

Medication & Sickness Policy

MEDICATION

PRESCRIBED MEDICATION

Little Lancing will only administer prescribed medication when it is essential to do so, that is where it would be detrimental to a child's health if the medicine were not administered. Little Lancing will not accept prescribed medicines unless they are in their original box as originally dispensed along with the prescriber's instructions. All medicines must be clearly labelled with the child's name, name of medicine, dose, method of administration, time/frequency of administration, any side effects and expiry date. This information is recorded on the medication forms prior to administration. Medication must be returned to the parent at the end of the child's session, with the exception of inhalers, epi-pens and any medicines used for a life-threatening condition (critical medicines). Any medication which is used for a life-threatening condition must be on site at all times when the child is within our care. We advise that parents consider ordering two prescriptions, one for home and one for use at Little Lancing Day Nursery. These medicines will be put on a 'Health Care Plan' which will be kept alongside the medicine with key information recorded for staff use in the event of an emergency. Medication used to treat life-threatening conditions should be kept in the medicine cabinet within the child's play room and should be transported in the evacuation bag when going anywhere outside of the play room. Little Lancing Day Nursery will not make changes to dosages on parental instructions. It is preferred that parents who are health/medical professionals do not prescribe for their own child.

Children who are prescribed medication by a doctor are to have had a full 24-hour dose before attending nursery due to the risk of allergic reactions. When a medication is given that a child has previously been prescribed, they are able to come in to nursery at any time.

Where appropriate, it is recommended that the prescriber considers the use of medicines which are only administered once or twice a day so that they can be taken outside of booked hours.

Medication that has been recommended by a pharmacist or nurse, without a written prescription, can be administered in addition to medication prescribed by a doctor, dentist or appropriately qualified pharmacist or nurse, providing there is an accepted health reason. This should be recorded on a medication form.

Little Lancing staff can apply lotions and administer prescribed medication such as antibiotics in order to finish the course. Parent approval on the medication form gives prior written permission for staff to administer medication and must be completed by the parent on each occasion that they wish the medicine to be administered. This form also includes the time the last dose of medicine was administered and the times and dates for the next doses.

If a child is taking prescribed medication at home with potential side effects such as loose stool, nausea, skin rash, etc, parents must provide the nursery with written confirmation from a medical professional or share the medicine information sheet alongside details of the named prescription for the child. This will then enable nursery staff to understand any potential side effects relating to the medication prescribed. This in turn will enable us to take this information into account when assessing the situation should a child become unwell whilst in our care.

REDUCING HIGH TEMPERATURES AND ADMINISTERING MEDICATION

The nursery will administer paracetamol - Calpol™, in accordance with the label instructions for dosage and age, in order to reduce a child's temperature if this reaches over 38°C (classed as a fever). Little Lancing Day Nursery will keep Calpol on site for the event of any child getting a high temperature. If Calpol is required for any other reason (e.g., teething) we ask that parents provide this for their child and complete a medication form to give permission for administration.

Temperatures are taken using an ear thermometer and a protective cap is used and changed between each child. If the temperature reading is above 38 degrees (unless otherwise stated on the child's health care plan), staff will make contact with the child's parent/ carer and inform them that their child

must be collected. Staff will monitor the temperature on approximately a half hourly basis until the child is collected from nursery. We will administer first aid as appropriate - over or underdressing or tepid sponging will not be used as first aid measures to treat a fever.

Parents will always be contacted via telephone to confirm the issuing of medication prior to staff administering the dose if a medication form has not been signed with parental consent. The time and dates of parental contact will be recorded. If parental contact cannot be made, and the medication is detrimental to the child's health, authorisation of medication will be made by a paediatric first aid trained member of staff. The parent will be informed as soon as possible and requested to collect the child or to meet staff at hospital if needed.

If the administration of medicines requires technical/medical knowledge, then individual training is provided for staff from a parent and/or health professional. Training is specific to the individual child concerned.

Written records must be held by the nursery, completed by the member of staff administering or applying the medication, and then signed by the parents to acknowledge medication administered.

Any medication containing aspirin will not be given unless prescribed by a doctor.

TEETHING MEDICATION

Parents who do not wish to use Calpol to ease teething discomfort may bring over the counter medicines to Little Lancing Day Nursery, specifically for this purpose (for example, teething crystals or gels). The instructions for use should be clearly indicated on the packaging. Over the counter medicines brought into the nursery must be in date (tube), and sealed (sachets), if staff are requested to administer. Staff record each dose on the Medication Form, parents will sign to give permission each morning that they feel this may be needed.

