Sunbeams
Community Hub

A world in which Autism is celebrated.

Registered Charity No. 1152188

Health and Safety

22. Managing Children/Young People with Allergies, or Who are Sick or Infectious.

(Including reporting notifiable diseases)

Policy statement

We provide care for healthy children/young people and promote health through identifying allergies and preventing contact with the allergenic substance and through preventing cross infection of viruses and bacterial infections.

Procedures for children/young people with allergies

- When parents/carers start their children/young people at the setting, they are asked if their child/young person suffers from any known allergies. This is recorded on the registration form.
- If a child/young person has an allergy, a risk assessment form is completed to detail the following:
    - The allergen (i.e. the substance, material or living creature the child/young person 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. Epee pen).
    - Control measures – such as how the child can be prevented from contact with the allergen.
    - Review.
- This form is kept in the child's/young person's personal file and a copy is displayed where staff can see it.
- Parents/Carers train staff in how to administer special medication in the event of an allergic reaction.

- Generally, no nuts or nut products are used within the setting.
- Parents/Carers are made aware so that no nut or nut products are accidentally brought in, for example to a party.

Insurance requirements for children/young people with allergies and disabilities

The insurance will automatically include children/young people with any disability or allergy, but certain procedures must be strictly adhered to as set out below. For children/young people 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 Welfare Requirements and follow procedures based on advice given in the statutory guidance on, 'Supporting pupils at School with medical conditions' (DfES 2014)

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.
- The group 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 group must have the parent's or guardian's prior written consent. This consent must be kept on file. It is not necessary to forward copy documents to your insurance provider.

Lifesaving medication & invasive treatments

Adrenaline injections (Epee pens) 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/young person's GP/consultant stating the child's/young person's condition and what medication if any is to be administered.
    - Written consent from the parent or guardian allowing staff to administer medication.
    - Proof of training in the administration of such medication by the child's/young person's GP, a district nurse, children's' nurse specialist or a community paediatric nurse.
- Copies of all three letters, relating to these children/young people must first be sent to the Manager for appraisal. Confirmation will then be issued in writing confirming that the insurance has been extended.

Key person for special needs children/young people – children/young people 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/young person's parent or guardian to give treatment and/or medication prescribed by the child's/young person'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/young people must first be sent to the Manager for appraisal. Written confirmation that the insurance has been extended will be issued by return.

Procedures for children who are sick or infectious

- If children/young people appear unwell during the day – have a temperature, sickness, diarrhoea or pains, particularly in the head or stomach – the manager calls the parents/carers and asks them to collect the child/young person, or send a known carer to collect on their behalf.
- If a child/young person 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.
- In extreme cases of emergency, the child/young person should be taken to the nearest hospital and the parent/carer informed.
- Parents/carers are asked to take their child/young person to the doctor before returning them to Sunbeams. Sunbeams will refuse admittance to children/young people who have a temperature, sickness and diarrhoea or a contagious infection or disease.
- Where children/young people have been prescribed antibiotics, parents/carers are asked to keep them at home for 48 hours before returning to the setting.
- After diarrhoea, parents/carers 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 including common childhood illnesses such as measles is obtainable from: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/789369/Exclusion_table.pdf

Reporting of 'notifiable diseases'

- If a child or adult is diagnosed suffering from a notifiable disease under the Public Health (Infectious Diseases) Regulations 1988, 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 bodily fluids. Hygiene precautions for dealing with bodily fluids are the same for all children, young people 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/sluicing clothing after changing.
- Soiled clothing is rinsed and bagged for parents/carers to collect. At no point is this to be washed on Sunbeams premises.
- 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/carer may be asked to keep the child/young person away until the infestation has cleared.
- On identifying cases of head lice, all parents/carers are informed and asked to treat their child/young person and all the family if they are found to have head lice

This policy was adopted on 20th April 2015

Policy updated 12th July 2025

Date to be reviewed April 2026

Signed on behalf of the management committee

Name of Signatory Susan Carr

Role of Signatory Manager

Reviewed By	Date
Sue Carr	24/04/024
Sue Carr	12/07/2025