



## MEDICATION AND ILLNESS

### Purpose

The safety of the children in our care is paramount. We promote children's good health within the setting by promoting health and hygiene and taking the steps necessary to prevent the spread of infection by taking appropriate action when children are ill. This includes monitoring the children for signs and symptoms of communicable diseases such as chickenpox, measles, mumps, rubella, meningitis, hepatitis, diarrhoea, vomiting and fevers of 37°C or over.

### Policy

With the welfare of the sick child in mind and in the interests of the remaining children in the nursery, if in the opinion of the staff a child is ill, then the parent/carer will be contacted and requested to collect him/her as soon as possible. The staff of the nursery must be convinced that the child has returned to good health before re-admitting them. In the event of a child having a high temperature over 37 degrees parents or carers are contacted immediately. Until parents or carers arrive to collect the child, the child is made comfortable and offered drinks and clothing is removed to help cool the child down.

If the child's temperature does not reduce, then one dose of paracetamol suspension (Calpol) may be given to relieve symptoms whilst awaiting the arrival of parents or carers. In the event of an allergic reaction, antihistamine suspension (Piriton) may be given to relieve symptoms whilst awaiting the arrival of parents or carers. It can be administered with written consent, but if consent has not already been given, a parent may be phoned and may give verbal consent, which is then entered on the [non-prescribed medicine form4](#) and signed by the parent on collecting the child. At all times the child will be comforted and placed in an area of quiet away from other children and will be able to sleep if they wish. In extreme cases, there may be a need for isolation until the child is collected. If a child is unwell and requires Calpol then they are deemed unfit for nursery and parents will be contacted to arrange collection of the child.

If the child is found to have an infectious disease the Manager will fix a notice on the reception door, informing parents of the outbreak. It will state the diagnosed infection and the date, plus any relevant information that parents may need to know. [See Infectious Diseases guidance](#)

When dealing with medication of any kind in the nursery, strict guidelines should be followed.

**Temperature-** Children should not return until they are well, and 48 hours after their last temperature.

**Vomiting and Diarrhoea-** Child must be kept away from nursery for 48 hours after the last bout of vomiting or diarrhoea.

**Teething-** Staff are happy administer teething gels or powders. If your child requires pain relieving medication please refer to the guidance above.

**Chickenpox-** The child must remain away from nursery for at least 5 day and until all spots have scabbed over.

**Measles-** Five to seven days from onset of rash.

**Mumps-** Until all swelling has gone, approximately 5 days.

**Pertussis-** (whooping cough) 5 days from starting antibiotic treatment. 21 days from onset of paroxysmal cough if no antibiotic treatment given.

**Rubella-** (German measles) Four days from appearance of rash.

**Thread worm-** Until treated.

**Impetigo-** Until skin has completely healed.

**Head lice-** Please treat before attending nursery.

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**Ring worm-** Until treated.

**Hand, Foot and Mouth-** If the child is unwell and in discomfort please do not bring into nursery.

**Scarlet Fever-** At least 48 hours after starting antibiotics.

## Prescribed Medication

- A child who has been prescribed antibiotics for the first time cannot return to the Nursery until they have been taking the medication for 24 hours to ensure that there is no adverse reaction to the medication.
- Any prescribed medicines should be stored in the original container from the GP with the GPs dosage clearly labelled on the bottle, with both the prescribed date and expiry date for staff to see
- Prescribed medicine can only be given to the person named on the bottle for the dosage stated
- The parent or guardian of any child requiring prescribed medication should allow a senior member of staff to have sight of the bottle. The staff member should note the details of the administration on the medication form. Another member of staff must check these details
- Piriton can be administered for allergy relief. If this is the first instance the child has had a reaction, then the child will need to be collected and the allergy checked to confirm.
- The parent or guardian should give prior written permission for the administration of each and every medication and a written record will be kept of all medications administered. [Prescribed Medication form](#)
- The parent or guardian should sign and date daily to confirm the agreed dosage for that day
- The parent or guardian should be asked when the child had last been given the medication before coming to the nursery; this information should be recorded on the medication form. Similarly, when the child is picked up, the parent or guardian will be given precise details of the times and dosage given throughout the day. The parent's or guardian's signature must be obtained at both times.
- A senior member of staff will administer the medicine or offer it in a manner acceptable to the child at the prescribed time and in the prescribed form. (It is important to note that staff working with children are not legally obliged to administer medication)
- If the child refuses to take the appropriate medication, then a note should be made on the form
- Where medication is “essential” or may have side effects, discussion with the parent should take place to establish the appropriate response
- Wherever possible ask parents to request that GPs prescribe the least number of doses per day, i.e. 3 x daily, rather than 4 x daily.

