

General Welfare Requirement: Safeguarding and Promoting Children's Welfare

Glebe House School Early Years Staff must promote the good health of the children, take necessary steps to prevent the spread of infection, and take appropriate action when they are ill.

Promoting health and hygiene

1.17 Managing children with allergies, or who are sick or infectious

(Including reporting notifiable diseases)

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. We strongly recommend that all children in our setting have the appropriate NHS childhood immunisations, unless they are advised otherwise by NHS. We also promote good oral health to parents or carers and children, through emails, external agencies visiting the setting and through daily conversations with the children to try and be as proactive as possible in encouraging healthy lifestyles for everyone. *Please also refer to our Infection Control and Sickness and Illness Policies for more detailed information on these topics.*

EYFS Key themes and commitments

A Unique Child	Positive Relationships	Enabling Environments	Learning and Development
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Procedures for children with allergies

At **Glebe Trust** we are aware that children may have or develop an allergy resulting in an allergic reaction.

We aim to ensure allergic reactions are minimised or, where possible, prevented and that staff are fully aware of how to support a child who may be having an allergic reaction.

Our procedures

- All staff are made aware of the signs and symptoms of a possible allergic reaction in case of an unknown or first reaction in a child. These may include a rash or hives, nausea, stomach pain, diarrhoea, itchy skin, runny eyes, shortness of breath, chest pain, swelling of the mouth or tongue, swelling to the airways to the lungs, wheezing and anaphylaxis
- We ask parents/carers to share all information about allergic reactions and allergies on their child's registration form and to inform staff of any allergies discovered after registration
- We share all information with all staff and keep an allergy register in each relevant year group as well as the nursery office, which is shared at regular room and whole staff meetings by the Senior Management Team within nursery.

- Where a child has a known allergy, the nursery manager will carry out a full Allergy Risk Assessment Procedure with the parent/carer prior to the child starting the nursery and/or following notification of a known allergy and this assessment is shared with all staff. This may involve displaying photos of the children along with their known allergies in the kitchen/nursery rooms, where applicable. The 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 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.
 - This form is kept in the child's personal file and a copy is displayed where staff can see it.
 - Community Nurses and Parents train staff in how to administer special medication in the event of an allergic reaction.
- All food prepared for a child with a specific allergy is prepared in an area where there is no chance of contamination and served on equipment that has not been in contact with this specific food type, e.g. nuts are not used within the setting
- Parents and staff are made aware so that no nut or nut products are accidentally brought in, for example to a party or in packed lunches or teas from home.
- The manager, nursery cook and parents/carers work together to ensure a child with specific food allergies receives no food at nursery that may harm them. This may include designing an appropriate menu or substituting specific meals on the current nursery menu
- Seating is monitored for children with allergies. Where deemed appropriate, staff will sit with children who have allergies and where age/stage appropriate staff will discuss food allergies with the children and the potential risks
- If a child has an allergic reaction to food, a bee or wasp sting, plant etc. a paediatric first-aid trained member of staff will act quickly and administer the appropriate treatment, where necessary. We will inform parents/carers and record the information in the incident book and on the allergy register
- If an allergic reaction requires specialist treatment, e.g. an EpiPen, then at least two members of staff working directly with the child and the manager will receive specific medical training to be able to administer the treatment to each individual child.

Food Information Regulations 2014

- We incorporate additional procedures in line with the Food Information Regulations 2014 (FIR) including displaying our weekly menus on the Parent Information Board/website/online system identifying any of the 14 allergens that are used as ingredients in any of our dishes.

In the event of a serious allergic reaction and a child needing transporting children to hospital, the nursery manager/staff member will:

- Call for an ambulance immediately if the allergic reaction is severe. Staff will not attempt to transport the sick child in their own vehicle
- Ensure someone contacts the parents/carers whilst waiting for the ambulance, and arrange to meet them at the hospital
- Arrange for the most appropriate member of staff to accompany the child, taking with them any relevant information such as registration forms, relevant medication sheets, medication and the child's comforter
- Redeploy staff if necessary to ensure there is adequate staff deployment to care for the remaining children. This may mean temporarily grouping the children together
- Inform a member of the management team immediately
- Remain calm at all times and continue to comfort and reassure the child experiencing an allergic reaction. Children who witness the incident may also be well affected by it and may need lots of cuddles and reassurance. Staff may also require additional support following the incident
- Where a serious incident occurs and a child requires hospital treatment, Ofsted will be informed.

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 your insurance provider must be obtained to extend the insurance.

At all times the administration of medication must be compliant with the Safeguarding and Welfare Requirements of the Early Years Foundation Stage and follow procedures based on advice given in the below links from Public Health and BMA.

Oral Medication

Asthma inhalers are now regarded as "oral medication" by insurers and so documents do not need to be forwarded to your insurance provider.

