



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.

6.2 Managing Children Who Are Sick, Infectious or Have Allergies

Policy statement

Impact Montessori Nursery is committed to protecting the health, safety and wellbeing of children, families and staff. We recognise our responsibility to minimise the spread of infectious diseases while ensuring that children who are unwell, have a medical condition or have an allergy are treated with dignity, care and respect.

We will:

- promote good hygiene and infection-prevention practices;
- follow current UK Health Security Agency (UKHSA) guidance on infectious diseases and exclusion periods;
- respond appropriately when a child becomes unwell while attending the nursery;
- maintain appropriate arrangements for children with allergies, intolerances and medical conditions;
- work closely with parents and carers and, where appropriate, health professionals;
- ensure staff understand children's individual medical and allergy needs;
- maintain accurate and up-to-date health and allergy information;
- ensure medicines are stored, administered and recorded safely;
- maintain appropriate emergency arrangements;
- take reasonable steps to prevent children coming into contact with known allergens;
- respond promptly to suspected allergic reactions or other medical emergencies.

Our procedures will be reviewed and updated when relevant national guidance or statutory requirements change.

1. When a child becomes unwell

If a child becomes unwell while attending the nursery, staff will assess the child's condition and consider whether they are well enough to remain safely at the setting.

If a child is displaying symptoms that indicate they should not remain at the nursery, the manager or designated person will contact the child's parent/carer or authorised emergency contact and ask them to collect the child as soon as reasonably practicable.

Examples may include:

- a high temperature;
- vomiting;
- diarrhoea;
- significant or worsening pain;

- unusual lethargy or drowsiness;
- difficulty breathing;
- symptoms of a potentially serious or infectious illness;
- a child who is unable to participate comfortably in normal nursery activities;
- any condition where staff reasonably believe that remaining at the nursery would be detrimental to the child or pose an infection risk to others.

Children with mild respiratory symptoms, such as a runny nose, sore throat or slight cough, may generally continue attending if they are otherwise well and do not have a high temperature. GOV.UK

2. High temperature

A child's temperature will be monitored where staff have concerns that the child may have a fever.

We will:

- make the child comfortable;
- remove excess clothing or bedding where appropriate;
- ensure the child is not overheated;
- offer fluids where appropriate;
- monitor the child's condition;
- contact parents/carers where the child is unwell or has a high temperature.

We will **not routinely sponge children with cool water** to reduce a temperature.

If a child's condition deteriorates or staff are concerned about their immediate health, appropriate emergency medical assistance will be sought.

3. Emergency medical assistance

If a child becomes seriously ill or has a medical emergency:

- staff will provide appropriate first aid within their level of training;
- emergency medical services will be contacted by calling **999** where necessary;
- the child's parent/carer will be contacted as soon as practicable;
- the child's emergency medical information and medication will be made available to medical professionals where appropriate;
- a written record of the incident will be completed;
- the manager will ensure that relevant follow-up actions are taken.

The child's safety and wellbeing will always take priority.

4. Exclusion from the nursery because of infection

We follow the current UKHSA guidance on public health exclusion periods.

The nursery will not automatically exclude children simply because they have a minor illness. Decisions will be based on the child's symptoms, ability to participate safely and the current public health guidance.

Parents will be advised of the applicable exclusion period where their child has an infectious illness.

For example, current UKHSA guidance states that:

- children with diarrhoea and/or vomiting should remain away from the setting until **at least 48 hours after symptoms have stopped**;
- children with chickenpox should remain away until **5 days after the rash first appears**;
- children with measles should remain away until **4 days after the rash first appears**;
- children with impetigo should remain away until all blisters have formed scabs or **2 days after starting antibiotics**;
- children with scarlet fever should remain away until **24 hours after starting antibiotics**;
- head lice do not require exclusion;
- conjunctivitis does not require exclusion under current UKHSA guidance. GOV.UK

Some infections have specific exclusion requirements and may require advice from the local Health Protection Team.

The nursery will use the current UKHSA guidance rather than maintaining a separate outdated list of exclusion periods.

Current UKHSA exclusion guidance

5. Antibiotics

There is no general nursery rule requiring every child prescribed antibiotics to remain at home for 48 hours.

Return to nursery will depend on:

- the child's illness;
- the specific infection;
- the child's general health;
- the relevant UKHSA exclusion period;
- medical advice where appropriate.

