

Medication and Control of Illness Policy



Policy Statement

At Freshlings we are committed to ensuring that all children, staff, parents/carers and visitors are safeguarded during their time with us. It is our responsibility to ensure the good health of all within the nursery, ensuring that the spread of infection is kept to a minimum. We provide care for children promoting their health by preventing the spread of infection as much as possible. Due to this we have a strict medication/control of illness policy, ensuring that no person or child who is unwell or infectious gains access to the nursery in order to safeguard all.

Procedures

Whilst it is not in our policy to care for sick children, as they should be at home until they are well enough to return to the setting, we will agree to administer medication as part of maintaining their health and well-being or when recovering from an illness. We ensure that where medication is necessary to maintain the health of the child, they are given correctly and in accordance with legal requirements.

Upon registration to Freshlings, the parents are expected to complete a form agreeing to us seeking further medical advice/treatment where necessary, this is to ensure the safety and wellbeing of the children. Should a child need to be taken to hospital the health record form must be taken. All of the information provided to us by parents with regards to medicine will be kept confidential and any medication forms will be stored in the child's file, which can be accessed by the child's parents following a written request.

If a child has not had the medication before, it is advised that the child stays at home for the first 48 hours to ensure there are no adverse effects, as well as to give time for the medication to take effect. Where children have been prescribed antibiotics for an infectious illness we ask parents to keep them at home for 48 hours before returning to the setting. The only exception to this is if this medication is part of an ongoing care plan and the child is not

unwell. We have the right to refuse admission to a child who is unwell; this decision will be taken by a member of the senior team and is non-negotiable. Medications must have the child's name and prescription label on them and be in the original packaging with clear, written instructions and consent forms completed.

Medication is only to be administered if it is prescribed, with the exception of Calpol and teething gels/crystals and the appropriate forms have been filled out by the parent/carer. We store emergency Calpol in the medicine box for use if a child's temperature reached 39.5oC or above and we have had verbal consent from the parent to administer the medicine. Should a child be at the risk of febrile convulsions, we may give Calpol without consent if we are unable to reach the child's parents to prevent this from happening. Consent for emergency first aid is sought at the time of registration.

Our staff are responsible for the correct administration of medication to children, this includes; ensuring consent forms have been completed; medicines are stored following the instructions and that records are kept according to procedures.

Procedures

For medication we must follow a procedure to ensure that all children are treated equally and fairly, but according to their specific health needs. Children taking medication must be well enough to attend the setting.

Short Term Medication

If a child is unwell or requires medication over a short period of time then a 'Short Term Medication Form' must be filled in by the parents. This enables the child to be administered the medication for a maximum of three days, unless the prescription states otherwise. If the medication in question is Calpol then we will recommend that the parent/carer take their child to see their GP if they still need the medication after two full days, as this could indicate that the child has a further underlying health problem. We will only be able to administer one form of pain killer, if your child requires more than one medicine (i.e. Paracetamol and Ibuprofen) we ask that they remain at home as they may not be able to make it through the nursery day, unless they have been prescribed by a doctor for the specific illness. The only exception to this is teething gels and powders.

The short-term medication form includes:

- The child's name and date of birth
- The reason they are taking the medication
- The name of the medication and its expiry date
- The dosage to be given to the child and the frequency that the medication is to be administered – staff to check that it is in date and the correct dosage is stated.
- The parent's signature and date is then required to confirm that the information regarding the medication is true. It is then co-signed by the member of staff completing the form with the parent.
- The form also includes the date and time of the last dosage of medication given to the child and the parents are expected to sign this as well.
- The time and dosage given to the child from the staff in the setting
- It is then signed by the staff member that has administered the medication, including a witness signature of a member of staff that has seen the medication being given to the child
- And finally the parents are expected to sign the form again upon collection of their child to indicate they have been given all the information of the administration of medication to their child during the day.
- No medication is to be given without a medication form.

All medication is stored in the original containers, clearly labelled and out of reach of children. It must have the prescriber's instructions on it (if applicable). Only those trained in Paediatric First Aid to administer medication to children.

If administration of prescribed medication requires medical knowledge, we will obtain individual training by a health professional. If a child requires an Epi-pen then management will ensure the relevant training is provided to staff in order to administer the Epi-pen should the child need it.

For staff administering medication it is important that we maintain and promote good health and hygiene practices, especially when handling food or changing nappies. Washing hands in the appropriate manner is essential and all members of staff are expected to wash their hands regularly during the day in order to prevent the spread of any possible infection or cross contamination.

Long Term Medication

If a child has a diagnosed medical condition, then their medication will be recorded on a 'Long Term Medication Form'. This form includes the same details as the short-term medication form but enables the staff to administer the medication over a longer period of time, instead of a maximum of three days. An individual care plan will be drawn up with the parents in order to ensure that the child's needs are being met, this will be kept in the setting and staff members are to ensure that this is up to date at all times. This is to be reviewed every six months or earlier should the condition or dosage change.

The Long-Term Medication Form is also permitted to be used for teething gel, as we are aware teething can cause the child pain over a long period of time.

