

## 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

The only medication that we can administer to a child is a prescribed medicine. This must have a valid prescription label on it which either must be on the actual medicine or on the box; the staff member must ensure that the contents in the box reflect the prescription label, and is valid at that time (i.e. was not prescribed months prior to illness for something else)

When checking a prescription label, you must ensure it has the following details on;

- Child's full correct name
- Child's date of birth
- Date prescribed
- Expiry date

For new prescribed medication then the child must have had at least 2 doses or equivalent to 24 hours from first dosage before returning to nursery, this is due to the chance of the child having an allergic reaction.

- 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 administering the medicine, a 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, 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 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.

### **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, any such medication must be kept in the person's locker 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. Emergency medication, such as inhalers and auto-injectors, 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.

### **Common illnesses**

#### **Conjunctivitis**

There are two forms of conjunctivitis Viral (non-contagious) and bacterial (highly contagious). If we suspect a child has conjunctivitis, this will usually be if they are exhibiting the signs and

symptoms; Red/pink eyes, weeping usually yellow liquid in the inner corner of the eyes we will follow the following procedure.

We will wipe their eyes using cooled boiled and cotton pads from inner corner to outer corner and leave, if the sticky liquid appears again then the same procedure to be repeated. Then the parent is too be contacted to collect immediately and seek medical advice.

Once the child has been seen by a medical professional and if they diagnose conjunctivitis and prescribe eye drops and first two doses have been applied by parent/carer then the child can return to nursery without any exclusion period.

### **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**

If a temperature rises too high, then there is a chance of a child to suffer from fever. A moderate fever is not harmful, but a temperature above 38 degrees can be dangerous particularly in babies or young children.

Fever can demonstrate the sign and symptoms of; raised temp, looking pale, complains they are cold but is also shivering with chattering teeth as the fever advances the child will have hot, flushed skin, be sweating and generally have a headache. If a child is suffering from a suspected fever, we will comfort child and allow body temperature to drop and contact parents for immediate collection.

### **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.

\* If the child is presenting with any of the identified common coronavirus symptoms ( high temperature/continuous cough/loss of taste, sense of smell) parents will be asked to arrange for their child to take a PCR test to check whether the symptoms are related to coronavirus. If the test is positive the parent will be advised of when the child will be able to return to the nursery in accordance with the most up to date government and public health England guidance.

<b>This policy was adopted on</b>	<b>Signed on behalf of the nursery</b>	<b>Date for review</b>
<i>August 2021</i>	<i>Jane Christofi</i>	<i>August 2025</i>