



Medication and Sickness Policy



Policy Statement.

Whilst it is not our policy to care for sick children, who should be at home until they are well enough to return to nursery, we will 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 when it would be detrimental to the child's health if not given in the nursery. If a child has not had a medication before, especially a baby/child under two, it is required that the parent keeps the child home for the first 24 hours to ensure there are no adverse effects, as well as to give time for the medication to take effect.

We have a duty to ensure that all children at our nursery are helped to stay healthy. Our policy therefore is that when a child is ill, they should be taken home as soon as possible and not return until they feel well and are not contagious. When a child is absent from nursery due to illness, parents should inform nursery as soon as possible of how their child is and when they are likely to return. Also, if the child has a specific diagnosis, it is essential for staff to have that information. We also need to have sufficient information about the medical condition of any child with long-term medical needs. A health Care plan would be completed.

If a child becomes ill at nursery staff will:

- Care for the child appropriately.
- Inform parents so that the child can be collected as soon as possible.
- Follow paracetamol guidelines if parents are more than 30 mins away.

Medication

- Children taking prescribed medication must be well enough to attend the setting.
- Only medication prescribed by a doctor (or other medically qualified person) and paracetamol (only with written permission) is administered. It must be in-date and prescribed for the current condition (medicines containing aspirin will only be given if prescribed by a doctor). Children's paracetamol (non-prescribed) may be administered for children. See below for paracetamol guidelines.
- Children's prescribed medicines are stored in their original containers, clearly labelled, which are labelled with the child's name and date of birth and medical condition. These are inaccessible to the children. Paracetamol is supplied by the nursery, but only used in an emergency.
- Parents give prior written permission for the administration of medication. This is completed on the consent form when the child registers at the nursery.
- The staff receiving the medication must complete a medication form on eyLog with the parents present, and sign the "Eylog Prescribed/non prescribed Medicine form – Parent Consent and acknowledgement".
- No medication may be given without these details being provided:



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- the full name of the child and date of birth; (automatic on eyLog)
 - the name of the medication;
 - the dosage to be given in the nursery;
 - Parent's signature and date.
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- The administration of medicine is recorded accurately in our administration of medicine form on eyLog each time it is given and is signed by the senior staff administering the medication and another staff member to witness and check correct administration process. Parents are shown the acknowledgement form at the end of the day and asked to sign the form to acknowledge the administration of the medicine.
 - Senior staff are **only** allowed to administer medication.
 - If we have 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.

Teething Babies

We will accept teething gel and teething powders, for teething babies for pain, this should be bought from a chemist under a pharmacist's recommendation, and clearly labeled with your child's name before it is handed over to a member of staff. We are happy to administer these medicines under the manufacture's daily dosage guidelines.

Whilst teething can cause some known side effects such as flushed cheeks and sore gums, Baby teething symptoms - NHS (www.nhs.uk) state that fever is not a symptom of teething. Therefore, we will not administer liquid paracetamol for relieve of teething pain.

Conjunctivitis

Providing there are less than four children in the same room with viral conjunctivitis, the Nursery will admit the child. If these numbers are exceeded, then the cases of conjunctivitis are not isolated and the Nursery will have no option but to request the child remains at home in order to prevent an epidemic.

If medication is prescribed or non-prescribed, the child can attend Nursery after the first dose and nursery will administer the medication, providing the parent has signed the medication sheet with dosage and times.



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Specialist Medication

If a child needs to have specialist medication at nursery such as an injection of insulin or the use of an epi pen then the parents must first speak to the nursery manager to arrange this. In cases such as this where the administration of prescription medicines requires technical/medical knowledge then individual training should be provided for staff from a qualified health professional. Training should be specific to the individual child concerned.

Children with Asthma

The Orchard Nursery has decided to hold an emergency inhaler and spacer for the treatment of an asthma attack.

Emma Middleton will be responsible for ensuring the following:

- Instructing all staff on the symptoms of an asthma attack
- Instructing all staff on the existence of this policy
- Instructing all staff on how to access the inhaler
- Making all staff aware of who are the designated staff and how to access their help

Emma Middleton will be responsible for ensuring that there has been written consent from parents for the administration of the emergency inhaler and spacer. The emergency inhaler/spacer will only be available for children who have been prescribed reliever inhaler AND for whom parental consent has been given. This information shall be recorded on the child's registration form.

Senior staff or room supervisors will be responsible for the administration of the medication.

The senior staff administering the medicine will be responsible for ensuring parents are informed through eyLog when the inhaler/spacer has been used.

Emma Middleton will be responsible for ensuring that designated staff:

- Recognise the signs of an asthma attack and when emergency action is necessary
- Know how to administer inhalers through a spacer
- Make appropriate records of attacks

Jo Martin and Kelsie Moss will be responsible for the storage, care and disposal of asthma medication.



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Children with Anaphylaxis

Emma Middleton will be responsible for ensuring the following:

- Instructing all staff on the symptoms of an anaphylaxis attack
- Instructing all staff on the existence of this policy
- Instructing all staff on how to access the auto-injector
- Making all staff aware of which staff have agreed, and have been trained, to administer the auto-injectors (the 'designated staff') and how to access their help

Emma Middleton will be responsible for ensuring that designated staff

- Recognise the signs of an anaphylaxis attack and when emergency action is necessary
- Know how to administer the auto-injectors
- Make appropriate records of attacks

Jo martin and Kelsie Moss will be responsible for the storage, care and disposal of the adrenaline auto-injector.