Where a particular infection has a specified exclusion period following antibiotic treatment, the nursery will follow the current UKHSA guidance.

6. Diarrhoea and vomiting

Children with diarrhoea and/or vomiting must remain at home until **at least 48 hours after the last episode**.

Parents should inform the nursery if their child has experienced diarrhoea or vomiting.

If several children or staff develop similar symptoms, the manager will consider whether an outbreak may be occurring and will seek advice from the local Health Protection Team where appropriate. GOV.UK+1

During an outbreak, the nursery may temporarily modify or suspend activities where there is an increased risk of contamination, such as:

- shared food activities;
 - self-service food;
 - water play;
 - sensory activities;
 - other activities identified through an appropriate risk assessment.
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7. Notifiable diseases and contact with the Health Protection Team

Some infectious diseases require notification to public health authorities.

Where the nursery becomes aware of a suspected or confirmed infectious disease requiring public health action, the manager will follow current UKHSA guidance and contact the local **Health Protection Team (HPT)** where required.

We will follow any advice provided by the HPT regarding:

- exclusion;
- infection control;
- communication with parents;
- outbreak management;
- additional cleaning;
- contact tracing or other public health measures where applicable.

The nursery will make any required notification to Ofsted in accordance with current statutory requirements. UKHSA guidance should be consulted rather than relying on historic Public Health England contact details. GOV.UK+1

8. Infection prevention and control

We promote good infection-control practices throughout the nursery.

Staff will:

- wash hands regularly and thoroughly;
- support children to wash their hands appropriately;
- use appropriate personal protective equipment (PPE) when dealing with bodily fluids;
- clean and disinfect contaminated surfaces promptly;
- dispose of waste safely;
- follow appropriate nappy-changing procedures;
- maintain good ventilation;
- follow appropriate food hygiene procedures;
- avoid unnecessary sharing of personal items;
- follow current infection-control guidance.

We will reinforce hygiene procedures during periods of increased illness or an outbreak. GOV.UK

9. Bodily fluids

When dealing with blood, vomit, urine, faeces or other bodily fluids, staff will take appropriate infection-control precautions.

Where necessary, staff will use:

- disposable gloves;
- disposable aprons;
- appropriate cleaning and disinfecting products;
- appropriate waste-disposal procedures.

Contaminated clothing will be placed in a suitable bag for parents/carers to take home.

Staff will follow the nursery's cleaning and infection-control procedures for contaminated areas, equipment and surfaces.

10. HIV, hepatitis and other blood-borne infections

Universal precautions will be followed when dealing with blood or other bodily fluids.

Staff will not make assumptions about whether a child or adult has a blood-borne infection.

The same infection-control procedures will be applied consistently to all children and adults.

A child's HIV, hepatitis or other medical information will be treated as confidential and shared only where there is an appropriate lawful reason and on a need-to-know basis.

11. Head lice

Head lice and nits do not normally require exclusion from nursery. GOV.UK

Where head lice are identified:

- parents will be informed confidentially;
- parents will be advised to check and treat their child as appropriate;
- information may be shared with other parents where appropriate if there is evidence of multiple cases, while maintaining confidentiality;
- the nursery will follow appropriate cleaning and hygiene procedures.

Children will not be stigmatised because they have head lice. Yes. I would change the policy to a **nut-free approach** and strengthen the allergy procedure so it reflects the **EYFS framework currently in force from 1 September 2026**. The current EYFS specifically requires providers to obtain information about allergies and dietary/health requirements, keep it up to date, and ensure relevant staff have access to it. It also requires appropriate procedures for medicines, including written parental permission and records of administration. GOV.UK+1

12. Allergies, Food Allergies and Special Dietary Requirements

Impact Montessori Nursery recognises that some children have food allergies, intolerances or other medical conditions that require particular care and management. Some allergic reactions can be life-threatening and require immediate treatment.

We will work in partnership with parents/carers and, where appropriate, health professionals to ensure that children with allergies are safely supported and included in all aspects of nursery life.

In accordance with the current Early Years Foundation Stage (EYFS) requirements, we will obtain information about each child's:

- known allergies;
- food allergies and intolerances;
- special dietary requirements;
- relevant medical conditions;
- medication requirements;
- emergency medication;
- other special health requirements.

