

# Sick child, Medicine and Exclusion Policy



*This policy is to be read in conjunction with:*  
HS01 Accident and Injury Management Policy

## Purpose

At Hopscotch we aim to minimise the spread of infection in our settings, however, infections and illnesses are common in childhood and on occasions your child may not be well enough to attend. It is of the utmost importance that children and others who are ill or have infections are kept away from the nursery to help reduce the risk of spreading the infection or illness. We may request that your child is collected from nursery if they are unwell or infectious in line with our exclusion policy. Whilst it may be inconvenient, your child's health and welfare and the welfare of others in our care, is our first priority.

We follow the guidelines for illnesses and infection control set out by UK Health Security Agency and Office for Health Improvement and Disparities.

<https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities>

In the event of a child infection or illness, staff at Hopscotch will follow the following procedure to ensure the needs of your child are met and to prevent the illness or infection from spreading. Temperatures, sick/diarrhoea, bumped head will be recorded on a health monitoring log and a copy can be shared with the parent for their information:

- When the child is not their usual self (e.g. inactive, crying excessively, no appetite) or, feel hotter than usual to touch on their forehead, back or stomach, feel sweaty or clammy and/or have flushed cheeks, the child's temperature will be taken.
- A normal temperature in babies and children is about 36.4°C, but this can vary slightly. A high temperature or fever is usually considered to be a temperature of 38°C or above.  
(NHS <https://www.nhs.uk/conditions/fever-in-children>)
- If the temperature is normal the child will be given time to rest and will have their temperature taken at regular intervals.
- If a child has a raised temperature a member of staff will sit with the child and make them as comfortable as possible report to room leader and duty manager. Record details on a Health Monitoring Log a copy of this can be shared with the parent on collection and/or uploaded to the child's on-line learning journey. Monitor and review temperature every 10 minutes.
- If a temperature reach 38C or above the Parent/carer will be contacted.
- We will request permission from the parent/carer to administer Calpol. The duty manager must be informed prior to any medication being given
- Medicine form must be completed by the person who administers the medication and the witness
- This needs to be shared with the staff present in the room and all staff who are then enter the room to work
- The parent/carer will need to collect the child from Nursery and be informed the dose and time of the Calpol given

Hopscotch will store a bottle of Calpol onsite to only be administered when a parent has been notified of a temperature and has given permission to do so, this is to avoid the temperature becoming any higher, and to alleviate any discomfort. The parent must then sign a medicine form on arrival.

Other circumstances that may require the child to be collected are listed in our Exclusion Policy below which parents sign upon registration.

If your child is sent home from nursery it is recommended that you seek medical advice from your doctor. Parents and staff should then follow the Exclusion Policy on deciding when the child is able to return to nursery.

Children who have broken limbs and have a plaster cast on are able to attend Nursery on the agreement of the management team, if guidance has been given by a medical professional including pain relief this will be reviewed on an individual basis and risk assessment will be carried out before attending. Children with sprains/strains/burns

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are also allowed to attend nursery but this may not be advisable. We reserve the right to seek further medical advice if we feel necessary.

## Meningitis procedure

If a parent informs the nursery that their child has meningitis, the nursery manager will contact the Local Area Infection Control (IC) Nurse. The IC Nurse will give guidance and support in each individual case. If parents do not inform the nursery, we may be contacted directly by the IC Nurse and the appropriate support given. We will follow all guidance given and notify any of the appropriate authorities including Ofsted where necessary.

## If a child becomes unwell within the setting with suspected Meningitis

- Inform a member of the management team immediately
- Call 999 for an ambulance immediately if the illness is severe.
- Follow the instructions from the 999 call handler
- Whilst waiting for the ambulance, a member of staff must contact the parent(s) and arrange to meet them at the hospital
- Redeploy staff if necessary to ensure there is adequate staff deployment to care for the remaining children. This may mean temporarily grouping the children together
- Arrange for the most appropriate member of staff to accompany the child taking with them any relevant information such as registration forms, relevant medication sheets, medication and the child's comforter
- Remain calm at all times. Children who witness an incident may well be affected by it and may need lots of cuddles and reassurance. Staff may also require additional support following the incident.

