

Administration of medicine and communicable diseases policy

At Coin Street Nursery we promote the good health of children attending nursery and take necessary steps to prevent the spread of infection (see sickness and illness policy). If a child requires medication, we will obtain information about the child's needs for this and will ensure this information is kept up to date.

We follow strict guidelines when dealing with medication of any kind in the nursery and these are set out below.

Medication

Prescription medicines will only be administered when they have been prescribed for the child by a doctor, dentist, nurse or pharmacist, are for the person named on the label and are given at the stated dosage. Medicines containing aspirin will only be given if prescribed by a doctor. Medicines must be supplied in their original container, with clear instructions in English.

When checking a prescription label, staff must ensure that it includes the following details:

- Child's full and correct name
- Child's date of birth
- Medicine name, prescribed dosage, frequency and method of administration
- Expiry date
- Medicine name, prescribed dosage, frequency and method of administration

For newly prescribed medication, the child must have had at least two doses, or 24 hours must have passed since the first dose, before returning to nursery, due to the possibility of an allergic reaction. Parents must tell the nursery promptly about any reaction or side effect, and the child's individual medical or healthcare plan must be updated where required.

- Those with parental responsibility for any child requiring prescription medication should hand over the medication to the most appropriate member of staff who will then note the details of the administration on the administration of medicines form and another member of staff will check these details
- Those with parental responsibility must give prior written permission for the administration of each and every medication. However, we will accept written permission once for a whole course of medication or for the ongoing use of a particular medication under the following circumstances:
 1. The written permission is only acceptable for that brand name of medication and cannot be used for similar types of medication, e.g. if the course of antibiotics changes, a new form will need to be completed
 2. The dosage on the written permission is the only dosage that will be administered. We will not give a different dose unless a new form is completed
 3. Parents must notify us IMMEDIATELY if the child's circumstances change, e.g. a dose has been given at home, or a change in strength/dose needs to be given.
- The nursery will not administer a dosage that exceeds the recommended dose on the instructions unless accompanied by written instructions from a relevant health professional such as a letter from a doctor or dentist
- The parent must be asked when the child has last been given the medication before coming to nursery; and the staff member must record this information on the medication form.

Similarly, when the child is picked up, the parent or guardian must be given precise details of the times and dosage given throughout the day. The parent's signature must be obtained at both times

- At the time of administration, an authorised and competent member of staff will ask the child to take the medicine, or offer it in a manner acceptable to the child, at the prescribed time and in the prescribed form. A second member of staff will check the medicine, child, dosage, time and record wherever practicable. Where administration requires medical or technical knowledge, child-specific training must be completed before staff undertake it.
- If the child refuses to take the appropriate medication, then a note will be made on the form
- Where medication is "essential" or may have side effects, discussion with the parent will take place to establish the appropriate response.

Non-prescription medication (*these will not usually be administered*)

- The nursery will not administer any non-prescription medication containing aspirin
- The nursery will only administer non-prescription medication for a short initial period, dependent on the medication or the condition of the child. After this time medical attention should be sought
- If the nursery feels the child would benefit from medical attention rather than non-prescription medication, we reserve the right to refuse nursery care until the child is seen by a medical practitioner
- If a child needs liquid paracetamol or similar medication during their time at nursery, such medication will be treated as prescription medication with nursery providing one specific type of medication should parents wish to use this
- On registration, parents will be asked if they would like to fill out a medication form to consent to their child being given a specific type of liquid paracetamol or anti-histamine in particular circumstances such as an increase in the child's temperature or a wasp/bee sting. This form will state the dose to be given, the circumstances in which this can be given e.g. the temperature increase of their child, the specific brand name or type of non-prescription medication and a signed statement to say that this may be administered in an emergency if the nursery CANNOT contact the parent
- An emergency nursery supply of fever relief (e.g. Calpol) and anti-histamines (e.g. Piriton) will be stored on site. This will be checked at regular intervals by the designated trained first aider to make sure that it complies with any instructions for storage and is still in date
- If a child does exhibit the symptoms for which consent has been given to give non-prescription medication during the day, the nursery will make every attempt to contact the child's parents. Where parents cannot be contacted then the nursery manager will take the decision as to whether the child is safe to have this medication based on the time the child has been in the nursery, the circumstances surrounding the need for this medication and the medical history of the child on their registration form.
- Giving non-prescription medication will be a last resort and the nursery staff will use other methods first to try and alleviate the symptoms (where appropriate). The child will be closely monitored until the parents collect the child
- For any non-prescription cream for skin conditions e.g. Sudocrem, prior written permission must be obtained from the parent and the onus is on the parent to provide the cream which should be clearly labelled with the child's name
- If any child is brought to the nursery in a condition in which he/she may require medication sometime during the day, the manager will decide if the child is fit to be left at the nursery. If the child is staying, the parent must be asked if any kind of medication has already been given, at what time and in what dosage and this must be stated on the medication form

- As with any kind of medication, staff will ensure that the parent is informed of any non-prescription medicines given to the child whilst at the nursery, together with the times and dosage given
- The nursery DOES NOT administer any medication unless prior written consent is given for each and every medicine.

Injections, pessaries, suppositories

As the administration of injections, pessaries and suppositories represents intrusive nursing, we will not administer these without appropriate medical training for every member of staff caring for the child. This training is specific to each child and is not generic. The nursery will make reasonable adjustments and work with parents and relevant professionals to arrange appropriate training. For a child with long-term or complex medical needs, an Individual Healthcare Plan will be agreed with the parent and relevant health professionals, kept up to date and made available to the staff responsible for the child.

Staff medication

All nursery staff have a responsibility to work with children only where they are fit to do so. Staff must not work with children where they are infectious or too unwell to meet children's needs. This includes circumstances where any medication taken affects their ability to care for children, for example, where it makes a person drowsy.

