# Egerton Nursery & out of School Club

**Medication Policy** 



Egerton Nursery and Out of School Club

EYFS: 3.19, 3.44, 3.45, 3.46

# **Document History**

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## **Version History**

Version	Date	Changes
1	28/09/2020	New Policy
2	17/01/2022	None
3	17/01/2023	No amendments

# List of Abbreviations Used

SENCO	Special Educational Needs Co-Ordinator
GP	General Practitioner

# Medication

At **Egerton Nursery and out of School club** 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 medicine, we will obtain information about the child's needs for this and will ensure this information is kept up to date.

This includes trips, visits, events and can play a full and active role in Nursery life, remain healthy and achieve their academic potential.

This is in line with our Special Educational Needs and our Equality, Diversity and Inclusion Policies.

## Introduction

Children with medical needs have the same rights of admission to a setting as other children. Most children will at some time have short-term medical needs, perhaps entailing finishing a course of medicine such as antibiotics.

Some children however have longer-term medical needs and may require medicines and / or observations on a long-term basis to keep them well, examples include: children with well-controlled asthma, epilepsy serious allergies or diabetes.

Any medicines stored and administered within the setting are in their original containers and are handled in a safe and monitored environment.

This policy on health care, including first aid and managing medicines, takes account of best practice and guidance both statutory and non-statutory outlined in:

- Supporting Students at School with Medical Conditions DfE updated Dec 2015
- Children's & Families Act 2014
- Education Act 2002 sections 21 and 175
- Children's Act 2004, section 10
- Equality Act 2010
- Health & Safety at Work Act 1974
- Misuse of Drugs Act 1971
- Medicines Act 1968
- School Premises (England) Regulations 2012 (Regulation 5)
- The Special Educational Needs Code of Practice
- Early Years Foundation Stage statutory framework

In line with government guidelines, we would ask that children are not sent to the setting when they are clearly unwell or infectious.

## Healthcare Provision in setting

Parents/carers, including any person who has parental responsibility for or care of a child as defined in Section 576 of the Education Act 1996, should provide full information about their child's medical needs on admission to the setting or when their child first develops a medical need.

Updated information should subsequently be provided to the Manager/SENCO on an ongoing basis.

A Healthcare Plan must be completed by Parents / Carers, Health Professionals and SENCO and should include the following information:

- Details of a child's condition
- Special requirements (e.g. dietary needs, pre-activity precautions)
- A list of medications
- Any side effects of the medications
- What constitutes an emergency
- What action to take in an emergency
- What not to do in the event of an emergency
- Who to contact in an emergency
- The role the staff can play

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

#### Medication prescribed by a doctor, dentist, nurse or pharmacist

(Medicines containing aspirin will only be given if prescribed by a doctor)

- Prescription medicine will only be given when prescribed by the above and for the person named on the bottle for the dosage stated
- Medicines must be in their original containers with their instructions printed in Englishprescribed label
- 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 appropriate form and another member of staff will check these details.

In addition, this will be signed for by the parent/carer

• 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/carer 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 administering the medicine, a senior 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. (It is important to note that staff working with children are not legally obliged to administer medication)
- 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, dependant 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 nonprescription 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 the \*onus being on the parent to provide the medicine
- 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 nonprescription 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 this child.

This training is specific for every child and not generic. The nursery will do all it can to make any reasonable adjustments including working with parents and other professionals to arrange for appropriate health officials to train staff in administering the medication.

#### *Best Practice procedures will always be followed when administering medicines at Egerton Nursery & out of School club;*

- Any staff required to administer medicines will receive training do so. All staff will receive regular refresher training on the common conditions of Asthma, Epilepsy, Diabetes and Anaphylaxis
- Medication will only be given to the named child. Children must <u>never</u> under any circumstances be given medication that has been prescribed for another child. Parents / Carers are responsible for ensuring that there is sufficient medication to be used in setting and that the medication has not passed its expiry date.

They are also responsible for providing an appropriate medicine spoon, medicine pot or oral medicines syringe

- The Medicine Record Sheet will be consulted before any dose is given. Where
  there is any doubt about the correct dosage to be administered, advice must
  be obtained from the child's Parent / Carer, GP, pharmacist or Pediatrician
  before the medicine is administered
- When administering medication, staff must complete and sign a record of administration for every occasion and for each individual medicine given
- If the child refuses the medication, the dose is spoilt or if the dose is not given for any reason, then this, together with the reason, must be recorded on the Medicine Record Sheet
- Only one member of staff at any one time should administer medicines (to avoid the risk of double dosing). Arrangements should be made wherever possible to relieve this member of staff from other duties while preparing or administering doses (to avoid the risk of interruption before the procedure is completed)
- If more than one person does administer medicines, a system must be arranged to avoid the risk of double dosing e.g. robust recording, a staff Rota

- Any member of staff giving medication should check:
  - Child / child's name
  - Written instructions provided by parent
  - Prescribed dose
  - Expiry date
- In a busy environment for example offsite activities, or when the member of staff is not the usual person to administer the medication for that particular child, a 'second check system' must be employed.