## Head Lice

Staff are not permitted to physically check a child's hair for head lice, however, if it is apparent they have head lice, we will ask parents to treat them that evening before the child returns to nursery. Parents will only be called to collect their child if we feel it is a severe case and it is likely causing that child distress and presenting an increased chance of passing the head lice on to other children and staff. Staff will offer parents support and advice if head lice is a problem that parents may be finding difficult to get under control.

## Teething

Baby teeth sometimes emerge with no pain or discomfort at all. At other times you may notice, your baby's gum is sore and red, one cheek is flushed, they are rubbing their ear, they are dribbling more, they are gnawing or chewing, they are more fretful, they may have a mild temperature of less than 38C. Teeth can occur up to and around 30 months.

Amber teething beads are a choking and pull cord hazard to children from the beads become detached and ingested or the cord pulling on the neck, wrist or ankle this could cause significant harm to the child. We will not accept children into the nursery wearing amber teething necklaces, bracelets or anklets.

[Baltic amber beads - RoSPA](#)

There is no evidence to support the fact that teething causes diarrhoea, despite popular belief and therefore this will not be treated as 'normal' teething symptoms. [Baby teething symptoms - NHS \(www.nhs.uk\)](#)

Staff will call the parent/carer to request permission to administer Calpol if they feel the child is suffering from teething pain. We can give non prescribed medication for 3 days in a row, after that a parent will need to gain permission from their doctor.

## Conjunctivitis

Children will not be excluded from nursery with mild conjunctivitis we are able to apply over the counter medication for a maximum of 5 days. We reserve the right to research any over the counter medication to ensure it is a recognised treatment and refuse to administer if with legitimate concerns; parents will be invited into a meeting to discuss this decision.



### Barrier creams

Parents are asked to provide a suitable barrier cream to support skin conditions. If medicated barrier creams are required please follow the medication documentation. We reserve the right to research any over the counter medicated barrier cream to ensure it is a recognised treatment and refuse to administer if with legitimate concerns; parents will be invited into a meeting to discuss this decision.

### Medicines

It is not Hopscotch's policy to care for sick children who should be at home until they are well enough to return to the setting. We will, however, administer medication as part of maintaining their health and well-being or when they are recovering from an illness.

Administering of medicine will only be done when it would be detrimental to the child's health if not given in the setting. We advise parents/carers to keep the child at home for the first 24 hours upon starting any medication (see Exclusion Policy) to ensure no adverse reaction takes place as well as to give time for the medication to take effect.

- All medicines administered, including creams will be recorded on a medicine form
- Medicines should always be provided in the original container as dispensed by a pharmacist, including the prescriber's instructions for administration and dosage and the correct child's name on the medication.
- Medication must be written in English
- The medication should be in date and prescribed for the current condition
- Hopscotch will never accept medicines that have been taken out of the container as originally dispensed nor make changes to dosages on parental instructions
- The parent/carer must complete and sign a medicine form prior to the medication being administered
- It is the rooms responsibility to ensure that the medication is given
- Medication can only be administered by a fully qualified, first aid trained member of staff who has completed their key skills/competency checks and have a clear DBS check
- The witness to the medication must be an employee of Hopscotch (not a student or volunteer) who has completed all relevant key skills/competency checks, have a clear DBS check
- In some special cases some long term medication may require enhanced support systems put in place, this will be completed on site with a risk assessment
- The parent/carer must sign to acknowledge that the medication was administered when they collect their child at the end of their session

We will only give non-prescribed paracetamol-based medication when verbal consent is given by parents/carer in the case of a high temperature. Hopscotch will store their own paracetamol-based medication onsite (such as Calpol) and will be administered where a parent or named person is on their way to collect the child.

If non-prescribed medication such as Calpol is given (upon verbal consent) it will only be given in accordance with the dosage guidelines on the medicine label and only one non-prescribed medicine will be given at any time.

Another exception to administering non-prescribed medicine (examples include paracetamol/ibuprofen-based medicine, teething crystals and teething gel) when a child is teething, and the parent has given written consent. This arrangement will only be permitted for a maximum of 3 days and will be at the manager's discretion on individual circumstances (a manager can refuse to allow non-prescribed medication and follow the Exclusion Policy if they feel the child should not be in the setting). Follow manufacturers guidance, check expiry date. If applying teething gel please wear gloves- Note of caution no person with long nails can undertake this responsibility and child may bite unintentionally. If the risk of biting is high discuss with parent an alternative to teething gel.