NAPPY RASH/SORE SKIN CREAM

Nappy rash cream supplied by parents can be applied by nursery staff. The nappy rash cream supplied must be a recognised nappy rash cream and must be clearly labelled with the child's name and never used on other children. Prescription nappy cream can also be applied by staff providing that the product is brought into the nursery in the original packaging, which is clearly labelled with the child's name, name of medicine, dose, method of administration, time/frequency of administration, any side effects and expiry date. Staff will record each application of prescribed cream on a Medication Form, if using an over-the-counter nappy cream this will be recorded on the nappy record chart in each room.

ALLERGIES

Allergy medication containing antihistamines, e.g. Piriton, can be administered in the Nursery for the relief of hay fever, allergic and itchy rashes, food allergies and insect bites. Administration must be authorised by the parent/carer, and the medicine must be provided by the parent/carer. The medicine should remain in the Nursery throughout the child's day. Dosage must be in accordance with the instructions and will be recorded on the short-term medication form.

Little Lancing keep Piriton on site for the use in the event of an emergency. Parent/carers would be contacted in this instance to provide permission for staff to administer it to their child if they have not previously given permission on their child's EyLog profile.

If medication is needed long term, it will be put on a 'Health Care Plan'. All medications recorded on a 'Health Care Plan' must always be on site when the child is in attendance. Dosage must be in accordance with the instructions and will be recorded on a medication form when administered.

Any child within our care that has a known allergy should be recorded on our allergy report displayed in all rooms.

ASTHMA INHALERS

Parent/carers are required to complete a health care plan with instructions on how much to give and what to do prior to the child being given the medication. The instructions can include demonstrations by parents, as no specialist knowledge is needed to administer. Inhalers must be brought in to the setting in their original box, prescribed specifically to the child and with their expiry date. Many children can manage their own asthma inhalers from a very young age (under supervision). All inhalers are to be put on a 'Health Care Plan'.

HEALTH CARE PLANS

Where a child is prescribed medication for a medical need such as eczema, asthma, severe intolerances or allergies the Nursery Manager will develop a medication form and 'Health Care Plan' with the parent. The Nursery Manager will agree with the parent how to recognise when the condition is getting worse and when to administer medication. The parent must also complete the a Medication Form so that staff can administer medication. Staff will record all treatments administered on the medication form and ask parents to sign this at the end of every day.

Where the child has an allergy or severe intolerance, the parent will also complete the 'Health Care Plan' so that staff can be aware of the child's needs and know how to appropriately respond should the child come into contact with one of their triggers.

Epi-Pens, long term medicines and antihistamine will be stored in a clear container/bag, clearly marked with a photo and the name of the child. This will also contain a copy of the child's Health Care Plan. All relevant staff working directly with the child will be trained in administration and location of the medication. Advice from the parent and/or health professional may be sought to deliver training as required. Where long term medication relates to an allergy the Appendix Lb (long term medication form) is attached to the back of their health care plan and retained in the box with critical medicine in the individual's room.

A copy of each child's care plan will be stored in a red folder in each individual child's playroom. This folder will be transported in the evacuation bag in the event of garden time, outings, evacuations, or any other time they leave the child's playroom.

RECORD KEEPING AND SAFE STORAGE

Medication forms must be held by the nursery, completed by the member of staff administering or applying the medication, with a witness for controlled drugs, and then signed by the parents to acknowledge administration as appropriate. Storage instructions for medication will be adhered to by the nursery. Parents are requested to hand all medicines to a member of staff when signing in their child, and not to leave any medication in their child's bag.

Medicines should be stored strictly in accordance with product instructions (particularly temperature), and in their original packaging as detailed above. A clearly labelled and sealed medicine box is stored in the fridge. Emergency medicines e.g., asthma inhalers, epi-pens, and antihistamines, should be readily available, but must be out of reach of children. Medication for life threatening conditions should be kept in the medicine cabinet of the individual child's playroom and transported in the evacuation bag in the event of garden time, outings, evacuations, or any other time they leave the child's playroom.

Parents must record with staff, any medication and dosage amount previously administered to the child before they arrived at nursery prior to leaving their child in our care.

SELF-MANAGEMENT

We support and encourage older children develop an understanding of, and begin to take responsibility for managing their own medication, e.g. inhalers, whilst supervised by a qualified member of staff.

MEDICATION ON TRIPS, OUTINGS AND OTHER ACTIVITIES

During trips and outings, the child's Health care plan, medicine form and any other documentation pertaining to the safety and health of the child, along with medication that may require administration whilst outside of nursery premises will be taken. Antihistamine will be taken on trips in case a child shows signs of an allergic reaction and will be administered in accordance with the directions for use. Procedures will be followed in accordance to those applied whilst Little Lancing Day Nursery, in terms of record keeping and administration by a suitably qualified practitioner. All staff are aware of, and follow, emergency procedures and will always have a fully charged mobile phone on hand.

