parents to collect or is laundered in the setting.
- Clear spills of blood, urine, faeces or vomit using disinfectant solution (D10) and mops; any cloths used are bagged and disposed of.
- Clean any tables and other furniture, furnishings or toys affected by blood, urine, faeces or vomit using a disinfectant (D10).
- Ensure that children do not share tooth brushes.

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 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*.
- If a child has an allergy, we complete an '*Child Allergy 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).



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- Control measures - such as how the child can be prevented from contact with the allergen.
- A review period will be set every six months; the Parents also have an obligation to make the nursery aware of any changes to their child's allergy.
- The allergy form is kept in the child's personal file and details are displayed on the allergy notification posters which are located in all rooms, the office and kitchen where all staff can see it.
- Generally, no nuts or nut products are used within the setting. See **Nut Free Policy**. Parents are made aware so that no nut or nut products are accidentally brought in, for example to a party.

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:

- 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 procedures for the correct storage and administration of the medication. Please see **Administering & Storage of Medicine Policy**.
- We must have the parents or guardian's prior written consent. This consent must be kept on file.

Life-saving medication and invasive treatments:

These include adrenaline injections (EpiPen's) 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.

A child first aid/medicine plan will then be completed with the parents. Please see the **Administering Medicines and Storage of Medicines Policy**.