Hopscotch will store anti histamines for medical emergencies, this will be for children who suffer with allergies and have a reaction whilst in the setting or if a child (with no known allergies) develops a severe reaction whilst in our care. Regular long-term anti histamines can only be given if prescribed by a doctor.



## Sick child, Medicine and Exclusion Policy

All medication will be stored in an inaccessible location in either the medicine cabinet or fridge as required. All medications stored in fridge must be stored in a lidded labeled container individual to each medication. If the fridge is accessible to children child locks must be fitted. If the administration of prescribed medication requires medical knowledge, then individual training will be provided for relevant staff members by a health professional.

### Long Term Medication

To administer ongoing medication, written confirmation of the child's condition must be given by the child's GP/consultant stating the condition and what, if any medication should be administered.

- Written permission from the parent/carer is required
- Parents/carers of children with long term medication requirements must complete an Individual Health Care Plan, this identifies the child's symptoms, reaction and measures the nursery staff can take to reduce any critical risk to the child and a risk assessment completed
- The Individual Health Care Plan and risk assessment is reviewed every six months, if any changes occur, transition between rooms
- Parents receive a copy of the Health Care Plan and risk assessment
- Any specialist training required in order to administer the medicine will be given by a healthcare professional
- In some special cases some long term medication may require enhanced support systems in place, this will be completed on site with a risk assessment
- Children who have been using non-prescribed medicine for teething purposes longer than three days will need to seek medical advice and obtain prescribed medication for ongoing use
- Children who have an ongoing injury or skin condition (e.g. – a broken arm, burn, severe eczema) can use medicines such as Calpol for pain relief

### Emergency Medical Treatment

In the event of an emergency situation, an ambulance would be called and the parent/carer informed immediately. Upon registration with Hopscotch, parents/carers sign an emergency medical attention permission which would be used to support any emergency situation. Without this permission children may not attend our settings. If unable to contact the main carer/s then use the emergency contact list. If a child needs to go in an ambulance and the parent/care is not available to go with the child the most appropriate qualified staff member will accompany the child, with the child's with photocopies of all necessary documentation. Head office should be notified straight away.

### RIDDOR

All businesses must comply with RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations) procedures this involves reporting deaths or major injuries, disease and dangerous occurrences and any other injury lasting for 3 days or more. These regulations apply to both children in our care and the staff team. These occurrences must be reported to Head Office, Ofsted and the Health and Safety Executive. Our risk assessment file contains the details of what is reportable and where to find further information (please also see the Accident and Injury Management Policy).

### Staff medication

Staff members who are on prescribed medication are required to fill out a "staff medication form" as found on HiBob. The manager should be notified straight away of any medication and possible side effects. A risk assessment may need to be put in place.



## Exclusion Policy

We would like to draw your attention to our exclusion policy, this is in line with the advice from the Health Protection Agency. The welfare of the children in our care is important to us and therefore we ask that you adhere to the following guidelines. We know how difficult it is to juggle work and family commitments, however it is unfair to unnecessarily expose other children to infection.

There may be times when we will contact you and ask that you collect your child. This will be when we feel they are too unwell to be at nursery, are concerned they may have symptoms connected to the illness/ infections as stated on the exclusion chart or they risk spreading an illness or infection within the setting. If you would like to discuss this any of the above, then please speak to your Nursery Manager.

Disease / Illness	Minimal Exclusion Period
Prescribed medication	<b>24 hours</b> from first dose of medication. <i>Prescribed creams will be dependent on severity of condition</i>
Chickenpox	<b>5 days</b> from appearance of the rash and spots are all dry
Conjunctivitis	No exclusion (if condition worsens seek medical advice)
COVID-19	If a child or young person has a positive COVID-19 test result they are advised to stay at home for 3 days after the day they took the test.
Hand, Foot and Mouth	No exclusion unless accompanied by other symptoms such as high temperature.
Impetigo	Until lesions are crusted and healed, or <b>48 hours</b> after commencing antibiotic treatment
Measles	<b>4 days</b> from appearance of the rash
Mumps	Until the swelling has subsided and in no case <b>less than 7 days</b> from onset of illness
Pediculosis ( <i>lice</i> )	Until appropriate treatment has been given
Pertussis ( <i>whooping cough</i> )	<b>48 hours</b> from commencing antibiotic treatment or <b>21 days</b> from onset of illness (if no antibiotic treatment)
Raised Temperature	<b>24 hours</b> clear of high temperature
Ringworm of body	Seldom necessary to exclude provided treatment is being given
Ringworm of scalp	Until cured
Scabies	Can return after first treatment
Slap cheek	No exclusion
Teething	No exclusion - we can give non prescribed medication for 3 days in a row but after that parent will need to gain permission from their Doctor.
Vomiting and Diarrhoea	<b>48 hours</b> from last episode of illness