Storage of Medication

All medication is stored in the original containers, clearly labelled and out of reach of children, in a locked cupboard or refrigerated as required. It will always be placed in the designated medicine box. Where the cupboard is not used solely for storing medicines, they are kept in a marked plastic box. It must have the prescriber's instructions on it (if applicable).

For some conditions, medication may be kept in the setting to be administered on regular as and when basis. All medication must be handed to staff on a child's arrival. Medication must not be left in a child's bag even if it is not being used during nursery hours in order to protect the children in our care. Staff members check that any medication held in the setting is in date and return any out of date or no longer required medication to the parent.

Managing Medication on trips or outings

If children are going on outings, a named person (key person) will accompany the children with a risk assessment.

Should medication be required, this is taken in a sealed plastic box clearly labelled with the consent form and signature record.

Illness

In the case of a child or member of staff developing diarrhoea and vomiting, we ask that the child or member of staff does not come into the setting until 48 hours after their last bout of diarrhoea or vomiting. This is to prevent the

spread of infection, as much as possible. When a child is unwell we will take their temperature using an in-ear thermometer for accuracy.

If a child develops a temperature during the day Freshlings will keep a record of this, checking every half an hour to see if there is any change. The parent will be given a courtesy call to inform them of the child's temperature and the nursery staff will ensure the child is given plenty of water in an attempt to cool the child down. If the child's temperature continues to rise, then parents will be asked to collect their child or come to administer medication.

We may administer children's paracetamol (un-prescribed) for children under the age of two years with verbal consent of the parents in the case of a high temperature. This is to prevent febrile convulsion and where a parent or named person is on their way to collect the child. Parents sign the medication record when they collect their child.

Parents may be asked to take their child to the doctor before returning them to the setting. We reserve the right to refuse admittance to children who have a temperature, sickness and diarrhoea or a contagious infection or disease.

If a child develops a rash during the day the nursery will give the parents a courtesy call, to inform the parents and they will keep a close eye on the rash to look for any changes or progression. If the rash looks infectious (staff to refer to the Spotty Book) then the parents will be informed and asked to take their child to the GP to be checked, to insure any possible spread of infection is avoided.

If a child becomes sick during their time at nursery then we follow the Early Years Foundation Stage Guidance. Referring to the 'Spotty Book' or the Public Health England (formerly the Health Protection Agency) if the disease is suspected to be infectious to see if we can identify the ailment before informing the parents that the child is unwell. This book clearly states out the guidelines for the recommended amount of time of exclusion, to ensure that the spread of infection is kept to a minimum. If a member of staff becomes ill during the day then the staff illness procedure must be followed located in the 'Staff Code of Conduct' within the staff handbook.

We have clear procedures for dealing with an outbreak of infections, they are:

- A sign will be placed up on the doors of the relevant rooms to indicate that there is an infection/disease going around
- The staff will be expected to clean and sterilise all equipment to prevent the infection spreading any further.

- The use of sand, play dough or any other form of malleable activity will be suspended until the nursery is confident that the infection has subsided.
- Any children that are suspected of developing the infection during the day at nursery are expected to be collected or to go home in order to see a GP to confirm whether they do or do not have the illness.
- For outbreaks which reach 5 plus children or adults, then Public Health will be informed and any recommendations followed. Or if a child or adult is diagnosed as suffering from a notifiable disease this will also be reported.

We have a Medication and Illness guidance booklet which is available for parents. Please also refer to this. We expect all staff, parents and carers to follow these guidelines to ensure the health and wellbeing of all individuals in the setting.

Preventing the spread of infection

Hygiene precautions for dealing with bodily fluids are the same for all children and adults:

- Wear Single-use vinyl gloves and disposable aprons when dealing with blood or vomit.
- Use protective clothing for cleaning clothing after changing.
- Rinse soiled clothing and bag it for parents.
- Clear spills of blood, urine, faeces or vomit using sanitiser, any cloths and mops used are to be cleaned on a hot wash or disposed of.
- Clean any tables and other furniture, furnishings or toys affected using sanitiser.
- Any bedding, sheets, clothing affected to be washed at 60c with no other washing. The machine is then to be put on a hot clean wash before being used again.
- Periodically each room will be deep cleaned to ensure the spread of infection is limited.

Head lice

Head lice are not an excludable condition, except in exceptional cases. We will inform parents and ask them to treat their child and family. Once they have been treated, children can attend the setting.

Allergies and Intolerances

- Children's allergies or intolerances are recorded on the registration form during settling in visits.

- Risk assessments are written to manage allergies or intolerances, however if the allergy is severe, an individual risk assessment will be written for the child. This will include what to do in case of an allergic reaction, the symptoms to look for and control measures in place. This will be kept in the child's file and a copy displayed inside the cupboard door of the appropriate room.
- Nuts are not used in the setting and the Drakes kitchen where food is prepared is a nut free environment as much as possible.
- Allergen information is available in reception.

Legal Framework

Health Protection Regulations 2020