

Managing children with allergies, or who are sick or infectious

Daily Hygiene Practices ensures that children follow good hygiene practices throughout the day and around food.

1. Hand washing is one of the most important ways of controlling the spread of infections, especially those that cause diarrhoea and vomiting, and respiratory disease. We always wash hands after using the toilet, before eating or handling food, and after handling animals. Cuts and abrasions are covered with waterproof dressings.
2. Coughing and sneezing easily spread infections. Children and adults are encouraged to cover their mouth and nose with a tissue, wash hands after using or disposing of tissues

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 the following is recorded:
 - 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.
 - 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.
 - No nuts or nut products are used within the setting.
 - Parents are made aware to help prevent nuts or nut products from being brought into nursery.

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.

Lifesaving medication & invasive treatments

Adrenaline injections (Epipens) for anaphylactic shock reactions (caused by allergies to nuts, eggs etc).

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 parent, child's GP, a district nurse, children's nurse specialist or a community paediatric nurse.
- If children appear unwell during the day – have a temperature, sickness, diarrhoea or pains, particularly in the head or stomach – a teacher 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 an ear thermometer kept in the first aid box.
- **In extreme cases of emergency, the child should be taken to the nearest hospital and the parent informed.**
- 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 a new antibiotic, 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.

Reporting of 'notifiable diseases'

- When the setting becomes aware, or is formally informed of the notifiable disease, the manager informs the Health Protection Agency. Informing Public Health England (PHE) Hampshire and Isle of Wight Health Protection Team (0344 225 3861) if we suspect an outbreak of an infectious disease.
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Personal Protective equipment

- Single use vinyl gloves are worn when changing children's nappies, pants and clothing that are soiled with blood, urine, faeces or vomit.
- Protective gloves are used for cleaning/sluicing clothing after changing.
- Soiled clothing is bagged for parents to collect or sometimes discarded.
- Spills of blood, urine, faeces or vomit are cleared using mild disinfectant solution and 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, the parents are informed and asked to treat their child and all the family if they are found to have head lice.