The managers refer to the “UK Health Security Agency and Office for Health Improvement and Disparities” when a child has an illness/disease that is not included on the above list before deciding on whether the child should/should not attend the setting.

For a child who is able to attend nursery (in line with our exclusion policy) but is clearly distressed and in discomfort we will call a parent to collect them. This will be where we feel it is in the child’s best interest not to be in the setting.

The manager may ask that a child does not attend the setting for a longer period than set out in the exclusion policy if there has been a severe outbreak of a certain illness/disease or we feel they may cause a risk to spreading an illness/disease.

The full list of specific infectious diseases guidelines is here; <https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/chapter-9-managing-specific-infectious-diseases>



## Appendix A Medication Form

### MEDICINE CONSENT / RECORD SHEET



Name of Child:		Room:	
Nursery:		Date:	

**To be completed by the parent prior to medication being administered.**

Reason for medication:		Last administered:	
Medication to be given:		Time required:	
Dosage:		Duration of Treatment:	
Other details:			
Date of issue:		Expiry date:	
<input type="checkbox"/>	Verbal permission for Calpol / antihistamine obtained by parent / carer		
<input type="checkbox"/>	This medicine is prescribed by a doctor and the label is attached.		
<input type="checkbox"/>	24hrs after medication given.		
<input type="checkbox"/>	Duty manager informed.		

**I request and give permission to Hopscotch Nursery to give my child the medication which I have provided as indicated above.**

Parent/Guardian Name:		Relationship to child:	
Signature:		Date:	

### MEDICINE RECORD

*In line with our nursery procedures medicine should only be administered by a Level 3 member of staff who has completed their key skills, passed probationary period, DBS in place and First Aid trained. The witness should have a DBS in place, key skills completed and competency checks and passed their probationary period.*

Date	Time	Medicine	Dose	Administered by: (Name)	Initials	Witnessed by: (Name)	Initials	Parent Initials

[https://hopscotchdaynursery.sharepoint.com/sites/HeadOffice/Policies Working Docs/Medical/Medicine Form-010722-Rev1.docx](https://hopscotchdaynursery.sharepoint.com/sites/HeadOffice/Policies%20Working%20Docs/Medical/Medicine%20Form-010722-Rev1.docx)



## Appendix B Ongoing medication form

### MEDICINE CONSENT / RECORD SHEET - ONGOING



Name of Child:		Room:	
Nursery:		Date:	

*In line with our nursery procedures medicine should only be administered by a Level 3 and First Aid qualified member of staff. The Witness should also be First Aid Qualified.*

Date	Time	Medicine	Dose	Administered by: (Name)	<small>Initials</small>	Witnessed by: (Name)	<small>Initials</small>	Parent Initials

<https://hopscotchdaynursery.sharepoint.com/sites/HeadOffice/Policies/Working Docs/Medical/Ongoing Medication Form-010723-Rev2.docx>



## Appendix C Individual Health Care Plan

### Hopscotch Individual Health Care Plan



Nursery:			
Child's full name:		Child's D.O.B	
Parent/Carer Full Name:		Parent/Carer Contact No:	
Doctors Full Name:		Doctors Contact No:	
Child's attendance days/hours:			

**My medical condition / allergy is...**

Please detail below the medical condition/allergy that your child has.  
*Please be as specific as possible.*

Please indicate how the reaction occurs:  
 Airborne     Touch     Digested

Please indicate the severity of the reaction:  
 Severe     Moderate     Mild

Please describe in detail any **symptoms** staff should be aware of?

Every day I will need the following assistance...

**In an emergency, this might happen...**

If this happens staff need to...

