

Chiswick and Bedford Park Preparatory School Nursery

Children's Illness and Medication Policy and Procedure

We do not undertake the care of sick children at CBPPS Nursery. We aim to provide a healthy and safe environment for all children and children showing symptoms of illness should not be brought to the nursery. Should a child become ill at nursery the procedure for a sick child at nursery will begin.

At least one member of staff with a current first aid training certificate is on the premises or on an outing at any one time. The first aid qualification includes first aid training for infants and young children. All first aid trained staff are listed on the parents' notice board.

Our first aid kit:

- complies with the Health and Safety (First Aid) Regulations 1981;
- is regularly checked by a designated member of staff and re-stocked as necessary;
- is easily accessible to adults; and
- is kept out of the reach of children.

Procedures for a sick child at the Nursery

Staff will take appropriate measures to comfort and assist the child. We do not administer medication to reduce a temperature, but seek to lower temperatures by environmental control.

If the child remains unwell or is in distress due to illness, the parent will be informed and asked to make arrangements to collect the child.

In exceptional circumstances professional medical assistance will be sought.

Administering of prescribed and non-prescribed medicine

Nursery staff may administer medicines as agreed between parents and the Head of Nursery.

Parents should complete an appropriate medical requirements form and discuss the arrangements with the Head of Nursery.

Administering of medication should be witnessed by another member of staff and we will keep a record of all medicine administered.

No medication will be administered unless it clearly states the required dosage and the child's name is on the label.

Ongoing Medication

Parents must sign a form giving us permission to administer the medication. Medication will be held centrally and administered as required.

Updated: April 2021

Review: October 2022

We have first aiders who have training on using epipens and this training will be updated and reviewed regularly.

If the administration of prescribed medication requires medical knowledge, individual training is provided for the relevant member of staff by a health professional.

Infectious Diseases:

Conditions which spread rapidly through the nursery, include: Conjunctivitis, Measles, Mumps, Rubella, Chicken Pox, worms and Whooping Cough plus virus that cause vomiting and Diarrhoea Children should not attend nursery when they have these diseases.

Once a child has been treated for a parasitic infection (i.e. lice and worms) there is no reason to exclude them from the nursery.

Other Illnesses

We ask parents to be aware of the symptoms of the following illnesses and ask that parents follow the appropriate guidance on when to return a child to nursery.

1. Coughs, Colds and Sore Throats

For mild symptoms children can continue to attend nursery. However, if the child has a raised temperature, continued cough or if they are unable to eat they should not be brought to nursery. As a rule, thick yellow or green mucous runny noses are infectious, clear ones are not.

If a child has shown mild symptoms and has for instance been given 'Calpol' and now appears to be well, we can accept the child, but will advise the parent that if there is any deterioration we will contact them and ask them to collect the child.

2. Sickness and Diarrhoea

If a child has diarrhoea (i.e. passing a watery stool more than three times in a short space of time) particularly if accompanied by vomiting and/or raised temperature. 48 hours must have elapsed before the child returns to nursery

3. Conjunctivitis

Return to the nursery is allowed when the eyes have stopped discharging, usually at least 48 hours.

4. Raised Temperature

A child with a raised temperature should be kept away from the nursery.

5. Skin Rashes

Any child with a skin rash should not attend the nursery until diagnosis and treatment has been obtained from your doctor.

6. Chicken-pox

A child with chicken-pox should not attend the nursery until all the spots have dried up and most of the scabs have dropped off. This could be seven days or more depending on the severity of the rash.

7. Measles

Absence from the nursery should be at least four days from the onset of the rash.

8. German measles

Updated: April 2021

Review: October 2022

Absence from the nursery should be at least four days from the onset of the rash.

9. Diphtheria

A child with diphtheria should be absent until cleared by a doctor. Contacts should also be cleared by a doctor.

10. Dysentery

A child with dysentery should be absent until cleared by a doctor. Contacts should also be cleared by a doctor.

11. Food Poisoning

A child with food poisoning should be absent until well and cleared by a doctor.

12. Infective Jaundice

Absence from the nursery should be seven days from the onset of jaundice.

13. Meningitis

If a child with a fever shows the following symptoms:

- Abnormally drowsy
- Complains of a headache
- Complains that light hurts their eyes.
- Has a stiff neck.
- Has a generalised rash, which will not disappear with a glass.

Parents will be contacted immediately. If they are not available the child must be taken to his or her GP or hospital. If Meningitis is diagnosed, all parents must be informed and urged to notify their own GP, which included staff. Absence from the nursery should be until clinical recovery and bacteriological examination is clear.

14. Mumps

Absence from the nursery should be until all swelling has disappeared completely.

15. Whooping Cough

Absence from the nursery should be until clinical recovery is judged by a doctor.

16. Hand, Foot and Mouth Disease

Absence should be until the rash has cleared.

17. Covid 19

A child displaying any symptoms of Covid 19 (high temperature, new continuous cough, loss of taste and smell) should be kept away from nursery until they have a negative Covid test.

Updated: April 2021

Review: October 2022