ROLES AND RESPONSIBILITIES – STAFF AND PARENTS

Full co-operation between staff, parents, health professionals and other agencies is fully endorsed in order to safely manage the child's individual requirements (in association with the Education Act 1996 and The Children Act 1989).

Only L2 (whilst supervised by a L3) or a L3 practitioner and paediatric trained staff may administer medication. All forms are countersigned by a witness. Information is shared on a need-to-know basis and medical information is treated in confidence. The company has Employers Liability insurance which covers staff acting within the scope of their employment and a H&S Policy detailing the medication policy. Staff managing the administration of medicines receive appropriate training and support from health professionals where applicable, and this is regularly updated as required.

If there are any concerns regarding parental requests and the Nursery medication policy, the Nursery Manager will seek advice from the child's GP or other agency.

REFUSAL OF MEDICINE

Staff will not force a child to take medication that has been refused, for example, eye drops. A record is made, and parents will be notified. Emergency services will be contacted in line with procedures if necessary.

SICKNESS

Little Lancing has an obligation to promote the health and hygiene of all children, parent/carers and staff and to minimise the risk of infection. If a child becomes unwell or has an illness or infection parent/carers will be asked to collect the child from nursery. Children should remain at home until they are well enough to return or until the exclusion period for illness/communicable disease has passed. Young children under the age of 5 years old are particularly vulnerable.

On suspecting that a child is ill, our first action is first aid followed by contacting the parents as soon as possible to arrange a plan for the child to be collected.

IF YOUR CHILD IS UNWELL BEFORE COMING TO NURSERY

Parents are asked not to send their child into nursery if they are clearly unwell, have a temperature or have experienced a bout of sickness or diarrhoea. We ask that parents do not administer medicines, such as Calpol, to mask symptoms of sickness or infectious illnesses before sending their child in. If the child is unwell, it will become apparent as the Calpol wears off and parents will be contact to collect their child. If Calpol is administered at home for other pain relief or for teething, parents are requested to inform the nursery so that we are aware of the situation.

Minimum exclusion periods for the common childhood illnesses are overleaf:

Diarrhoea and Sickness 48 hours after symptoms of vomiting and/or diarrhoea have stopped.

If a child has diarrhoea or vomiting whilst at nursery and is also clearly unwell, we will contact parents to collect them.

However, if a child does not display any additional symptoms and has one episode of diarrhoea or vomiting, staff will monitor the child closely and will contact their parent to collect them if they have a recurrence or if we have any further concerns.

Giardia Cryptosporidiosis As above. Exclusion from swimming is advisable for two weeks after diarrhoea has settled.

Chicken pox Exclusion is until the last blister has scabbed over. Can affect pregnancy if the woman has not already had the infection. Report exposure to GP/Midwife.

Shingles No exclusion providing they feel well enough and the rash can be kept covered by clothing and is not weeping fluid. Pregnant women and people with weak immune systems should avoid contact and if concerned they have not had chickenpox seek advice from a health care professional.

Measles & German Measles (Rubella) **NOTIFIABLE.** 4 days after the onset of the rash for measles and 5 days for German measles (rubella). Please respect this exclusion because of the likelihood of contact with women in early pregnancy whose babies are very much at risk.

Glandular Fever No exclusion but may continue to feel tired and unwell for weeks.

Mumps **NOTIFIABLE.** 5 days after the onset of swelling. Siblings can attend as normal.

Scarlet fever **NOTIFIABLE.** 24 hours after starting appropriate antibiotics.

Streptococcal 24 hours after starting appropriate antibiotics and when clinically well.

Conjunctivitis (pink eye) No exclusion unless symptoms are particularly severe and causing distress. PHE notified if there are a number of cases on site parents may be requested to not bring in their child until the infection has cleared up. Drops provided by pharmacist rather than GP are acceptable just for this condition.

Molluscum contagiosum No exclusion, self-limiting condition

Ringworm No exclusion usually, however treatment is required and it is important the rest of the family/close contacts are checked.

Scabies Exclusion for 24 hours after the first application of treatment has been completed. Everyone in the household is to be treated, regardless of symptoms.

Whooping cough **NOTIFIABLE.** Exclusion is 48 hours from starting antibiotic treatment or 3 weeks after the coughing bouts started (whichever is sooner).

Impetigo/Erysipelas Until lesions are crusted or healed or 48 hours after starting treatment. Those in contact with sufferers do not need to be excluded.

Verrucae No exclusion, sufferer should keep feet covered.

Head/body lice Treatment is recommended in cases where live lice have been seen. Severe or repeat cases may result in exclusion at the discretion of the

nursery manager.