## Non-prescribed medication

- The nursery will **not** administer non-prescribed medication with the exception of fever relief for a high temperature and the child waiting to be collected by parents, but only with prior written consent from the parent/carer and only when there is a health reason to do so. For teething, we will administer teething gel, and powders or use a teething ring.
- The nursery can keep a supply of liquid paracetamol in sachets/bottles on the premises in a locked medicine cabinet. Staff must follow the prescribed medication procedure for this.
- The only non-prescribed cream that will be applied to a child will be for the treatment or prevention of nappy rash e.g. Sudocrem or 'over the counter moisturiser for eczema. Prior written permission must



be obtained from the parent/guardian. Sunscreen and teething gel will also be applied with prior permission. [Refer to the Parent Permissions form](#)

- If any child is brought to the nursery in a condition in which he/she may require medication sometime during the day, you should decide if the child is fit to be left at the nursery. If the child is staying, the parent or guardian must be asked if any kind of medication has already been given, at what time and in what dosage
- The nursery DOES NOT administer medication unless prior written consent is given for each and every medicine and a written record will be kept of all medication administered. [Medication form](#)

### **Medication is given prior to nursery sessions**

If non-prescribed medication has been given prior to the session, the parent will need to complete a medication form detailing the medication given, times, dosage and any possible side effects. It will be made clear to the parent that if the child's health/condition deteriorates they will be contacted to collect their child from the nursery.

Parents of any child who has diabetes need an epi-pen for allergies or who suffers from epilepsy, or any other life-threatening or long-term medical conditions should discuss with the Manager/room leader **prior** to starting nursery. Specialised training needs to be delivered to the staff so that they have a better understanding and are confident and able to administer the required medication. A trained nurse who specialises in certain conditions should train the staff and present a certificate to clarify they are able to carry out the procedures. Children should **not** start Nursery until this training has been undertaken by the staff and a [Health Care Plan](#) filled in by the parent stating the needs of the child.

### **Notifiable diseases**

If the setting has reason to believe that any child is suffering from a notifiable disease identified as such in the Public Health (infectious diseases) Regulations 1988, we will inform Ofsted. We will act on any advice given by the Health Protection Agency and inform Ofsted of any action taken. [See Infectious Diseases guidance.](#)

For any public pandemic that occurs, the company will monitor regular updates from HPA and seek advice and guidance from the Local Early Years Authority Website, in the best interests of families and staff who use the setting.

### **Allergies and Allergic Reactions**

- Information passed on through parents from the registration form regarding allergic reactions and allergies must be shared with all staff in the nursery (see training, [Health Care Plan](#) in Medications section)
- The Nursery Manager must carry out a full [Allergy Risk Assessment](#) procedure with the parent prior to the child starting the nursery. The information must then be shared with all staff
- Managers **MUST** ensure that the allergy management procedure and paperwork are fully implemented, with the new allergy/dietary requirement forms displayed in the kitchen and office for all children, and room-specific forms displayed for individual children - [Refer to Food Allergy & Nutrition Management policy](#), [Food Safety Management guidance](#), [Food Allergens guidance](#)



- A sick child needs above all its parent/guardian, therefore, every effort should be made to contact him/her as soon as possible
- If the allergic reaction is severe a member of staff will summon an ambulance immediately. DO NOT attempt to transport the sick/injured child in your own vehicle
- Whilst waiting for the ambulance, contact the parent/guardian and arrange to meet them at the hospital
- A senior member of staff must accompany the child and collect together registration forms, relevant medication sheets, medication and child's comforter
- Staff must remain calm at all times; children who witness an allergic reaction/accident may well be affected by it and may need lots of cuddles and reassurance.

## Staff medication

The first aid box for staff should be kept in a readily accessible position, but out of reach of the children.

First aid boxes should only contain items permitted by the Health & Safety (First Aid) Regulations Act 1981, such as sterile dressings, bandages, and eye pads. No other medical items such, as paracetamol should be kept in the first aid box. [See First Aid Box checklist](#)

## Storage

All medication for children must have the child's name clearly written on the bottle and be kept in a medicine cabinet which is kept locked at all times, other than when medicines are being issued or received. The key to the medicine cabinet must be kept safe and out of reach of the children at all times.

Any antibiotics requiring refrigeration must be kept in an airtight container with a lid, in either the kitchen or milk kitchen fridge, in an area inaccessible to children.

All medications should be in their original containers, or they will not be given. All prescribed medicines should have the pharmacist's details and notes attached to show the dosage needed and the date the prescription was issued. This will all be checked, along with any expiry dates, before staff agree to administer the medication.

Any use of preparations such as sun cream, lotions, teething gel and nappy creams will be discussed with parents and their key carer at the first settling session. Written consent to administer them will be documented.

## Associated Documents

- [Medication record form](#)
- [Parent permission form](#)
- [First Aid Box Checklist](#)
- [Infectious diseases Guidance](#)
- [Health Care Plan](#)
- [Allergy Risk Assessment](#)
- [Food Allergy & Nutrition Management policy](#)
- [Food Allergens guidance](#)



- Food Safety Management guidance
- Blank Risk Assessment
- Health Monitoring form
- Medication Prior to Nursery form
- Monthly Illness Analysis
- Ongoing medication form
- Record of Administration form