This is where a second member of staff looks at all the above information and checks the dosage about to be administered and countersigns the record.

If a child refuses to take medicine or carry out a necessary procedure, staff should not force them to do so, but follow the procedure agreed in the individual healthcare plan. Parents should be informed.

### **Medical Procedures**

Some children require types of treatment which could be seen to be medical procedures (for example, the administration of insulin, EpiPens, rectal diazepam, buccal midazolam).

These procedures must be carried out with the approval of the Parent/Carer, Manager and only in accordance with instructions issued by the Pediatrician or GP. The SENCO is responsible for arranging staff training from appropriately qualified professionals.

Training in each of these invasive procedures must be conducted by qualified medical personnel. It is essential that where children have conditions which may require rapid intervention, all relevant staff are able to recognise the onset of the condition and take appropriate action.

Only Staff with up to date, specific training can carry out these invasive procedures.

Appropriate personal protective clothing (e.g. gloves), should be worn as necessary during the administration of medicines.

Any of the above procedures would only be carried out with a Health care plan in place, which includes relevant training of appropriate staff.

## Roles and Responsibilities for Medicines

The policy and associated procedures set out in this document applies to all employees at the school.

The policy sets out to ensure that:

- All staff are aware of this policy
- All staff are clear about what to do in a medical emergency
- Everyone, including parents/carers, is clear about their respective roles

and responsibilities

- School staff who provide support to pupils with medical conditions are able to access information and other teaching support materials as needed
- First aid trained staff and equipment are available
- Medicines are handled responsibly in the school setting

#### The Manager

In accordance with legislation and good practice they will ensure that:

- As many staff as required are trained to recognise the symptoms of an asthma attack, severe allergic reactions and/or any other emergency situation reflecting the range of medical conditions in school at that time
- As many staff as required are appropriately trained and available to respond to accidents, illnesses and emergencies that occur during the course of the nursery day
- As many staff as required are able to provide support to children with medical conditions, including administering and managing medicines in line with agreed procedures
- Medical equipment, supplies, boxes/bags situated in the main room on site are maintained appropriately

Manager and SENCO will ensure best practice is maintained in respect of:

- Maintaining an up-to-date list of staff trained and holding appropriate certification
- Provision of timely and appropriate training and guidance to those requiring it
- Provision of necessary equipment and facilities
- Communication of First Aid arrangements to all staff
- Management of the process and record keeping in relation to medicines
- Management of the process, record keeping and action in relation to Healthcare Plans
- Records made and retained of all significant accidents and incidents, both on and off the premises, and the action taken
- Review and respond as required to data relating to accidents, incidents, medicines and healthcare plans
- Ensuring that there are suitable cover arrangements in case of staff absence or staff turnover to make sure that someone is always available

#### The SENCO

Will ensure all new parents with children who have a medical condition are contacted to ensure a smooth transition to the setting occurs

Meet parents to discuss /update care plans annually (or sooner if needed)

A list of all children within a class with any known medical condition including allergies and emergency medicines/procedures will be made available for staff

First aid training will be part of new trainees' induction programme

**Note:** Although administering medicines is not part of staff' professional duties, they should take into account the needs of children with medical conditions that they care for.

All staff should ensure they receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions.

Any member of staff should know what to do and respond accordingly when they become aware that a child with a medical condition needs help.

#### Parents

Parents have the prime responsibility for their child's health. They will:

- Ensure that they or another nominated adult are contactable at all times
- Provide the setting with sufficient and up-to-date information about their child's medical needs
- Ensure that they carry out any action they have agreed to as part of its implementation, e.g. provide medicines and equipment.

#### 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 nursery manager/person's line manager/registered provider 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, any such medication must be kept in the person's locker/separate locked container in the staff room or nursery room where staff may need easy access to the medication such as an asthma inhaler.

In all cases it must be stored out of reach of the children. It must not be kept in the first aid box and should be labelled with the name of the member of staff.

#### Storage

All medication for children must have the child's name clearly written on the original container and kept in a closed box, which is out of reach of all children. We have a lockable cupboard in the staff toilet.

Emergency medication, such as inhalers and EpiPens, will be within easy reach of staff in case of an immediate need, but will remain out of children's reach. Any antibiotics requiring refrigeration must be kept in a fridge inaccessible to children.

All medications must be in their original containers, labels must be legible and not tampered with or they will not be given.

All prescription medications should have the pharmacist's details and notes attached to show the dosage needed and the date the prescription was issued. This will all be checked, along with expiry dates, before staff agree to administer medication.

This policy was adopted on	Signed on behalf of the nursery	Date for review
04.08.2020		January 2023

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