

Medicine and Sickness Policy

Policy statement

While it is not our policy to care for sick children, who should be at home until they are well enough to return to The Square Nursery School, we agree to administer medication as part of maintaining their health and well-being or when they are recovering from an illness.

In many cases, it is possible for children's GPs to prescribe medicine that can be taken at home in the morning and evening. As far as possible, administering medicines will only be done where it would be detrimental to the child's health if not given at the nursery. If a child has not had a medication before, it is advised that the parent keeps the child at home for 24 hours following the first dose, to ensure there are no adverse effects, as well as to give time for the medication to take effect.

Staff are responsible for the correct administration of medication to children for whom they are the key person. This includes ensuring that parent consent forms have been completed, that medicines are stored correctly and that records are kept according to procedures. The management are responsible for the overseeing of administering medication.

Procedures

- Children taking prescribed medication must be well enough to attend nursery.
- Only prescribed medication is administered. It must be in-date and prescribed for the current condition.
- Children who have been given Calpol or any other type of Paracetamol are not permitted to attend the nursery. This is to prevent a febrile convulsion.
- Children's prescribed medicines are stored correctly as per manufacturers' instructions in their original containers. They must be clearly labelled and are inaccessible to the children.
 - We follow the guidance published by UK Health Security Agency for managing specific infectious diseases and advice from our local health protection unit on exclusion times

for specific illnesses, e.g. sickness and diarrhoea, measles and chicken pox, to protect other children in the nursery

- Should a child have an infectious disease, such as sickness and diarrhoea, they must not return to nursery until they have been clear for at least 48 hours
- We inform all parents if there is a contagious infection identified in the nursery, to enable them to spot the early signs of this illness. We thoroughly clean and sterilise equipment and resources that may have come into contact with a contagious child to reduce the spread of infection
- We notify Ofsted as soon as is reasonably practical, but in any event within 14 days of the incident of any food poisoning affecting 3 or more children cared for on the premises
- We ask parents to keep children on antibiotics at home for the first 48 hours of the course (unless this is part of an ongoing care plan to treat individual medical conditions, e.g. asthma and the child is not unwell). This is because it is important that children are not subjected to the rigours of the nursery day, which requires socialising with other children and being part of a group setting, when they have first become ill and require a course of antibiotics
- We have the right to refuse admission to a child who is unwell. This decision will be taken by the manager on duty and is non-negotiable

We will follow the transporting children to hospital procedure in any cases where children may need hospital treatment.

The nursery manager or selected staff member must:

- Inform a member of the management team immediately
 - Call 999 for an ambulance immediately if the illness is severe. DO NOT attempt to transport the unwell child in your own vehicle**
 - 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 cuddles, and reassurance. Staff may also require additional support following the accident.

Parents give prior written permission for the administration of medication. The staff receiving the medication must ask the parent to sign a consent form stating the following information.

No medication may be given without these details being provided:

- Full name of child and date of birth;
- Name of medication;
- Who prescribed it;
- Dosage to be given in the setting;

- How the medication should be stored and expiry date;
- Any possible side effects that may be expected should be noted; and
- Signature, printed name of parent and date.

Any Member of Staff (as long as they are First Aid Trained) can administer a Child's Medication and they must take the Steps Above.

- The administration is recorded accurately each time it is given and is signed by staff. Parents sign the record to acknowledge the administration of a medicine. The medication record states:
 - Name of child;
 - Name and strength of medication;
 - Reason for medication;
 - The date and time of dose;
 - Dose given and method;
 - Form is signed by staff member / manager; and is verified by parent signature at the end of the day.

Emergency supply of Medication stored at the Square School

The Square School does hold an emergency supply of the following medication:

- Calpol (Sachets only)
- Piriton

This medication is to be used only in emergency situations, at which point the child will be unwell and will need to leave the nursery.

Prior consent to administer emergency medication is received from parents at the point of registration.

Storage of Medicines

- All medication is stored safely in a locked cupboard or refrigerated. Where the cupboard or refrigerator is not used solely for storing medicines, they are kept in a marked plastic box.

- The child's key person is responsible for ensuring medicine is handed back at the end of the day to the parent.
- For some conditions, medication may be kept in the setting. Key persons check that any medication held to administer on an 'as and when' required basis, or on a regular basis, is in date and returns any out-of-date medication back to the parent.
- Medicines are stored in the locked medicine cabinet in the office / play room. Medicines that require refrigeration are stored in a medicine box in the fridge.
- Individual medicines and care plans for children who need on-going medication are kept on a shelf in the office / play room on the 'First Aid Shelf'.

If the administration of prescribed medication requires medical knowledge, individual training is provided for the relevant member of staff by a health professional before the child is left in our care.

Children who have Long Term Medical Conditions and who may require Ongoing Medication

- A 'Care Plan & Risk Assessment' is carried out for each child with long term medical conditions that require ongoing medication. This is the responsibility of the manager alongside the key person. Other medical or social care personnel may need to be involved in the risk assessment.
- A doctor's letter is obtained from parents that sit alongside the Care Plan; this provides us with information regarding the child's medication and condition.
- Parents will also contribute to a risk assessment. They should be shown around the setting, understand the routines and activities and point out anything which they think may be a risk factor for their child.
- For some medical conditions key staff will need to have training in a basic understanding of the condition as well as how the medication is to be administered correctly. The training needs for staff are part of the risk assessment and will be ascertained and undertaken before the child is left in our care.
- The risk assessment includes vigorous activities and any other nursery activity that may give cause for concern regarding an individual child's health needs.

- The risk assessment includes arrangements for taking medicines on outings and the child's GP's advice is sought if necessary where there are concerns.
- A health care plan for the child is drawn up with the parent; outlining the key person's role and what information must be shared with other staff who care for the child.
- The health care plan should include the measures to be taken in an emergency.
- The health care plan is reviewed every six months or more if necessary. This includes reviewing the medication, e.g. changes to the medication or the dosage, any side effects noted etc.
- Parents are advised to notify us as and when changes occur. They are also given the expiry dates of the medication, which must be replaced before the one we hold at the setting has expired.

Managing Medicines on Trips and Outings

- If children are going on outings, staff accompanying the children must include the key person for the child with a risk assessment, or another member of staff who is fully informed about the child's needs and/or medication.
- Medication for a child is taken in a sealed plastic box clearly labelled with the child's name. Inside the box is a copy of the consent form.
- On returning to the setting the medicine form is signed by the parent and the medicine is returned if necessary.
- If a child on medication has to be taken to hospital, the child's medication is taken in a sealed plastic box clearly labelled with the child's name, and name of the medication. Inside the box is a copy of the consent form signed by the parent.
- This procedure is read alongside the outings procedure.

Staff Taking Medication/Other Substances

Staff at The Square School must not be under the influence of alcohol or any other substance which may affect their ability to care for children.

If practitioners are taking medications which may affect their ability to care for children, those practitioners should seek medical advice before attending the setting.