This information will be obtained before the child starts at the nursery and will be kept up to date throughout the child's attendance.

Relevant information will be made available to staff who need it to keep the child safe, while maintaining appropriate confidentiality.

The EYFS requires providers to have systems for obtaining information about children's medical and dietary needs and for keeping this information up to date. GOV.UK+1

13. Nut-Free Nursery Policy

Impact Montessori Nursery operates a **nut-free policy**.

For the purposes of this policy, nuts include peanuts and tree nuts, including products or foods containing nuts.

We ask parents, carers, staff, students, visitors and contractors not to bring nuts or products containing nuts into the nursery.

This includes, where applicable:

- peanuts;
- peanut butter;
- almond products;
- hazelnuts;
- walnuts;
- cashews;
- pistachios;
- pecans;
- Brazil nuts;
- macadamia nuts;
- products containing nut pastes, nut oils or nut ingredients;
- foods clearly labelled as containing nuts.

Parents and carers will be informed of our nut-free policy during registration and reminded of the policy where necessary.

Staff will check food labels and ingredients carefully when preparing or providing food for children.

We recognise that a nut-free environment cannot provide an absolute guarantee that no trace of an allergen will ever be present. We therefore combine our nut-free policy with individual allergy risk assessments, appropriate food controls, good hygiene, staff awareness and emergency procedures.

Where a product carries a precautionary allergen warning such as "**may contain nuts**", it will not be provided to a child with a known nut allergy. Where appropriate, the nursery may choose not to provide such products to any children.

14. Identifying Children with Allergies

Before a child starts at Impact Montessori Nursery, parents/carers will be asked to provide full information about any known allergy or intolerance.

Where a child has an allergy, we will obtain information including, where applicable:

- the name of the allergen;
- whether the allergy is confirmed by a healthcare professional;
- the child's known symptoms;
- the severity of previous reactions;
- known triggers;

- foods or substances to be avoided;
- medication prescribed for the child;
- the child's emergency medication;
- instructions for administering medication;
- emergency contact details;
- details of the child's Allergy Action Plan;
- relevant medical advice;
- any additional precautions required.

Parents/carers must inform the nursery immediately if there is any change to their child's allergy, medical condition, medication or emergency arrangements.

15. Individual Allergy Risk Assessment and Allergy Action Plan

For every child with a known allergy, the nursery will complete an individual allergy risk assessment.

Where appropriate, this will be supported by an **Allergy Action Plan** completed with the child's parent/carer and, where necessary, the child's healthcare professional.

The allergy risk assessment and action plan will identify:

- the child's diagnosed allergy or suspected allergy;
- the allergen(s);
- possible sources of exposure;
- symptoms and signs of an allergic reaction;
- the child's individual emergency medication;
- when and how medication should be administered;
- measures to prevent exposure;
- arrangements for meals and snacks;
- arrangements for activities, cooking, sensory play and outings;
- who needs to know about the child's allergy;
- emergency contact arrangements;
- the action to be taken if exposure occurs;
- when the plan should be reviewed.

The allergy action plan will be kept with the child's medication and relevant records so that it can be accessed quickly in an emergency.

The nursery will ensure that information about children's allergies and medical needs is kept up to date and that relevant staff have access to the information they need. This reflects the current EYFS requirements. Consultation Hub

Where appropriate, the nursery will use an appropriate recognised allergy action plan, such as the BSACI Allergy Action Plan.

16. Sharing Allergy Information with Staff

The manager will ensure that all staff who may come into contact with a child with an allergy are made aware of the child's needs.

This includes, where appropriate:

- permanent staff;
- bank or agency staff;
- temporary staff;
- students;
- volunteers;
- staff responsible for preparing or serving food;
- staff accompanying children on outings.

Staff will be given sufficient information to understand:

- what the child's allergen is;
- how exposure can be prevented;
- what symptoms to look for;
- where the child's medication is stored;
- how emergency medication should be administered;
- what action to take in an emergency.

Information will be shared on a need-to-know basis while respecting the child's and family's confidentiality.

17. Food Preparation and Management of Allergies

Impact Montessori Nursery will take reasonable steps to prevent children being exposed to known food allergens.

