

4. Medication, Healthcare Plan and Sickness Policy

EYFS 2025 Statutory Guidance: Safeguarding and Welfare Requirements. Health: Medicines

Guidance for this policy has been taken from the EYFS Statutory Framework (DfE, 2025), Health protection in children and young people settings, including education (UKHSA, 2026), Managing outbreaks and incidents in children and young people's settings (UKHSA, 2026), Equality Act 2010, Data Protection Act 2018 and UK GDPR

Signed by (Trustee): Diane McVey

Date: 31/05/2026

Next Review Date: 31/05/2027

Review date	Description	Proposed by	Approved by
19.12.22	Updated guidance information sources. Minor changes made to reflect current practice.	Sadie Clarke (Centre Manager)	Diane McVey
05.07.23	Made a clearer instruction for 2 staff to check medication bottle for dosage amount before administering	Sadie Clarke (Centre Manager)	Diane McVey
22.02.24	Updated guidance information sources. Updated guidance around reporting measles	Sadie Clarke (Centre Manager)	Diane McVey
07.05.25	Updated information about when to report chicken pox cases	Sadie Clarke (Centre Manager)	Diane McVey
28.05.2026	Updated guidance information sources. Updated address for West Mids UKHSA Updates To guidance sources Minor changes to wording	Kirsty Perry (Family Support Manager)	Catherine Cook

Review of Policy

The Centre Manager will review the content of this policy every year or earlier in the event that there are changes in legislation or as a result of a change in good practice. Every effort will be made to give reasonable notice of any changes to this Policy but the right is reserved to make amendments without further notice should circumstances warrant it.

Medication and Gastrostomy Feeding Systems

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The Peter Pan Centre has a policy of exclusion of infectious illness, and as such does not offer care for children suffering from short term illness, however we recognise that administering medicine to children who are recovering from illness is necessary to ensure children's health and wellbeing.

The nature of our work means we provide care, education and support for children with multiple and complex medical needs who may require ongoing medication or rescue medication. Information about children's medication and medical needs will be requested prior to the child starting at the setting.

Medication must be brought to Centre, preferably in the original container and labelled. Over the counter Medication that is not prescribed by a doctor, such as Calpol or Piriton, will be administered to children with prior written consent from parents or carers. Medicine administered will be as directed by the medication box/ label and leaflet.

Medication which requires refrigeration will be stored in the children's kitchen fridge, all other medication will be stored in the locked medicine cupboard in the children's bathroom. Rescue medication such as epi pens are kept in an emergency box in the kitchen for quicker access. Both of these storage areas are inaccessible to children. As nursery sessions last a maximum of 3 hours, we preferably request that daily/preventative medication is administered before or after session times; this includes allergy medications such as Piriton. In the event of this not being possible medication will be administered as directed by the medication box/ label and leaflet.

The Centre will administer emergency medication such as seizure recovery medication and inhalers for asthma attacks with prior written parental consent. This will be obtained on induction to nursery or in the event of children developing an illness.

In the event of us being concerned that a child has a high temperature, we will attempt to check their temperature with a digital in ear thermometer. However, we acknowledge that this may not always be successful. If we are unable to take a child's temperature and are concerned about their wellbeing the parent/ carer will be informed and asked to collect their child. If a child has a high temperature, the Centre will administer medication such as Calpol to lower a child's temperature with prior written parental consent which will be obtained on induction to nursery. Further verbal consent will be obtained by telephone call to the parents in the event of this being necessary and the parents/ carers will be asked to take their child home.

For seizure recovery medication and PEG feeding, the nursery staff MUST be trained individually by the child's Parents or Carer, and Community Nurse if necessary and declare they are fully confident in the administration process. Information relating to the child's medication and PEG feeding must be recorded in the child's Health Care Plan, all care plans must be signed by the Parent or Carer and staff members and if appropriate a health professional.

The Centre does cater for children with gastrostomy PEG's and other methods of feeding such as "Mickey Buttons" and feeding pumps. Staff MUST be trained individually by the child's Parents or Carers, and Community Nurse if necessary. This information must be recorded in the child's Health Care Plan which should be signed by the Parent or Carer and Community Nurse as appropriate.

Administration of Medication

All Early Years Staff have completed a full and relevant Paediatric First Aid course, all staff are competent to administer medication and witness another member of staff administering medication. The medication dosage and amount must be checked on the bottle before administering and checked by both the witness and staff administering the medication prior to administering.

One member of staff must witness the administration of medication by the person administering, and must sign the medication records immediately after administration to ensure accuracy of records, written records of medicines administered are kept in children's individual files.

