



## Promoting health and hygiene

### HH3 Managing children and staff with allergies, or who are sick or infectious

#### (Inc. Managing staff with long term or short term medical conditions)

(Including reporting notifiable diseases)

#### 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 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, a risk assessment form is completed to detail the following:
  - i. The allergen (i.e. the substance, material or living creature the child is allergic to such as nuts, eggs, bee stings, cats etc)
  - ii. The nature of the allergic reactions e.g. anaphylactic shock reaction, including rash, reddening of skin, swelling, breathing problems etc.
  - iii. What to do in case of allergic reactions, any medication used and how it is to be used (e.g. EpiPen).
  - iv. Control measures – such as how the child can be prevented from contact with the allergen.
  - v. Review.
- This form is kept in the child's personal folder and also in the day to day folder so all staff have access to it.
- Generally, no nuts or nut products are used within the setting.
- Parents are asked not to include nut or nut products in their children's lunchboxes.
- Parents are asked not to bring in nut or nut products to parties.
- Food allergies are on display in the Kitchen folder and snack table.

#### *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 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 the insurance provider.

- Oral medications must be prescribed by a GP or have manufacturer's instructions clearly written on them.
- The setting 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.
- The setting 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 the 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).

- The setting 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 documents relating to these children must first be sent to the Early Years Alliance Insurance Department for appraisal (if there is another provider, please check their procedures with them). Written confirmation that the insurance has been extended will be issued by return.

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 must first be sent to the Early Years Alliance Insurance Department for appraisal (if there is another provider, please check their procedures with them).  
Written confirmation that the insurance has been extended will be issued by return.

If you are unsure about any aspect, contact the Early Years Alliance Insurance Department on 020 7697 2585 or email [insurance@eyalliance.org.uk](mailto:insurance@eyalliance.org.uk).

### **Procedures for children who are sick or infectious**

- If children appear unwell during the day – have a temperature, sickness, diarrhoea **and/or** pains, particularly in the head or stomach – staff should inform the manager who will call the parents and ask them to collect the child, or send a known carer to collect 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.
- The child's temperature is taken using a forehead thermometer, kept in the first aid box
- 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 preschool; the preschool 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 sickness and/or diarrhoea, parents are asked to keep children home for 48 hours after the last bout of sickness or diarrhoea, or, until a formed stool is passed.
- The setting has a list of excludable diseases and current exclusion times which is kept in the day to day folder and used as a guide. Staff will research the disease via the internet to gain the most up-to-date information about it before sharing it with parents.  
[www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities](http://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities)
- Notification of and information on each illness or disease will be displayed on the whiteboard placed on the parents table once the preschool has been notified of it and once the information has been downloaded and printed. An email will also be sent to all parents/carers. The name of the child suffering from such an illness or disease will always be kept confidential.

## Response to an infection outbreak

- Manage confirmed cases of a contagious illness by following the guidance from the [UK Health Security Agency \(UKHSA\)](#)

## Informing others

Early years providers have a duty to inform Ofsted of any serious accidents, illnesses or injuries as follows:

- anything that requires resuscitation
- admittance to hospital for more than 24 hours
- a broken bone or fracture
- dislocation of any major joint, such as the shoulder, knee, hip or elbow
- any loss of consciousness
- severe breathing difficulties, including asphyxia
- anything leading to hypothermia or heat-induced illness

In some circumstances this may include a confirmed case of a Notifiable Disease in their setting, if it meets the criteria defined by Ofsted above. Please note that it is not the responsibility of the setting to diagnose a notifiable disease. This can only be done by a clinician (GP or Doctor). If a child is displaying symptoms that indicate they may be suffering from a notifiable disease, parents must be advised to seek a medical diagnosis, which will then be 'notified' to the relevant body. Once a diagnosis is confirmed, the setting may be contacted by the UKHSA, or may wish to contact them for further advice.

### *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 Public Health England.
- When the setting becomes aware, or is formally informed of the notifiable disease, the manager informs Ofsted and acts on any advice given by Public Health England.

### *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 bagged for parents to collect.
- 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*

- 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.
- If the lice still persists the setting will ask that the child is kept away until the infestation is gone because of the high risk of infecting the other people within the setting

#### **Procedures for staff with allergies and long term or short term medical conditions**

- If a member of staff is pregnant or has an allergy or a medical condition which could have a detrimental effect on their ability to carry out their duties, they should disclose this information to the Management team and a risk assessment form will be completed by either the Manager or Deputy Manager.
- This will be completed after a full and detailed discussion with the member of staff in order that the preschool is able to gather all information about the allergy or long term medical condition and its effects on the individual concerned. This is required so that the preschool is able to support the member of staff accordingly.
- The person completing the risk assessment may do some independent research to ensure that all aspects of the allergy or long term medical condition are known and the information is kept on file.
- If a member of staff has a short term medical condition that may have a negative impact on their ability to carry out their duties they must disclose this information to the Manager or Deputy Manager and complete the Enabling Environments form.
- A risk assessment form will be completed by the Manager or the Deputy Manager after a full and detailed discussion has taken place with the member of staff.
- Reasonable adjustments will be made to accommodate the member of staff whilst they are recovering from their short term medical condition in order that they can carry out their duties within the setting whilst keeping them safe.
- A review of the short term medical condition will be carried out in accordance with instructions from the individuals' consultant or other medical expert and will be repeated, if necessary, until the short term medical condition is no longer an issue.

#### **Procedures for staff who are sick or infectious**

- If staff appear unwell during the day – have a temperature, sickness, diarrhoea or pains, particularly in the head or stomach – the manager or supervisor will ask the member of staff to go home and remain away from preschool until they are feeling better.

- After sickness and/or diarrhoea staff are asked to stay at home for 48 hours until the sickness has passed and/or until a formed stool is passed. Staff are expected to use their common sense and judgement on whether they are fit to return to work.

### Further guidance

[Good Practice in Early Years Infection Control](#) (Alliance 2009)

[Medication Administration Record](#) (Early Years Alliance 2019)

Guidance on infection control in schools and other childcare settings (Public Health Agency)

[https://www.publichealth.hscni.net/sites/default/files/Guidance\\_on\\_infection\\_control\\_in%20schools\\_poster.pdf](https://www.publichealth.hscni.net/sites/default/files/Guidance_on_infection_control_in%20schools_poster.pdf)

This policy was adopted at a meeting of

Little Fishes Pre-School

Held on

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11/2/13

Reviewed Spring 2023

Date to be reviewed

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Spring Term 2025

Signed on behalf of the management  
committee

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Vicky Baker – Chairperson

Tracy Parkins – Manager

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