

Felixstowe Nursery School

Safeguarding and Welfare Requirement: Health

The provider must promote the good health of the 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 when they are ill.

Managing children who are sick, infectious, or with allergies (Including reporting notifiable diseases)

Statement

Our setting provides 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 – 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 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.
- Temperature is taken using a 'fever scan' kept in the first aid box.
- If the child's temperature does not go down and is worryingly high, then we may give them Calpol or another similar analgesic if parents have sent it in, after first obtaining verbal consent from the parent where possible. This is to reduce the risk of febrile convulsions. Parents sign the medication record when they collect their child.
- In extreme circumstances an ambulance would be called to take them to hospital and the parent informed.
- Parents are advised to take their child to the doctor if necessary 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.
- Following an episode of diarrhoea and sickness, parents are informed to keep their child away from nursery for 48 hours following an episode to minimise infecting others. Children suffering from an episode whilst at nursery will be monitored closely and parents will be notified and asked to collect their child as soon as possible
- 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 separate bowl is used for body fluids. Staff will wear a disposable apron and

gloves to protect themselves. Soiled areas will be cleaned immediately and appropriately.

- Staff always wear gloves when dealing with body fluids and they are disposed of hygienically and appropriately.
- To maintain hygiene as far as possible children are encouraged to blow their own noses and dispose of tissues immediately into the waste bins provided.
- Ofsted are notified if we have any infectious diseases that medical personnel consider notifiable.
- [We/I have] a list of excludable diseases and current exclusion times. The full list is obtainable from

www.hpa.org.uk/webc/HPAwebFile/HPAweb_C/1194947358374 and includes common childhood illnesses such as measles.

*Diarrhoea is defined as 3 or more liquid or semi-liquid stools in a 24-hour period.
(www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/chapter-9-managing-specific-infectious-diseases#diarrhoea-and-vomiting-gastroenteritis)

What happens if someone shows symptoms of covid-19 at setting

- If a child becomes unwell with a persistent cough or high temperature while in setting, we will phone parent to come and collect child.
- While the child is waiting, they will be taken to the office where they can be isolated from the other children and adults, just staying with one adult. The door will be closed and windows will be opened. If they need the toilet while waiting, we will use the disabled toilet, which will be disinfected before being used again.
- Mask, gloves and apron will be used by adult supporting child if a distance of 2 metres cannot be maintained.
- In an emergency call 999 if symptoms are serious.
- The adult that has supported child does not need to go home unless they show symptoms themselves, they can then be tested or the child tests positive. They should wash their hands for 20 seconds after contact with someone who is unwell, then clean the area with normal household disinfectant.

What happens if there is a confirmed case of coronavirus in setting.

- If a child/adult develops symptoms they should be sent home to take a PCR test, if it is positive they must isolate for 10 days the rest of the household should take a PCR test.
- If tested negative they can return to setting
- If a child/adult tests positive the rest setting would be informed and advised to take a PCR if in close contact, but they will not need to isolate.
- If more cases are detected in the cohort or wider setting, Public Health protection team will conduct a rapid investigation and advise setting on what action to take.
- Children and adults will be eligible for testing 111 online coronavirus service.

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/I] become aware, or are formally informed of the notifiable disease, [our manager informs/I inform] Ofsted and contacts Public Health England, and act[s] on any advice given.

HIV/AIDS/ Hepatitis procedures

- HIV virus, like other viruses such as hepatitis, (A, B and C) are spread through bodily 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 is bagged for parents to collect.
- Spills of blood, urine, faeces or vomit are cleared using mild disinfectant solution and mops used solely for this purpose; 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 via a notice displayed in the entrance area of the setting informing them there has been a case in nursery advising them to check their own child's head and asked to treat their child and all the family if they are found to have head lice. Advice on treatments will be given if requested by parents.

Procedures for children with allergies.

- When a child starts at the setting their parents are asked if their child suffers or has any known allergies. This is recorded on their registration form.
- If child has a known allergy, a risk assessment form is completed to contain the following detail:-
 - 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 form is kept in the child's personal file and a copy is displayed where staff can see it.

- A health care plan will also be completed
- Parents train staff in how to administer special medication in the event of an allergic reaction or receive training by a professional if this is required.
- We try to ensure that there are 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 such as for 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 the 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

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 the manufacturer's instructions clearly written on them.
- The setting must be provided with clear written instructions on how to administer such medication.
- Staff giving the medicine will sign to say what has been given, time given and dosage given . Another member of staff oversees this and counter signs as a witness to the procedure to avoid mistakes.
- Parents then sign to say they have been informed of this procedure. This avoids confusion leading to over dosage being given.(see administering medicines policy)
- All risk assessment procedures need to be adhered to for the correct storage and administration of the medication.
- The setting must must have the parents or guardians prior written consent. This consent is kept on file . It is not necessary to forward copy documents to the insurance provider.

Life saving medication and invasive treatments – Adrenaline injections(Epipens) for anaphylactic shock reactions (caused by allergies to nuts, eggs etc.) or invasive treatment such as rectal administration of Diazepam (for epilepsy).

- The setting must have the following:

1) A letter from the child's GP/consultant stating the child's condition and what medication if any is to be administered.

2)Written consent from the parent or guardian allowing staff to administer medication.

3)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 sent to the insurance provider for appraisal. Written confirmation will then be issued

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 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 the parents/guardians, or who have qualifications.
- Copies of all letters relating to these children must first be sent to the insurance provider for appraisal. Written confirmation that the insurance has been extended will be issued by return.
- Treatments, such as inhalers or Epipens are immediately accessible in an emergency
- 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 guardians.
- 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 we are unsure about any aspect, we contact [the Pre-school Learning Alliance Insurance Department on 020 7697 2585 or email membership@pre-school.org.uk/insert details of your insurance provider].

This policy was adopted at a meeting of Felixstowe Nursery School.

Held on

Date to be reviewed.....

Signed by Chairperson.....

Signed by Manager.....

Based on Pre school Learning Alliance policies & procedures