If you need to call an ambulance, staff need to tell them...

Afterwards I need you to help me by...

**OFFICE USE ONLY**

Medical proof seen and acknowledged  YES  
Evidence received and attached to child's file

Staff Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Staff to initial and date each box when each task complete	Verbal handover to staff in room	
Blue poster made for room	Handover to Kitchen (if applicable)	
Form discussed with parent	Full handover when transitioning room 1	
Review at Parents Evenings (Date)	Full handover when transitioning room 2	

**PLEASE SIGN HERE** to confirm you are happy to share this information with the nursery staff so as to prepare a care plan for your child. Upon signing this form the parents/carer is confirming the information to be correct at the date signed and will inform the Manager of any changes.

Name / Signature: \_\_\_\_\_ Date: \_\_\_\_\_





Appendix D  
Health form registration

# Hopscotch New Starter Pack



Child's full name:		Child's D.O.B		Nursery:	
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## Medical Information Please complete the following information regarding your child's medical information.

### Doctor's Details

Name:

Surgery name & address:

Contact No:

### Health Visitor Details

Name:

Surgery name & address:

Contact No:

Please indicate other professionals in your child's care.

Please specify any physical needs requirements.  
*Please be as specific as possible.*

Please specify any serious illness or operations before or after birth.  
*Please be as specific as possible.*

Any other additional needs that are supported (i.e Speech & Language)  
*Please be as specific as possible.*

Is your child being seen at any hospital or by a community paediatrician? *If yes, please provide details.*

Please specify any contagious diseases. *Please be as specific as possible.*

Please provide details of any illnesses your child has suffered from.

Asthma.....	<input type="radio"/>	Any other medical conditions? <i>(please specify)</i>
Chicken Pox.....	<input type="radio"/>	
Diphtheria.....	<input type="radio"/>	
Epilepsy/Fits/Convulsions.....	<input type="radio"/>	
German Measles.....	<input type="radio"/>	
Hearing Impairment.....	<input type="radio"/>	
Heart conditions.....	<input type="radio"/>	
Polio.....	<input type="radio"/>	
Measles.....	<input type="radio"/>	
Scarlet Fever.....	<input type="radio"/>	
Sight Impairment.....	<input type="radio"/>	
Tuberculosis.....	<input type="radio"/>	
Whooping Cough.....	<input type="radio"/>	

Is your child up to date with recommended immunisations?  YES  NO  
*If NO, please state what immunisations are still outstanding.*

Please provide details of any birthmarks your child has.

Location of birthmark/s:	Type of birthmark/s:
	<input type="checkbox"/> Salmon patches or stork marks <i>(Flat, red or pink areas of skin)</i> <input type="checkbox"/> Strawberry marks <i>(Raised red lumps)</i> <input type="checkbox"/> Port wine stains <i>(Red, purple or dark marks)</i> <input type="checkbox"/> Blue-grey spots <i>(Blue-grey like a bruise)</i> <input type="checkbox"/> Congenital moles <i>(Brown or black moles)</i> <input type="checkbox"/> Other distinguishing marks Details:

OFFICE USE ONLY

Additional Support Required.....	<input type="checkbox"/>	Signed: <input type="text"/>
Healthcare Plan Completed.....	<input type="checkbox"/>	
Medical Advice Required.....	<input type="checkbox"/>	

**Hampshire Bruising Protocol - Parent information leaflet**  
[CS50259 WHCCG Bruising Protocol Leaflet\\_01.pdf](#)  
[hipsprocedures.org.uk](http://hipsprocedures.org.uk)

Updated 20/01/2023



## Appendix E Permission form



Hopscotch New Starter Form

Child's Name:	<input type="text"/>	Nursery:	<input type="text"/>
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### Permissions

We are committed to the safeguarding of the children in our care, please ensure you fully complete the following section regarding permissions for your child. Please ask a Manager if you have any further questions regarding any of the requests below.

#### Social Media Permission



We use social media as a means of communication with current and prospective parents. We will post carefully selected pictures of the children individually or in groups taking part in activities within the setting or on trips.

Do you give permission for your child's photo to be used on the companies social networking sites, including but not limited to the public Facebook page\*?  YES  NO

\*If YES, I agree I am responsible for informing management if I wish to 'opt out' in the future.

Any other comments or requirements?