Refusal of Medication

If a child refuses medication or staff are unable to administer medication, this must be recorded on the medicine form and the parents must be contacted immediately to be informed of this and to discuss further action. Staff will never force children to take medication.

Oxygen Therapy

Several children attending the Centre may require oxygen therapy during their time with us. This information is detailed in the child's care plan and we follow safe operating procedures when using oxygen therapy, following training video guidance. An individual risk assessment is conducted and generally oxygen is carried around the room with the child for ease of access in an emergency.

Individual Health Care Plans

Due to the nature of the nursery, children attending may have complex and multiple needs requiring various medications and daily care requirements. In this case, children will be written and Individual Health Care Plan and an Emergency Action Plan.

The Individual Health Care Plan will contain:

- Name, date of birth, address of child and carers and General Practitioner details
- Child's condition or diagnosis
- Family contact information and emergency contact information
- Hospital details and contact information and any open access
- Child's medical needs and symptoms
- Child's daily care requirements including medication administered out of the setting
- What constitutes as an emergency for the child and action to take (including medication to be administered)
- Follow up care
- Who is responsible in an emergency

The Emergency Action Plan will contain:

- Child's name, and date of birth
- Child's condition or diagnosis
- What is an emergency and what action to take

The Individual Health Care Plan will be written by the Centre Manager or Deputy Centre Manager in partnership with the Parents and Carers of the child and any relevant health professionals where necessary. In some circumstances, the Individual Health Care Plan may be required to be signed off by the child's Consultant or Community Nurse.

Health Care Plans will be reviewed at least every 6 months, or sooner if the child's needs change, with Parents and Carers and any relevant health professionals.

It is the duty of the Parents and Carers to inform the nursery of any changes to the child's medical condition or medication or any other circumstance which may affect the child's health.

Infection Control

In addition to the measures detailed, we follow additional practices to prevent the spread of infection and maintain hygiene standards.

All children are encouraged to use tissues when coughing or sneezing and regular hand washing is encouraged.

All adults wash their hands or use sanitizer following coughing or sneezing or supporting a child in this way.

All tissues are disposed of immediately in a hygienic way.

Personal protective equipment is used for toileting, snack times but is not limited to these occasions.

Good hygiene is maintained throughout the Centre at all times including daily cleaning schedules.

Dummies are returned into children's individual bags when not in use to prevent cross contamination.

In the case of dealing with blood and/or sharps, precautions will be taken to prevent the transmission of blood borne viruses or diseases.

We have emergency plans in place in the event of an increase in respiratory or other reportable infectious illness such as scarlet fever.

Vomiting and Diarrhoea

Children who are suffering from infectious illness are not permitted to attend nursery, this is detailed in Health and Wellbeing Policy. If you are uncertain about this, please contact the nursery and we will advise you.

Children who experience vomiting and diarrhoea are required to not attend the nursery for 48 hours after the last episode of symptoms.

In the event of a child becoming ill with vomiting or diarrhoea symptoms at nursery, we will make your child comfortable and their key person will remain with them, we will take issues such as teething into consideration. You will be contacted to collect your child as soon as possible.

Notification of Communicable Diseases and the Health Protection Team

As required by law, the nursery will notify the Local Authority and the Health Protection Unit of the following diseases:

- Measles (Contact UKHSA for suspected and confirmed cases)
- Meningococcal Meningitis / Septicaemia
- Meningitis
- Meningitis viral
- Mumps
- Whooping Cough (Pertussis)
- Poliomyelitis
- Rubella
- Scarlet Fever
- Tuberculosis
- Typhoid Fever and Paratyphoid Fever
- Diphtheria
- Hepatitis B and C
- Chicken pox if cases of scarlet fever are also circulating

We recognise that children attending the Centre often have low immune systems. In the event of children in the nursery suffering from a contagious infection, we will inform parents of children on that session first, so that parents can be vigilant in detecting symptoms, before informing all parents of children attending the nursery. We will not disclose the identity of the child, or any sensitive information to other parents.

The Health Protection Team (HPT) provides expert advice on infection control and emergency environmental health issues.

The Health Protection Team can be contacted by:

UKHSA West Midlands Health Protection Team

23 Stephenson Street

Birmingham

B2 4BH

Telephone Number: 0344 225 3560 (option2)

We may consider seeking specialist advice from the relevant UKHSA HPT if they are concerned and have seen:

- a higher than previously experienced and/or rapidly increasing number of staff or student absences due to acute respiratory infection or diarrhoea and vomiting
- evidence of severe disease due to an infection, for example if a pupil, student, child or staff member is admitted to hospital
- more than one infection circulating in the same group of students and staff for example chicken pox and scarlet fever