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Managing children with allergies, or who are sick or infectious

Policy Statement

We provide care for healthy children and promote health through identifying allergies and preventing contact with the allergenic substance and through preventing cross infection of viruses and bacterial infections.

Procedures for children with allergies

- When parents start their children at the setting they are asked if their child suffers from any allergies this is recorded on the registration form
- If the child has an allergy a risk assessment form 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 i.e. 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 (i.e. Epipen)
 - \circ $\,$ Control measures such as how the child can be prevented from contact with the allergen.
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- This form is kept in the child's personal file and a copy is displayed where staff can see it.
- Parents 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
- Parents are made aware so that no nut or nut products are accidentally brought in, i.e. 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 our insurance provider must be obtained to extend the insurance.

At all times the administration of medication must be compliant with the 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.
- The group 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.
- Parents/carers must complete and sign our medication form which is filed in our medication folder
- We can administer non-prescription medication provided by the parent/carer such as Calpol and Nurofen with written permission from the parent/carer and a written record of the date, time and dose of the medication will be kept in our medication file.

Life saving medication and 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

- 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 medicine by the child's GP, a district nurse, children's nurse specialist or a community paediatric nurse

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 them 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.
- In extreme cases of emergency the child should be taken to the nearest hospital and the parent informed
- Parents are asked to take their child to the doctor before returning them to pre-school; we can refuse admittance to children who have a temperature, sickness/diarrhoea or a contagious infection or disease

- Where children have been prescribed antibiotics, parents are asked to keep them at home for 48 hours before returning to the setting
- After diarrhoea, parents are asked to keep children home for 48 hours or until a formed stool is passed
- The setting has a full list from the Health Protection Agency of diseases and current exclusion times and includes common childhood illnesses such as measles (kept in the kitchen area).

Reporting of 'notifiable diseases'

- If a child or adult is diagnosed as suffering from a notifiable disease under Public Health (Infectious Diseases) Regulations 2010, the GP will report this to the Health Protection Agency
- When the setting becomes aware, or is formally informed of a notifiable disease, the Manager informs Ofsted and follows advice and guidance given by the Health Protection Agency

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
- Soiled clothing is rinsed and bagged for parents to collect
- Spills of blood, urine, faeces or vomit are cleared using mild disinfectant solution and mops
- Tables and other furniture, furnishings or toys affected by blood, urine, faeces or vomit are cleaned using a disinfectant.

Coronavirus

See Coronavirus policy

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

Further guidance

• Managing Medicines in Schools (DofES 2014)

Priory View Pre-School

This policy was adopted by the Joint Management Team:

Vicky Peters - Owner / Manager

Delphine Pouncy – Deputy Manager

Christine Johnson – Deputy Manager