If any staff member believes that their condition, including any condition caused by taking medication, is affecting their ability they must inform their line manager and seek medical advice. The person's line manager will decide if a staff member is fit to work, including circumstances where other staff members notice changes in behaviour suggesting a person may be under the influence of medication. This decision will include any medical advice obtained by the individual or from an occupational health assessment.

Where staff may occasionally or regularly need medication, it must be kept in the person's locker or in a separate locked container. Where immediate access is required, such as for an asthma inhaler, it may be stored in an agreed accessible location that remains secure and out of children's reach at all times. It must not be kept in the first aid box and must be labelled with the staff member's name.

Storage

All medication for children must have the child's name clearly written on the original container and be kept in a closed box out of children's reach. Emergency medication, such as inhalers and auto-injectors, will be readily accessible to staff in an emergency while remaining out of children's reach. Any medication requiring refrigeration must be kept in a fridge inaccessible to children, in a designated sealed container, clearly labelled with the child's name and stored in accordance with the manufacturer's instructions.

All medications must be in their original containers. Labels must be legible and untampered with or the medicine will not be given. Prescription medication must display the pharmacist's details, dosage instructions and date of issue. Staff will check these details and the expiry date before agreeing to administer medication. Medication held on site will be reviewed regularly with parents to confirm that it is still required, in date and supported by current consent and healthcare information. Expired or no-longer-required medication will be returned to the parent for safe disposal.

Common illnesses

Conjunctivitis

Conjunctivitis may be caused by infection or allergy. Staff will not attempt to diagnose the cause. Current public-health guidance does not normally require exclusion for conjunctivitis, although a child who is too unwell to participate comfortably may need to be collected.

If a child has red or pink eyes, discomfort or discharge, staff will maintain good hand hygiene, avoid sharing towels or face cloths, and inform the parent. Parents will be advised to seek medical or pharmacy advice if symptoms are severe, persistent or accompanied by other signs of illness.

Any eye discharge will be cleaned using a separate clean pad for each eye, wiping from the inner to the outer corner, followed by handwashing and safe disposal of used materials.

Treatment will be administered only in line with this medication policy. A child may attend while receiving treatment if they are well enough and no other exclusion requirement applies.

Common Cold

Common cold can be made of several different factors, which include;

- Runny noses, we will actively wipe or support children in wiping their noses and ensure that the used tissues are being disposed of correctly and children are encouraged to wash their hands before moving onto next activity.
- Sneezing, children will be supported and given tissues to ensure when sneezing that their noses/mouths are covered to ensure that the germs are not being spread.
- Coughing, as with sneezing children will be encouraged to cover their mouths and told to wash germs off their hands before moving onto the next activity.

There are times of the year when common colds are particularly prevalent, extra precautions are taken at these times of the year for example EXTRA cleaning and sanitisation of toys and equipment are undertaken and children's tissues are replenished frequently.

Children are not excluded due to a common cold*

Temperatures

Temperatures can be caused for a variety of reasons.

- Teething; if a child is exhibiting a temp due to teething (showing no other sign of illness and is generally happy within themselves then we will use prescribed paracetamol-based solution (however we will always contact parent prior to administration). We will only ever administer 1 dose of paracetamol in one day; if the child's temperature rises again then we will contact the parent to collect if necessary.
- An infection, the most likely cause of a temperature is an infection in this case the child will be monitored, and the parent will be contacted for collection of the child. The child will be allowed to return to the centre providing that there are no other reasons for the child to be excluded from the centre.

Fever

A high temperature in a child is 38°C or above. Staff will consider the child's age, presentation and other symptoms, not the temperature alone. Babies under three months with a temperature of 38°C or above require urgent medical advice.

A child with a high temperature will be kept comfortable, offered fluids, monitored closely and their parent contacted. Staff will not undress or sponge the child to cool them. Paracetamol or ibuprofen will only be given under the medication arrangements in this policy and when the child is distressed or uncomfortable, not solely to reduce the temperature. Emergency services or NHS 111 will be contacted where urgent symptoms or age-related thresholds indicate this is necessary.

Vomiting and Diarrhoea

A child suffering from repeated Vomiting and Diarrhoea needs to be excluded from the centre as

soon as possible to ensure there is no cross contamination.

Vomiting, there are a variety of reasons as to why a child vomits, these need to be considered before a child is excluded from the centre. If a child vomits for no apparent reason, then they need to be monitored closely to ensure that the child is not suffering from any other illness.

If the child has a case of vomiting or diarrhoea this will be noted and monitored, if the child has a second case of vomiting or diarrhoea then the parent will be contacted to collect their child immediately.

Please note that if there is a stomach bug going around the centre then if the child has one case of vomiting or diarrhoea then immediate collection is needed.

If the child has been excluded due to vomiting or diarrhoea, then they are not allowed to return to the centre until they have been clear for 48 hours. If the child is recently returned to nursery after having vomiting or diarrhoea, then the policy is adapted so that any further case of vomiting or diarrhoea on the day of return parents will be contacted to collect immediately.

We expect parents to inform us immediately of any communicable illness that their child may have.

For COVID-19 and other infectious diseases, Coin Street Nursery will follow the current UK Health Security Agency public-health exclusion guidance. Children who are unwell or have more than mild symptoms, including a high temperature, should remain away from the setting until they are well enough to return. The nursery will seek advice from the local Health Protection Team where there is an unusually high level of absence, a suspected outbreak, a hospital admission linked to infection, or another circumstance identified in current guidance.

This policy was adopted on	Signed on behalf of the nursery	Date for review
<i>August 2021</i>	<i>Jane Christofi</i>	<i>September 2027</i>