#### Observation Permission

As part of your child's ongoing development and commitment to the EYFS we will observe your child to track their progress. Observations will be written on our online journal system and uploaded for parents to view.

Do you give your permission for your child to be observed?  YES  NO

*This will include other evidence of development such as photos and pieces of work.*

#### Local Walks Permission

From time to time we plan short walks and outings with the local community to local places such as libraries, schools and churches. The children enjoy, learn and benefit from these everyday experiences.

Do you give your permission for your child to be taken on local walks and visits\*?  YES  NO

\*N.B We will always seek further permission if an outing is planned outside the local area and/or is an all-day event.

#### Photo & Video Permission

On occasion we take photographs and record videos in the nursery as evidence of your child's day and particular activities for our notice boards and as a reminder of fun days. These photographs will be used around the nursery, in your child's learning journal and possibly in our promotional literature.

Do you give your permission for your child to be photographed /videoed?  YES  NO

Do you give permission for photos / videos of your child to be used for promotional / advertising literature/our publications?  YES  NO  
(This will be used for 3 years following your child's leave date)

Do you give your permission for your child to be included in group photographs / videos used for individual learning journeys?  YES  NO

Do you give permission for child's photograph to be used on our website?  YES  NO  
(This may be used for 3 years following your child's leave date.)

I give permission for photos with my child in them to be shared with schools when transferring information and records about another child.  YES  NO

#### Sun Cream Permission

Outdoor play is important and we want all of our children to enjoy the garden. In order to do this safely we provide sun cream and ask parents to bring in a labelled hat to keep onsite over the summer months. If your child has an allergy or skin sensitivity and cannot use the sun cream we provide then we ask you to bring in your own clearly labelled cream.

Do you give your permission for your child to use the sun cream Hopscotch provides?  YES  NO

If your child has any known allergies to a particular brand of sun cream, please specify here, and describe their reaction to this brand.

#### Dressing and Plaster Application Permission

Should the circumstance arise where it is necessary to apply a plaster or wound dressing to your child we require prior consent. By giving consent here you agree that we may if needed apply a plaster or appropriate dressing.

Do you give your permission for us to apply a plaster or wound dressing\* if your child requires one?  YES  NO

\*NB: If your child has an allergy to plasters or certain dressings? Please state below and what their reaction is.

#### Emergency Medical Treatment Permission

Should the circumstances arise where your child requires emergency medical attention, we request prior consent to take your child to a hospital, so they receive attention as quickly as possible. You would be notified immediately should this occur and would be advised of where to meet your child and our staff members.

Do you give permission for us to seek medical advice and call the emergency services if we are concerned for your child's health?  YES  NO

#### Paracetamol/Antihistamine Medicine Permission

Should the circumstance arise where it is necessary to administer paracetamol-based or antihistamine medication to your child we require prior consent. This is to ensure that we can prevent discomfort to your child until you either collect them in the instance they are ill, or we relieve their pain, manage the allergic reaction or lower their fever. You would be contacted prior to us administering such medication and your verbal permission sought on each occasion.

Do you give your permission for us to administer paracetamol or antihistamine based medication?  YES  NO

*N.B. When we are unable to contact you or feel that your child requires the medication immediately, the consent given here will apply.*

#### PLEASE SIGN HERE

Important: Upon signing, you are deemed to have read, understood and agreed the terms of this permission form.

Name:	Signature:
<input type="text"/>	<input type="text"/>
Date:	
<input type="text"/>	



## Appendix F Health monitoring log

### Health Monitoring Log



<b>Child's Name:</b>		<b>Today's Date</b>	
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Please check temperature / head bumps / poorly children regularly and record details. A copy can be given to the parent or shared with main care via online learning journey and a copy retained for our records for one month.

Time	What is the child's condition? <i>Temperature/head bump/sick/diarrhoea With details of child's appearance</i>	Actions taken? <i>parent called, medication given with details</i>	Staffs name and signature
15.25	38.5°C teary and clammy to touch, does not want to play. Sits with cuddles only	Parent called permission give to give calpol and will collect. Calpol given 5mls @15.40	Sam Smith <i>Sam Smith</i>

<b>Any comments:</b>	
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<b>Parent's Signature:</b>		<b>Today's Date</b>	
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*Please keep on site for one month and then shred.*