**Procedures for children with allergies**

* When parents start their children at Top Place Preschool they are asked if their child suffers from any known allergies. This is recorded on the registration form.
* If a child 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 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. Epi pen).

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

Generally, no nuts or nut products are used within the preschool.

Parents are made aware so that no nut or nut products are accidentally brought in, for example to a party or in a lunch box.

**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 preschool 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 preschool 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 your insurance provider.

**Lifesaving medication & invasive treatments**

These include adrenaline injections (Epi pens) for anaphylactic shock reactions (caused by allergies to nuts, eggs etc) or invasive treatments such as rectal administration of Diazepam (for epilepsy).

* The preschool must have:
	+ a letter from the child's GP or 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 child's GP, a district nurse, children’s’ nurse specialist or a community paediatric nurse.
	+ 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 to 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 parents or guardians, or who have qualifications.