Safeguarding and Welfare Requirement: Health

The provider must promote the good health of children attending the setting. They must have a procedure, discussed with parents and/or carers, for responding to children who are ill or infectious, take necessary steps to prevent the spread of infection, and take appropriate action if children are ill.

MANAGING CHILDREN WHO ARE SICK, INFECTIOUS OR WITH ALLERGIES POLICY (October 2018)

Policy statement

Riding Mill Outdoor Preschool aims 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

- For the protection of other children and our staff we reserve the right to refuse to admit a
 child if they have a temperature, sickness or diarrhoea or any contagious infection or disease
 on arrival at preschool, or to ask parents/carers to collect their child if they become unwell
 whilst at preschool.
- Where children have been prescribed antibiotics for an infectious illness or complaint, we ask parents/carers to keep them at home for 48 hours before returning to the setting.
- After sickness and/or diarrhoea, we ask parents/carers keep children home for 48 hours following the last episode.
- If children appear unwell during the day for example, if they have a temperature, sickness, diarrhoea or pains, particularly in the head or stomach a member of RMOP staff will call the parents and ask them to collect the child, or to send a known carer to collect the child on their behalf. If parents cannot be reached staff will immediately try to contact the next person on the list of responsible adults that parents/carers have provided.
- 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 underarm digital thermometer which is stored in the medications box.
- If the child's temperature does not go down and is worryingly high, then RMOP staff may
 give them Calpol or another similar analgesic, as long as parents have given written consent as
 part of the RMOP registration process (see below). Parents sign the medication record when
 they collect their child.
- In extreme cases of emergency, an ambulance is called and the parent informed.
- We ask that parents immediately inform us if their child, sibling or close family member is suffering from any contagious disease or has been diagnosed by a medical practitioner with a notifiable disease. For the benefit of other children, our staff and visitors attending the

- preschool a child cannot attend whilst they are (or are suspected to be) contagious and pose a risk to others.
- RMOP follows guidance from the Public Health Agency regarding infection control. Further
 information can be obtained from
 www.publichealth.hscni.net/sites/default/files/Guidance_on_infection_control_in%20schools
 _poster. (a link to this is also available on our website).
- 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.

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 Public Health England.
- When we become aware, or are formally informed of the notifiable disease, the RMOP Leader informs Ofsted, contacts Public Health England, and acts on any advice given.

Consent

- As part of our registration process, parents/carers are asked to read, and sign where appropriate, consent forms for medical emergencies and administering medication. No medication will be given to the child unless provided by the parents/carers unless it is deemed an emergency by staff.
- Regarding medical emergencies, parents/carers can choose whether to give consent for:
 - a suitably qualified First Aider to administer First Aid to their child;
 - or take to A&E;
 - or call for medical assistance or an ambulance if necessary and to sign on their behalf any consent forms required by medical authorities, if it would not be advisable to wait for parents to arrive
- Regarding the administering of medication, parents/carers can choose whether to give consent for:
 - RMOP staff to administer medication to their child if provided and requested to do so by the parent/carer.
 - RMOP staff to use plasters on my child if deemed necessary.
 - RMOP staff to administer paracetamol/antihistamine in an emergency

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. 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.
- Bag soiled clothing for parents to take home for cleaning.
- Clear spills of blood, urine, faeces or vomit using mild disinfectant solution and mops; any cloths used are disposed of with the clinical waste.
- Clean any tables and other furniture, furnishings or toys affected by blood, urine, faeces or vomit using a disinfectant.

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 ask them to treat their child and all the family if they are found to have head lice.

Procedures for children with allergies

- When children start at the setting we ask their parents if their child suffers from any known allergies. This is recorded on the registration form.
- If a child has an allergy, we complete a risk assessment 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).
 - Control measures such as how the child can be prevented from contact with the allergen.
 - Review measures.
- This risk assessment form is kept in the child's personal file and a copy is displayed where RMOP staff can see it.
- · 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, for example to 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 manufacturer's instructions clearly written on them.
- RMOP staff must be provided with clear written instructions on how to administer such medication.
- We adhere to all risk assessment procedures for the correct storage and administration of the medication.
- RMOP staff 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 our insurance provider.

· Life-saving medication and invasive treatments:

These include 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). RMOP staff 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 RMOP 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 Pre-school Learning Alliance Insurance Department for. Written confirmation that the insurance has been extended will be issued by return.

- Key person for special needs children requiring assistance with tubes to help them with everyday living e.g. breathing apparatus, to take nourishment, colostomy bags etc.:
 - Prior written consent must be obtained from 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 quardians.
 - Copies of all letters relating to these children must first be sent to the Pre-school Learning Alliance Insurance Department for appraisal. Written confirmation that the insurance has been extended will be issued by return.
- If RMOP staff are unsure about any aspect, they can contact the Pre-school Learning Alliance Insurance Department on 020 7697 2585 or email membership@pre-school.org.uk/insert.