Emma Middleton will be responsible for ensuring that there has been written consent from parents for the administration of the emergency auto-injector. The emergency auto-injector will only be available for students who have been diagnosed with anaphylaxis and have been prescribed an auto-injector AND for whom parental consent has been given. This information shall be recorded in the student's IHCP plan.

Emma Middleton or Jo martin will be responsible for ensuring parents are informed when the auto-injector has been used.

Dealing with hypodermic needles and syringes

If a member of staff or visitor was to find a hypodermic needle and we did not have a sharps bin, then it is advisable to:

Place the needle/syringe, using a glove into an empty tin can and call the 24 hour collection line:

0800 13 86 227

HIV/AIDS/Hepatitis procedure



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HIV virus like other viruses such as hepatitis (A,B and C) are spread through body fluids, hygiene precautions for dealing with body fluid are the same for all children and adults.

Storage of medicines

- All medication is stored safely in a cabinet, located out of the reach of children, but easily assessable for staff, or refrigerated as required.
- The room supervisors/ deputy manager is responsible for ensuring medicine is handed back at the end of the day to the parent.
- For some conditions, medication may be kept at the nursery to be administered on a regular or as-and-when-basis. Eg inhalers Room supervisors/ deputy manager to check that any medication held in the nursery, is in date and return any out-of-date medication back to the parent.

Children who have long term medical conditions and who may require ongoing medication

- A 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 and room supervisors. Other medical or social care personnel may need to be involved with the risk assessment.
- Parents will also contribute to a risk assessment. They should be shown around the setting, understand the routines and the 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 form part of the risk assessment.
- The risk assessment includes vigorous activities and any other activities that may give concern regarding an individual child's health needs.
- The risk assessment includes arrangements for taking medicines on outings and advice is sought from the child's GP if necessary where there are concerns.
- An individual health care plan (IHCH) 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 Individual health care plan should include the measure to be taken in an emergency.
- The Individual health care plan is reviewed every six months, or more frequently if necessary. This includes, reviewing the medication, e.g. changes to the medication or dosage, any side effects noted etc.
- Parents receive a copy of the health care plan and each contributor, including the parent, signs it.
- Only reasonable quantities of medication will be accepted (**no more than one week's supply**).



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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 health care plan or another member of staff who is fully informed about the child's needs and/or medication.
- Medication for a child is taken clearly labelled with the child's name and the name of the medication. Inside the box is a copy of the consent form or health care plan, including all the emergency contact details.
- If a child on medication has to be taken to hospital, the child's medication is taken clearly labelled with the child's name and the name of the medication.
- This procedure is read alongside the outings procedure.

Children's Paracetamol

Children's Paracetamol may only be given if the child's parent/carer has previously given permission on the child's consent form. Children's paracetamol may only be given to a child in order to reduce their temperature and relieve immediate distress. The following actions are to be taken:

- The decision to give Children's Paracetamol will only be taken by the nursery manager or deputy
- The child's parent/carer or emergency contact is to be contacted to be told of the child's condition and asked to collect their child from nursery. If the parent/carer is likely to take longer than 30 minutes to collect their child, and the child's condition warrants it, the parent/carer is to be asked if the nursery may give Children's Paracetamol. Permission to be sought over the phone.
- A record of paracetamol given to the child, with advice for the parents is completed and given to the parent on collection.
- Staff to complete the paracetamol acknowledgement form and ask the parent to sign.
- The dosage appropriate to the age of the child is not to be exceeded.

If a child is ill enough to warrant Children's Paracetamol, they are too ill to be at nursery.

COVID 19

Children and young people aged 18 and under can get coronavirus (COVID-19), but it's usually a mild illness and most get better in a few days.

Symptoms of COVID-19 can include:

- [A high temperature or shivering \(chills\) – a high temperature means you feel hot to touch on your chest or back \(you do not need to measure your temperature\)](#)
- [A new, continuous cough – this means coughing a lot for more than an hour, or 3 or more coughing episodes in 24 hours](#)



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- A loss or change to your sense of smell or taste
- Shortness of breath
- Feeling tired or exhausted
- An aching body
- A headache
- A sore throat
- A blocked or runny nose
- Loss of appetite
- Diarrhoea
- Feeling sick or being sick

The symptoms are very similar to symptoms of other illnesses, such as colds and flu.

What to do if your child has symptoms and Tests Positive

Your child should stay at home and avoid contact with other people if they have symptoms and test positive of COVID-19 and they either:

- Have a high temperature
- Do not feel well enough to go to attend nursery, or do their normal activities. They can go back to nursery when they feel better or do not have a high temperature.

Most children who are unwell will recover in a few days with rest and plenty of fluids.

- Children and young people who have a positive test result for COVID-19 should not attend the setting for 3 days after the day of the test. (Although it should be noted that free testing for the general public will end on 1st April 2022). Children and young people tend to be infectious to others for less time than adults. If they're well and do not have a temperature after 3 days, there's a much lower risk that they'll pass on COVID-19 to others.
- Adults who test positive for COVID-19 will no longer be infectious to others after 5 days. If staff have a positive COVID-19 test result, they will stay at home and avoid contact with other people for 5 days after the day they took the test.

Signed on behalf of the nursery.....*Emma Middleton*.....Date: August 2024



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