- Oral medications must be prescribed by a GP or have manufacturer's instructions clearly written on them.
- Parents must provide us 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.
- We must always gain parents or guardians prior written consent. This consent must be kept on file. It is not necessary to forward copy documents to your insurance provider.
- Life saving medication & 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).

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 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 letters relating to these children must be stored in the child's file and sent to the Insurance Company if necessary. Confirmation may then need to be issued in writing confirming that the insurance has been extended.

Key person for special needs children - children requiring help with tubes to help them with everyday living e.g. breathing apparatus, to take nourishment, colostomy bags etc.

- Prior written consent from the child's parent or guardian to give treatment and/or medication prescribed by the child's GP.
- Key person to have the relevant medical training/experience, which may include those who have received appropriate instructions from parents or guardians, or who have qualifications.
- Copies of all letters relating to these children may need to be sent to our Insurance Company for appraisal. Written confirmation that the insurance has been extended will be issued by return.

If you are unsure about any aspect, contact the Bursar or Headmaster who will contact the School's Insurance Company, QBE UK Limited.

Procedures for children who are sick or infectious

- During initial visits to nursery parents are made aware of the importance of keeping children at home when they are ill and the need to refer to the communicable disease guidance
- If children appear unwell during the day – have a temperature, sickness, diarrhoea or pains, particularly in the head or stomach – the manager/head of room calls the parents and asks them to collect the child, or send a known carer to collect on their behalf.
- Please see health and safety policy 3.2 regarding safe disposal of body fluids.
- If a child has a temperature, they are kept cool, by following the latest advice from current paediatric training.
- Temperature is taken using a 'fever scan' or 'ear probe' kept near to the first aid box or in the nursery kitchen
- In extreme cases of emergency the child should be taken to the nearest hospital and the parent or emergency contact person will be informed, as soon as possible by the senior member of staff on duty

- Parents are asked to take their child to the doctor before returning them to nursery; the nursery can refuse admittance to children who have a temperature, sickness and 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 list of excludable diseases and current exclusion times. The full list is obtainable from the links below and includes common childhood illnesses such as measles.
- Communicable Disease Guidance Sheets are displayed on the parents notice board and given to all new parents/carers for guidance
- Signs are placed on the door/walls notifying parents/carers/visitors of any health concerns so if their children or family members are not appropriately immunised or have low immune systems, they can make the choice whether to enter nursery or not.

Reporting of 'notifiable diseases'

- If a child or adult is diagnosed suffering from a notifiable disease under the Health Protection(Notification) Regulations 2010, the GP will report this to the Health Protection Agency.
- When the setting becomes aware, or is formally informed of the notifiable disease, the manager informs Ofsted and acts on any advice 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.
- Protective rubber gloves are used for cleaning/slucing clothing after changing.
- Soiled clothing is rinsed and either bagged for parents to collect or laundered in the nursery.
- Spills of blood, urine, faeces or vomit are cleared using mild disinfectant solution and mops; cloths used are disposed of with the clinical waste.
- Tables and other furniture, furnishings or toys affected by blood, urine, faeces or vomit are cleaned using a disinfectant.

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.

Further guidance

- Guidance on health protection in schools and other childcare facilities which sets out when and for how long children need to be excluded from settings, when treatment/medication is required and where to get further advice can be found at <https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities>
- Non-prescription medicines can include those that can be purchased from pharmacies (including some over the counter medicines which can only be purchased from a pharmacy), health shops and supermarkets. See also BMA advice: <https://www.bma.org.uk/advice-and-support/gp-practices/managing-workload/prescribing-over-the-counter-medicines-in-nurseries-and-schools>
- Supporting pupils at school with medical conditions (December 2015)
- Communicable health disease guidance sheet – <https://www.publichealth.hscni.net/publications/guidance-infection-control-schools-and-other-childcare-settings-0>
- A link to health protection agency as above
- Statutory Framework for Early Years Foundation Stage - [Statutory framework for the early years foundation stage \(publishing.service.gov.uk\)](https://www.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/426267/early-years-foundation-stage-2017.pdf)
- food.gov.uk/allergy
- [Early Childhood and Family Service \(ECFS\) - Norfolk County Council](http://www.norfolk.gov.uk/early-childhood-and-family-service)
- Health advice and support <https://www.iustonenorfolk.nhs.uk/>
- [Health matters: child dental health - GOV.UK \(www.gov.uk\)](http://www.gov.uk/health-matters/child-dental-health)
- <https://www.nhs.uk/live-well/healthy-body/taking-care-of-childrens-teeth/>
- <https://www.norfolk.gov.uk/care-support-and-health/health-and-wellbeing/childrens-health-and-wellbeing>

This policy was adopted at a meeting of	Glebe House Trust Nurseries	name of setting
Held on	<hr/> September 2022	(date)
Date to be reviewed	<hr/> September 2023	(date)
Signed on behalf of the management committee	<hr/>	
Name of signatory	<hr/> Susie Pull	
Role of signatory (e.g. chair/owner)	<hr/> Area Manager Glebe Trust Nurseries	