We will:

- check ingredients and food labels;
- maintain accurate records of children's dietary requirements and allergies;
- ensure food prepared for children is suitable for their individual requirements;
- prevent cross-contamination wherever reasonably practicable;
- clean food preparation and eating areas appropriately;
- ensure staff responsible for food preparation understand relevant allergies;
- ensure food is not given to a child unless staff are satisfied that it is suitable for that child;
- ensure children's allergy information is available to relevant staff during mealtimes.

Children with allergies will be included in normal mealtimes and activities wherever it is safe to do so.

We will not unnecessarily exclude a child from activities because they have an allergy. Instead, appropriate risk assessments and control measures will be used.

18. Allergy Awareness During Activities

Allergens will be considered when planning activities, including:

- cooking and baking;
- food tasting;
- sensory activities;
- craft activities;
- gardening;
- use of natural materials;

- celebrations and parties;
- special events;
- outings and trips.

Where an activity presents a significant risk to a child with an allergy, the activity will be adapted or an alternative activity provided.

19. Storage of Emergency Medication

Where a child has prescribed emergency allergy medication, such as an adrenaline auto-injector (AAI), the nursery will ensure that:

- the medication is clearly labelled with the child's name;
- it is stored safely but is immediately accessible to authorised staff in an emergency;
- staff know where it is stored;
- the medication is in date;
- parents/carers are asked to replace medication before it expires;
- the child's Allergy Action Plan is readily available;
- relevant staff know how to administer the medication;
- medication is taken with the child on outings where required.

Emergency medication must never be kept in a location where staff cannot access it quickly.

20. Administration of Allergy Medication

Medication will only be administered in accordance with the nursery's Medication Policy and the child's individual medical instructions.

Under the current EYFS requirements:

- prescription and non-prescription medicines may only be administered where written permission for that particular medicine has been obtained from the child's parent and/or carer;
- the nursery must keep a written record each time medicine is administered;
- parents/carers must be informed on the same day that medicine has been administered, or as soon as reasonably practicable. Consultation Hub

Where emergency medication is required, staff will follow the child's Allergy Action Plan and emergency procedures. Staff will not delay emergency treatment while waiting for a parent/carer to arrive.

21. Responding to an Allergic Reaction

If a child develops symptoms of an allergic reaction, staff will:

1. Stay with the child and assess the situation.
2. Follow the child's individual Allergy Action Plan.
3. Administer prescribed medication in accordance with the child's plan.
4. If a serious allergic reaction or anaphylaxis is suspected, call **999 immediately**.
5. Clearly state that the child is experiencing a suspected **anaphylactic reaction**.
6. Administer the child's prescribed adrenaline auto-injector where indicated by the child's action plan.
7. Follow the emergency instructions provided with the child's medication.
8. Contact the child's parent/carer or emergency contact.

9. Continue to monitor and support the child until emergency medical assistance arrives.
10. Record the incident and medication administration.
11. Review the child's risk assessment and allergy arrangements following the incident.

Staff will never assume that an allergic reaction will resolve without treatment.

22. Anaphylaxis

Anaphylaxis is a potentially life-threatening allergic reaction requiring urgent treatment.

Staff will receive appropriate information and training to recognise the signs of anaphylaxis and understand the emergency procedures relevant to children attending the nursery.

Possible signs may include:

- difficulty or noisy breathing;
- wheezing or persistent coughing;
- swelling of the tongue or throat;
- difficulty swallowing;
- hoarse voice;
- dizziness or collapse;
- becoming pale, floppy or unusually sleepy;
- widespread allergic symptoms;
- sudden deterioration in a child with a known allergy.

Skin symptoms do not have to be present for anaphylaxis to occur.

Where anaphylaxis is suspected, staff will follow the child's emergency action plan and seek emergency medical assistance immediately.

23. Staff Training

The manager will ensure that staff have appropriate knowledge and training to support children with allergies.

Training and information may include:

- understanding food allergies;
- recognising allergic reactions;
- recognising anaphylaxis;
- use of adrenaline auto-injectors;
- emergency procedures;
- safe storage of medication;
- food allergen awareness;
- preventing cross-contamination;
- the nursery's nut-free policy;
- individual children's Allergy Action Plans.

New staff, students and temporary staff will be given appropriate information before working with children who have known allergies.