Cold sores	No exclusion, avoid kissing and contact with the sore.
Hand, foot, mouth	Until well enough to return. There's no need to wait until all the blisters have healed.
Common Cold	Only if feverish or feeling unwell.
Croup	Until well enough to return.
Influenza/other pandemic illnesses	Exclusion until recovered from symptoms – headache, muscle aches, severe tiredness sore throat and cough as still contagious. Little Lancing, as part of Lancing College, will always follow the advice of Public Health England and the Chief Medical Officer in the case of illnesses such as Coronavirus, and advise parents accordingly.
Thrush	No exclusion. Ensure that the child is treated for their own comfort.
Threadworms	No exclusion usually, however, treatment is needed and it is important the rest of the family/close contacts are checked.
Tonsillitis	Child to remain at home until well enough to return.
Meningococcal meningitis/septicaemia	NOTIFIABLE – Exclusion until recovered, preventable by vaccination. No exclusion for close contacts.
Meningitis due to other bacteria	As above.
Meningitis viral	NOTIFIABLE No exclusion (milder illness).
Bronchitis	No exclusion once child is well enough to return.
Bronchiolitis	No exclusion once child is well enough to return.
Tuberculosis (TB)	NOTIFIABLE. Exclusion depends on medical advice. Requires prolonged close contact.
Viruses, parvovirus (slapped cheek syndrome or fifth disease)	Exclusion whilst unwell. Pregnant women and people with weak immune systems should seek advice from a healthcare professional.

If your child has any lifesaving emergency prescriptions eg inhaler, auto injector (Epipen) they **MUST** be brought in whenever the child attends and parents must ensure that staff are fully briefed (trained by medical professionals as necessary) in order to care for your children.

Immunisations are available for some infections for children and adults. The NHS website www.nhs.uk provides the latest information of the national immunisation schedule.

In the case that there are multiple instances of any of the above-mentioned illnesses, the Nursery Manager may require parents of affected children to observe a period of exclusion to prevent further spread and/or re-infection of their own child. Our staff will liaise closely with their manager and parents should they or the child(ren) in their care become unwell.

NOTIFIABLE DISEASES

Should your child be clinically diagnosed as having a notifiable disease, the diagnosing doctor has a statutory requirement to report suspected/confirmed notifiable conditions to the relevant persons

(usually a consultant in communicable diseases control) and/or the local Health Protection Unit (HPU). Parents must also inform the nursery manager or the deputy nursery manager as soon as possible as it is a statutory requirement that we also report notifiable diseases to OFSTED as soon as reasonably practicable and within 14 days of the occurrence. We also notify Public Health England (PHE) in order to seek guidance for any additional control measures to be implemented at Little Lancing. We will also inform Kirsty Keep, who has oversight of the nursery for Lancing College, and the directors of Lancing College Enterprises Limited, who are registered with OFSTED for Little Lancing.

Confidential records of all notifiable conditions that have been reported are recorded for analysis purposes.

Information required for reporting includes (but is not limited to):

- Full name of all affected persons
- Date of Birth
- Home Address
- GP's name and surgery address
- Whether a sample has been provided (depending on infection)
- Details of symptoms being experienced, dates when symptoms started/finished and when they were well enough to return to the site
- The Unit that they are based in/had been working in when the symptoms started
- Control measures being taken to minimise spread of infection eg deep cleaning
- Any other information that may be relevant eg did others eat the same lunch or go to a particular location/venue on a trip?

USEFUL CONTACTS

Surrey and Sussex HPT (South East),

Public Health England, County Hall North, Chart Way, Horsham, West Sussex RH12 1XA

Email: ICC.SurreySussex@phe.gov.uk Telephone: 0344 225 3861 (option 1 to 4 depending on area)

SE.AcuteResponse@ukhsa.gov.uk

Public Health England online

<https://www.gov.uk/government/organisations/public-health-england>

Parents may also find it useful to read the government guidance on Health Protection in schools and other childcare facilities, which is available here:

<https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities>

OFSTED

<https://www.report-childcare-incident.service.gov.uk/serious-incident/childcare/update-incident/>

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Reviewed:	March 2023,
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Next Review:	March 2027

Individual Healthcare Plan

Name of school/setting	
Child's name	
Room name	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	

Family Contact Information

Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	

Clinic/Hospital Contact

Name	
Phone no.	

G.P.

Name	
Phone no.	

Who is responsible for providing support in nursery

Describe medical needs and give details of child’s symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the child’s educational, social and emotional needs

Arrangements for visits/trips etc

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency *(state if different for off-site activities)*

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to

Parent Signature_____ Date_____

Staff Signature_____ Date_____

Reviewed 6 Sept 23