24. Trips, Outings and Special Events

Allergy risks will be considered as part of the planning and risk assessment for outings and trips.

Before leaving the nursery, staff will ensure that:

- relevant allergy information is available;
- required medication is taken;
- emergency contact information is available;
- staff responsible for the child understand the allergy arrangements;
- appropriate food is available where meals or snacks are required;
- the child's Allergy Action Plan is accessible where appropriate.

The same precautions will apply to parties, celebrations and special events held at the nursery.

25. Near Misses and Incidents

Any incident involving:

- accidental exposure to an allergen;
- incorrect food being provided;
- a medication error;
- a delayed response;
- a missing or unavailable emergency medication;
- a suspected allergic reaction;
- anaphylaxis; or
- another allergy-related concern

will be recorded and reported to the manager.

The manager will review the circumstances and identify whether any changes are required to:

- the child's risk assessment;
- the Allergy Action Plan;
- staff training;
- food procedures;
- communication arrangements;
- environmental controls.

Parents/carers will be informed of relevant incidents as soon as reasonably practicable.

26. Review of Allergy Arrangements

Allergy information and individual risk assessments will be reviewed:

- when a child first starts at the nursery;
- whenever parents/carers notify us of a change;
- when medication changes;
- following an allergic reaction;
- following a near miss;
- following relevant medical advice;
- following a significant change in the child's circumstances;

- at least annually.

Parents/carers will be asked to confirm that the information held by the nursery remains accurate.

27. Parent and Carer Responsibilities

Parents/carers are expected to:

- provide complete and accurate allergy information;
 - provide an up-to-date Allergy Action Plan where applicable;
 - provide prescribed emergency medication;
 - ensure medication is within its expiry date;
 - replace medication before it expires;
 - provide written permission for medication where required;
 - inform the nursery immediately of any change to their child's allergy or medication;
 - comply with the nursery's nut-free policy;
 - ensure that food brought into the nursery does not contain nuts or nut products.
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28. Equality, Inclusion and Wellbeing

Children with allergies will be supported to participate fully in nursery life wherever reasonably possible.

An allergy will not be used as a reason to unnecessarily exclude a child from:

- play;
- learning activities;
- celebrations;
- meals;
- outdoor activities;
- outings; or
- other nursery experiences.

Appropriate risk assessments and reasonable adjustments will be made to enable children with allergies to participate safely.

We recognise that children with allergies may experience anxiety or feel different from their peers. Staff will support children's emotional wellbeing and promote an inclusive environment.

29. Related Policies

This section should be read alongside:

- Medication Policy;
- First Aid Policy;
- Health and Safety Policy;
- Food and Nutrition Policy;
- Food Hygiene Policy;
- Safeguarding and Child Protection Policy;
- SEND Policy;
- Risk Assessment Policy;

- Privacy Notice;
 - Children's Records Policy;
 - Confidentiality and Client Access to Records Policy.
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Related policies

This policy should be read alongside:

- **Medication Policy;**
 - **First Aid Policy;**
 - **Health and Safety Policy;**
 - **Food and Nutrition Policy;**
 - **Food Hygiene Policy;**
 - **Safeguarding and Child Protection Policy;**
 - **SEND Policy;**
 - **Privacy Notice;**
 - **Children's Records Policy;**
 - **Risk Assessment Policy.**
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Legal and statutory framework

This policy has regard to:

- **Early Years Foundation Stage (EYFS) Statutory Framework for Group and School-Based Providers;**
 - **UK Health Security Agency (UKHSA) health protection guidance for children and young people's settings;**
 - **Health Protection (Notification) Regulations 2010;**
 - **Public Health (Control of Disease) Act 1984;**
 - **Equality Act 2010;**
 - **Data Protection Act 2018;**
 - **UK General Data Protection Regulation (UK GDPR);**
 - applicable food safety and hygiene legislation;
 - relevant safeguarding legislation and statutory guidance.
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Useful current guidance

UKHSA: Public health exclusion periods

UKHSA: Health protection in children and young people's settings

Current EYFS statutory framework

Early Years Foundation Stage nutrition guidance

Policy review and approval

This policy was adopted by: Impact Montessori Nursery

Date adopted: _____

Date of last review: _____

Date to be reviewed: _____

Signed on behalf of the provider: _____

Name of signatory: _____

Role of signatory: _____